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The elusive other: a self study action research project with diverse learners in higher education

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Southern Cross University

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The Elusive Other: A Self-Study Action Research Project with Diverse Learners in Higher Education

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A thesis submitted in total fulfilment of the requirements of the
Degree of Doctor of Philosophy

March 2013
DECLARATION

I certify that the work presented in this thesis is, to the best of my knowledge and belief, original, except as acknowledged in the text, and that the material has not been submitted, either in whole or in part, for a degree at this or any other university.

I acknowledge that I have read and understood the university's rules, requirements, procedures, and policy relating to my higher degree research award and to my thesis. I certify that I have complied with the rules, requirements, procedures and policy of the university (as they may be from time to time).

Kay Denise Distel

Signature____________________ Date:________________
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ABSTRACT

Mature-age diverse learners in higher education need recognition and support. Even with the Disability Discrimination Act of 1992 in Australia, these learners remain largely unrecognised and unsupported within existing higher education legislation and practices. This research explores how teaching practices could maximise learning and well-being support by engaging such learners more fully using methods linking prior learning experiences and health issues and maximising empowerment.

The research involved eight mature-age students, six women and two men, at an Australian regional university. The investigation focused on the effects of such invisibility on these diverse learners, exploring the psychological, social and health effects of their participation.

Initially planned as participatory action research, the methodology evolved into self-study action research as my own role as practitioner researcher became integrated within the research. This allowed exploration of my approach to empowerment, serving my values as my “lived experience”. The research narrowed over three action research cycles as the focus broadened from dyslexia to diverse learners. By the third cycle, both health and learning issues were discussed in keeping with a social learning model. Collaborative decision-making processes were individualised; action learning strategies included self-listening and self-regulation methods.

The data analysis involved two stages. In the first, co-researchers focused on listening and dyslexic characteristics checklists to start conversations then later identified individual codes and produced learning stories. The second stage, a thematic analysis, revealed co-researcher learning stories and their commonalities and differences. Synthesised, these identified two themes: firstly, that to their learning the co-researchers brought negative prior learning stories reflected in their learning styles; secondly, that in their learning environments they now experienced inconsistent learning support and understanding of their disability, inadequate supervision, and varying degrees of marginalisation and vulnerability.

The research concludes that mature-age diverse learners need more attention to be paid to linking their learning experiences and health issues. Stress and vulnerability can be exacerbated by fractured inconsistent engagement with educators, inadequate supervision,
varying degrees of marginalisation, inconsistent learning support and misunderstanding of their disability by support staff.

My recommendation for increasing engagement with hidden minority diverse groups and increasing awareness and action for their issues is using self-study action research in the professional development of higher education support staff and educators. Further research needs to challenge and develop processes at all institutional levels to make these issues more transparent in support and teaching policy and practice, so that tertiary institutions work more directly towards becoming an inclusive habitus.
<table>
<thead>
<tr>
<th>Abbreviation</th>
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<tbody>
<tr>
<td>AALL</td>
<td>Australian Association for Language Learning</td>
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<tr>
<td>ABS</td>
<td>Australian Bureau of Statistics</td>
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<td>ABT</td>
<td>Applied Behavioral Therapy</td>
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<td>ACE</td>
<td>Adult Community Education</td>
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<td>ADA</td>
<td>Australian Dyslexia Association</td>
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<tr>
<td>ADD</td>
<td>Attention deficit disorder</td>
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<tr>
<td>ADHD</td>
<td>Attention deficit hyperactivity disorder</td>
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<tr>
<td>ALARA</td>
<td>Action Learning, Action Research Association</td>
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<tr>
<td>ALTC</td>
<td>Australian Learning and Teaching Council</td>
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<tr>
<td>AP</td>
<td>Auditory Processing</td>
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<td>APA</td>
<td>American Psychology Association</td>
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<tr>
<td>AR</td>
<td>Action research</td>
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<tr>
<td>AUQA</td>
<td>Australian Universities Quality Agency</td>
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<tr>
<td>AUSPELD</td>
<td>Australian Association for Specific Learning Difficulties</td>
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<tr>
<td>AVCC</td>
<td>Australian Vice Chancellors Guidelines</td>
</tr>
<tr>
<td>CAPA</td>
<td>Council of Australian Post Graduate Associations</td>
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<tr>
<td>CF</td>
<td>critical friends</td>
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<tr>
<td>CFS</td>
<td>Chronic fatigue syndrome</td>
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<tr>
<td>COAG</td>
<td>Council of Australian Governments</td>
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<tr>
<td>CQU</td>
<td>Central Queensland University</td>
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<tr>
<td>CSU</td>
<td>Charles Sturt University</td>
</tr>
<tr>
<td>DAST</td>
<td>Dyslexia Adult Screening Test</td>
</tr>
<tr>
<td>DDA, 1992</td>
<td>Australian Disability Discrimination Act 1992</td>
</tr>
<tr>
<td>DEET</td>
<td>Department of Education, Employment and Training</td>
</tr>
<tr>
<td>DEEWR</td>
<td>Department of Education and Work Place Relations</td>
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<tr>
<td>EPHEA</td>
<td>Equity practitioners in Higher Education in Australasia</td>
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<tr>
<td>Abbreviation</td>
<td>Description</td>
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<td>--------------</td>
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<tr>
<td>FYE</td>
<td>first year experience (in higher education)</td>
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<td>GGPs</td>
<td>good practice principles</td>
</tr>
<tr>
<td>HAC</td>
<td>Hawkesbury Agricultural College</td>
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<tr>
<td>HE</td>
<td>Higher education</td>
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<tr>
<td>HREC</td>
<td>Human Resources Ethics Committee</td>
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<tr>
<td>IDA</td>
<td>International Dyslexia Association</td>
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<tr>
<td>LD</td>
<td>learning difficulties</td>
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<tr>
<td>LDA</td>
<td>Learning Difficulties Australia</td>
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<tr>
<td>LSES</td>
<td>low socio economic status</td>
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<tr>
<td>LSP</td>
<td>Learning support person</td>
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<tr>
<td>ME</td>
<td>Myalgic encephalitis</td>
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<tr>
<td>MRI</td>
<td>Magnetic resonance imaging</td>
</tr>
<tr>
<td>NAPLAN</td>
<td>National assessment program – literacy and numeracy</td>
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<tr>
<td>NESB</td>
<td>non-English speaking background</td>
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<tr>
<td>NSW</td>
<td>New South Wales</td>
</tr>
<tr>
<td>OECD</td>
<td>Organization for Economic Co-operation and Development</td>
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<tr>
<td>PAR</td>
<td>participatory action research</td>
</tr>
<tr>
<td>PISA</td>
<td>International programme for international student assessment</td>
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<tr>
<td>PTSD</td>
<td>post-traumatic stress disorder</td>
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<tr>
<td>QUT</td>
<td>Queensland University of Technology</td>
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<tr>
<td>REA</td>
<td>right ear advantage</td>
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<tr>
<td>SCU</td>
<td>Southern Cross University</td>
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<tr>
<td>SI</td>
<td>supplemental instruction</td>
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<tr>
<td>SIL</td>
<td>supplemental instruction leadership</td>
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<tr>
<td>SLD</td>
<td>specific learning difficulties (dyslexia)</td>
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<tr>
<td>SMH</td>
<td>Sydney Morning Herald</td>
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<tr>
<td>Speld Q</td>
<td>Specific Learning Disabilities Association of Queensland</td>
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<tr>
<td>SSAR</td>
<td>self-study action research</td>
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<tr>
<td>USA</td>
<td>United States of America</td>
</tr>
<tr>
<td>USQ</td>
<td>University of Southern Queensland</td>
</tr>
<tr>
<td>UWS</td>
<td>University of Western Sydney (Hawkesbury)</td>
</tr>
<tr>
<td>ZPD</td>
<td>zone of proximal development</td>
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KEY TERMS AND DEFINITIONS

Affect Regulation is maintaining the dynamic balance between cognition and feeling.

Auditory processing (AP) refers to the neurological process of listening.

Contrapuntal is a term used by Gilligan (2003) to mean listening to the nuances of the speaker’s voice to discover the unconscious ‘turning points’ such as when there is a movement or awareness towards a desired outcome.

Dissociation is a term used by Gilligan (2003) to express the ‘gap’ that occurs when inner and outer reality does not match up.

Diverse learners are those who learn differently, for example can flexibly use multiple senses; can mean a learning style strong on ‘novel’ ways of learning and creativity.

Disorientation means “to lose one’s position or direction in relation to the true facts and conditions in the environment; to lose touch with reality to some degree” (Davis, 2003, p. 346).

Expressive listening is a term from Tomatis (1996) for those issues which suggest a lack of ear/voice control, for example, someone who constantly talks too loudly or too softly.

I-poem is the poetic form used to reveal the intangible feelings (Gilligan, 2003) within a piece of text by taking out all the words to leave the basic ‘I’ and the following verb.

Learning style: a preferred way of learning and may not be conscious to the person. Many models exist which can help self-development and learning. I used a sensory model of learning style after Kolb as part of the analysis of the learning stories; these are visual, auditory or kinaesthetic.

Receptive listening: a term used by Tomatis (1996) to indicate issues with the regulation of the ear/brain connections. For example, when needing to repeat instructions, being constantly distracted, and have difficulty following conversation in a noisy environment.

Self-regulation: “Despite variations in the theory of how self-regulation is achieved, it is generally perceived to be an attribute of a dynamic ongoing organism process - a movement towards balance, self-expression and health” (Carroll, 2009, p. 1).

The Listening Guide is a four-part analysis of listening from the work of Gilligan (2003).

The Listening Checklist is a holistic view of listening (Madaule, 1993). Used in this research to gain understanding of voice/ear/brain connection and stimulate questions on listening.
Chapter 1.
The Elusive Other: Listening to Bodymind

This thesis tells a story about research and action with co-researchers who are diverse learners. The project began as participatory action research (PAR) and evolved to self-study action research (SSAR). By undertaking this research, each co-researcher was enabled through a variety of ways to continue their journey within higher education despite studying in educational environments that were mostly non-supportive and marginalising.

The backdrop to this study is my training background in body psychotherapy, a practice which helps people with stress, mental health and psychosomatic issues. My interest in dyslexia began when an adult psychotherapy client told me he was dyslexic and described how he had been failing his University course. My interest grew as he spoke of turning this around following a music sound program with Dr A Tomatis in Paris. This was a new concept to me in the 1980s and led to my learning and studying with Tomatis. This forms the core of my professional practice and answers questions concerning the connections between listening, learning and health and the concomitant link to affect and self-regulation.

This chapter outlines the aims and objectives of the research, the significance and details of my approach, and the contents of each section. My writing style is reflective and endeavours to embody the invisible non-verbal aspects of the learning styles of both myself and my co-researchers. Finally, there is a summary of the findings and conclusions of the research.

1.1 Background to the Research

As a Listening Consultant, I work directly with children with dyslexia and their families and other learning disabilities. I have heard many stories of hardship, particularly during their schooling, and wondered whether these students had received the help needed for them to progress educationally. Furthermore, I questioned the social, health and education consequences of dyslexia in Australia. My work each day is fulfilling as I see profound changes in my clients and celebrate this. Currently I work with listening programs to help clients with listening, language and learning difficulties, and have an affinity with people with dyslexia. My knowledge of dyslexia was limited, although I had professional training in perception and learning. I subsequently learnt that I have a family connection to dyslexia.
through a brother’s child. However, as my family is resilient, even if there is a dyslexic trait, it is more the independent, creative and problem solving aspects that prevail.

The listening methodologies that I apply have an impact upon auditory processing, self-regulation, self-worth, and well-being, facilitating an opportunity to ‘catch up’ following intervention. Outwardly these individuals become motivated learners. However the invisible stigma continues, particularly if the environment does not acknowledge their unique learning style, that is, one that is focused upon relational and student-centred pedagogies. I work with many other clients with learning issues on the full spectrum, from Autism Spectrum Disorder (ASD), intellectual disabilities, mental health issues, and adults with voice, hearing and ear problems to the elderly with balance and hearing issues. The auditory processing model I use improves educational outcomes by both stimulating and balancing the neuro-functioning of the voice ear brain.

As my listening practice grew, I became despondent. Although my program results were generally making life changing improvements in listening and learning, I continued to hear stories from parents about disempowerment and lack of joy in students who were not learning, sometimes giving up and ultimately developing mental health issues. Why was the pattern of disconnected students in the system not changing? Was it a pedagogical issue, or perhaps a result of stress or genetics? Often those with dyslexia who had undertaken my program would need to relearn basic concepts, having missed basic literacy learning. They needed intensive direct teaching to become proficient and to change the course of their education. This type of help is often not available because “they were not bad enough to warrant it” (BJ, personal communication, 2005).

When I first started working in the auditory processing field, the link between auditory processing and learning was not recognised by educators. Although parents would report that changes were constantly happening at home following my program, the teachers often did not perceive any change in the child. Further, parents told me that often in the classroom their children were shunned, or rendered silent out of fear of ridicule, and spent their school time feeling anxious, waiting to be caught out and exposed. The children already knew they were different and often had no safe space or opportunity to talk about their strengths. Rather, it was their weaknesses that were covertly sanctioned in most classrooms. Some children firmly believe there is something wrong with them, so they struggle and become a chameleon in order to fit into a system that supports one way of doing things. Low self-esteem is common, and after a certain age this feeling may become increasingly difficult to reverse when there is not a climate of inclusion and tolerance in the habitus of the school. Despite the best of parent
care, some children still develop a variety of negative emotions (Frank, 2004). My research question began to form: Was it the dissonance between the labelling and the learning environment which was causing my unease? My question then became: How can education environments support a process of positive change for these individuals?

The overriding principles I hold are empowerment and self-regulation. I value a bodymind theoretical framework of listening and body work. In this chapter I discuss how self-regulation theories are now used across the diverse disciplines of psychiatry, psychology, neuro-development psychology, biology and social psychology. For example Sharma, Purdy, & Kelly (2009) discusses how auditory processing, language, and reading disorders are associated and suggests the importance of listening as learning and social communication.

My research shows the interconnectedness and influence that the above disciplines have in the development of auditory processing listening; these underpin and strengthen my conclusions.

1.2 Aims and Objectives
The intention of the project changed as it evolved from PAR to SSAR. My initial overall intention was to explore the social and psychological effects of Specific Learning Difficulties (SLD) particularly dyslexia. Specific objectives emerged as the research evolved into three cycles; there was a change in focus from dyslexia to diverse learning, with an emphasis on myself and my own reflective and reflexive learning.

1. PAR Cycles 1 and 2 aimed to facilitate the learning of adults in higher education who identify with specific learning difficulties (SLD), particularly dyslexia.
2. SSAR Cycle 3 aimed to facilitate the learning of adults in higher education who have diverse learning styles and health issues.
3. I personally aimed to improve my reflective learning processes and my reflexivity as a practitioner and researcher.

1.3 Significance
As a self-study action research project this research has made a contribution to knowledge development on several levels. Firstly, the complexity of the higher education experience of the mature-age student with dyslexia, diverse learning and those with chronic health problems has been revealed. They are the Elusive Other in that the learning experiences, health issues and links are either unrecognised and/or unsupported within government policy, legislation, higher education policy and practice within the particular habitus of the research.
The research has contributed to a further understanding of exclusion, disconnection, stress, vulnerability, marginisation, and the resultant impact of a lack of consistent support that can be experienced by people with dyslexia or diverse learning, in particular mature-age students. It is considered that educational practices can be further enhanced so as to support these students within the higher education setting, a realm that can be stressful for already vulnerable people. Importantly, the various levels of prior education and life experience that the mature-age student brings to their learning experience require a research focus. Therefore this project has focused on perception and practices within a current deficit of and changing approach to dyslexia and diverse learning.

This research also focuses on the application of bodymind listening practices that can assist self-regulation, reduce stress and vulnerability, and enhance educational progress.

The application of these techniques has implications for teaching and learning with adults with diverse literacy or ESL challenges, those with temporary stress, or those with chronic stress created or exacerbated by the challenges they face in the course of their tertiary education. Other areas of related application are student-centred learning, curriculum development and student support services.

Finally the research has contributed to a broader understanding of the contribution that SSAR can make to the professional development of practitioners, above and beyond the predominant utilisation by education professionals.

1.4 The Research Approach

From these AR cycles and the analysis of the data, I demonstrate how listening principles can improve and support both professional practice and co-researchers’ learning and life skills. As I gained a deeper understanding of the culture and andragogy of the co-researchers as a diverse group, my inclusive practices developed. The whole nature of my enquiry was to understand how to facilitate the learning of adults who identify with specific learning difficulties (SLD) and diverse learning.

A qualitative approach was considered the most appropriate. Coming from individual private practice, I was aware of the power relationships in my client relationships. I have often been perceived as all knowing and able to fix everything, whereas my intention is to help people embody their experiences (empowerment), act on their new listening status (communication), and share this new knowledge with others (self-confidence and worth). I wanted a context in which I could explore the issue of dyslexia in a more equitable way. For me, action research was an ideal methodology as it acknowledges the subjective–objective dichotomy, my
subjectivity through my values, participation, reflective practices and action. However, following my first action research cycle, where I used PAR, I failed to engage sufficient numbers of people with dyslexia to warrant such an approach. From reflection and feedback with the co-researchers, my focus shifted to my process of professional development, as I refined my understanding of what I was doing. I learned that the label of dyslexia may be part of the reason for the lack of interest in the research and I thought about including diverse learners as a way of overcoming the stigma of the dyslexia label by exploring different learning styles, to attract greater interest in the research project.

An emancipatory study fitted with a self-study action research (SSAR) framework. The therapeutic nature of learning from self by placing the I-researcher at the centre of the enquiry, for generating new ideas, along with the responsibility and accountability of the researcher (McNiff, 2006), influenced my thinking about the research. SSAR informed by critical theory is an approach that embraced and legitimated my values within the research and that honoured my espoused professional values about relationships and inclusion. Further, this approach gave me greater opportunity to explore my primary value of empowering engagement with myself and the co-researchers.

The focus of the research agenda narrowed over the three action research cycles (AR1, AR2, and AR3), and I found that my own journey, the lived experience, needed to be more fully examined and integrated within the research process in order to reflect a SSAR approach. By shifting the balance to include myself and co-researchers, it meant I could justify and extend the project to include diverse learners as co-researchers. I defined diverse learners as those who perceived themselves as learning differently, perhaps because of external pressures or circumstances such as ill health, race or age-related issues.

In advertising and discussing participation in the AR2 cycle, I changed to using the term ‘diverse learners’ and aimed to focus on participants’ individual learning needs. By the third cycle of AR the focus had shifted significantly to the link between learning and health. I realised that a social model of learning was more appropriate than the medicalisation of learning which a label of dyslexia invites. I began to look more in-depth at my role of practitioner researcher. Recruiting for the third cycle, I used the term ‘diverse learners’ and during this time I implemented more reflective practices related to my professional development. The structure of AR3 was informal meetings in groups and individuals, with more ad hoc individual researcher co-researcher meetings and follow-up by email and phone. From this cycle two groups emerged. One was a teacher group which met three times; the second, a postgraduate student group that met for four meetings. One person from AR1
followed to the postgraduate student group; another co-researcher from that group joined AR3 for individual meetings. The meetings within the AR cycles generated data collected through note taking in AR1; and through audio taped interviews, reflective conversations in meetings, and phone and email conversations in AR2 and 3.

The nature of the project suggested a need for more than one method for analysing the data at different points in the three cycles. The analysis occurred in two stages. Firstly, during the action research cycles I used the Listening Guide (Gilligan, Spencer, Weinberg, & Bertsch, 2006), which is focused on listening to both the tangible and the intangible parts of conversations to identify the attributes of deep listening. For example, the initial listening was to listen for the plot the tangible part, while listening for the subtle sensory changes of the second and third listening to the intangible parts have their origins in the arts. The contrapuntal (a musical concept) listening was where I listened to the sound of the voice to identify a crescendo or change point and deeper connection (Gilligan, 2003). The other intangible process, the I-poem, is a form of poetry. The process is to strip the text down to leave only ‘I’ and the verb to reveal the underlying feeling (Gilligan, 2003). A thematic analysis (Richardson-Trench, Taylor, Kermode, & Roberts, 2011), the second stage of analysis, occurred after the completion of data collection.

The research was conducted in one multi-campus university in a regional area of New South Wales, Australia. A total of nine co-researchers were involved, with three participating in two to eight hours contact time, and six co-researchers participation ranging from 10 to 30 hours contact time. The institutional setting was rural. All co-researchers were mature-age over 40 years old. Two co-researchers were undergraduate students and new to tertiary studies. The remaining co-researchers were postgraduate students, and one professional staff member. Therefore, all but two co-researchers had experienced tertiary studies at other institutions in Australia. The co-researchers told stories of their early schooling and learning experiences at other universities and their current university.

In Table 1.1 each co-researcher is identified together with the main theme that was revealed in their story and the relevant AR cycle.
Table 1.1 Co-researcher’s main themes and action research cycles by year.

<table>
<thead>
<tr>
<th>Co-researcher</th>
<th>Main themes revealed in their stories/ story</th>
<th>AR cycles by year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ch 4</td>
<td>The Gm Dyslexia Study</td>
<td></td>
</tr>
<tr>
<td>Ch 4 Gm</td>
<td>Effects of early diagnosis, positive attitude to dyslexia, the struggle and conflict between lecturers in writing papers at postgraduate level.</td>
<td>Short-term AR3 2008 INDIVIDUAL</td>
</tr>
<tr>
<td>Ch 5</td>
<td>The Health Learning Link: the Core of Affect and Self-regulation</td>
<td></td>
</tr>
<tr>
<td>Jas</td>
<td>Health issues and self-awareness of the bodily manifestations of affect changes.</td>
<td>AR1 GROUP 2006</td>
</tr>
<tr>
<td>Gst</td>
<td>Chronic fatigue and the story of a gifted child: bullied, home stress and underlying learning issues. Affect changes of disorientation, dissociation and problems with self-regulation.</td>
<td>AR1 GROUP 2006 &amp; Health Group, 2008 INDIVIDUAL</td>
</tr>
<tr>
<td>Ph</td>
<td>Hidden auditory processing issues, self-regulation and affect regulation awareness.</td>
<td>AR3 2008-2010 long term, meetings over 2 years INDIVIDUAL</td>
</tr>
<tr>
<td>Ch 6</td>
<td>Health and Diverse learning in the Habitus of higher education</td>
<td></td>
</tr>
<tr>
<td>Health group</td>
<td>Group of four participants: two following on from previous work (Gst, Ma) and two others La and Mt. The problems for isolated postgraduate students with a hidden disability, reflective sharing of writing on ‘disability’ and reflecting positively on affect regulation.</td>
<td>Short-term Four meetings AR3 2008</td>
</tr>
<tr>
<td>Ma</td>
<td>Long-term health issue and resultant difficulties in organizing assessment requirements, isolation and fluctuations in stress levels.</td>
<td>AR3, Health Group 2008 &amp; Long-term meetings over 2 years 2008-2010 INDIVIDUAL</td>
</tr>
<tr>
<td>Supa</td>
<td>Post-traumatic stress and dyslexia. Overall positive action orientated person, marginalization, disorientation/dissociation issues. Limitation of help by student services despite her reaching out.</td>
<td>Long-term meetings over 2 years AR3 2008-2010 INDIVIDUAL</td>
</tr>
<tr>
<td>AD</td>
<td>Long-term student effects of studying with dyslexia</td>
<td>One meeting of two hours</td>
</tr>
</tbody>
</table>
1.4.1 My research contexts: Theories that inform my practice and the research

1.4.1.1 Self-regulation: Exploring how the bodymind works.

The following discussion explores the relevance of self-regulation as a personal value, which informs my private practice, together with the biological evidence for the role of this concept in learning. To give the historical context, I have where possible referred to the original work by foundational practitioners such as Boyesen (1981), Reich (1973) and Tomatis (1992).

My early understanding of self-regulation is as a physical and emotional regulation of the human organism in balance or as functioning optimally. On a biological level, the assumption is the body automatically adjusts itself such that there is a homeostasis or a dynamic balance existing in the sympathetic and parasympathetic autonomic neural systems and the whole of the nervous system (Kunert, 2005). These systems can be either hyper-tense or hypo-tense, producing the behaviours of fight or flight. Any input involves an adjustment to this dynamic interplay between the body and the mind (ibid). For example, we can very quickly influence our thoughts and feelings by what we put into the body, which then determines the nutritional state which in turn affects our emotions, to influence the variability of the heart beat and change blood pressure (ibid). When the organism is in stress or an extreme traumatic situation, the self-regulation results in a chemical response that may shut down or at least change the mix of chemicals going to the brain and body. Hence the fight or flight reaction to other responses that occurs at the same time can impact negatively on our overall health and well-being.

One influential factor is trauma early in life. The pioneering work of an early initiator, psychiatrist Thomas Verny, explored how the prenatal traumatic experience can have a lifetime effect (Verny & Kelly, 1981). This insight came to him when visiting a family in the country, where the hostess was pregnant. Most evenings he found her softly singing to the unborn child. After the birth he heard from the mother that the song she sang prenatally:

had a magical effect on him, I was intrigued. It seemed that no matter how hard the baby was crying, when Helen began singing that song he quieted down. Was her experience unique, I wondered, or did a woman’s actions, perhaps even her thoughts and feelings, influence her unborn child?

In the 1970s the idea that rhythmic sound could influence the prenatal environment and early years had already been suggested by Dr A Tomatis, a French ear, nose and throat (ENT) specialist. Verny (1989) later started an international association, a forum for individuals from multi-disciplinary backgrounds interested in psychological and biological aspects of the prenatal and perinatal birth experience. Dr Tomatis spoke at their First International Congress in Toronto.

One of the first association journals featured the work of Dr Tomatis and his method. Verny (1989) suggested that the work by Tomatis explained the relationship between stimulation of the auditory system and the unblocking of emotions in children and adults. These were the emotions that had become blocked before and after birth. In other words, Tomatis had made the link between auditory processing, emotional states and learning. Also featured was an article by Tim Gilmore, which also appeared in the book *About Tomatis Method*, the first compilation of articles, written in English (Gilmore, Madaule, & Thompson, 1989).

### 1.4.1.2 A historical context.

“Despite variations in the theory of how self-regulation is achieved, it is generally perceived to be an attribute of a dynamic ongoing organism process – a movement towards balance, self-expression and health” (Carroll, 2009, p. 1).(my emphasis)

The seeds of a scientific model of self-regulation were based on the biological principles that homeostasis was the process of maintaining the stability of the organism’s internal self-regulation (Rodolfo, 2000). It was first observed by the French physiologist Claude Bernard (1813–1878), one of the founders of modern experimental medicine. While he valued the role of medical statistics in clinical medicine, he viewed experimental medicine as potentially misleading in laboratory-based physiology (Morabia, 2007). It was left to Walter Cannon (1967), an American physiologist influenced by Bernard’s work, to standardise the idea of homeostasis. He used the dynamic balance of the heart rate, body temperature, breathing, blood pressure, and metabolism to work out a certain range for physical well-being, and indeed for survival (Cannon, 1967). Cannon’s ‘fight or flight’ stress response was perceived as the action of the sympathetic nervous system. The complementary function of the parasympathetic nervous system is associated with rest, digestion and relaxation.

From that beginning, the idea of homeostasis became the proto-type for the broader term of self-regulation to describe the internal rules of the bodily system. In psychotherapy this
concept was taken up to describe how this automatically happens in understanding sensory perceptions in learning styles (Rogers, 1951). Examples are visual, auditory and kinaesthetic learning (Clark, 2000), the relationship of the auditory sense to musical training (Trainor, Shahin, & Roberts, 2003) and the long-term enhancement of visual spatial, verbal, and mathematical performance in children (Schlaug, Norton, Overy, & Winner, 2005).

During the 1920s and 1930s in Europe there were many ideas about emotion and the relationship between mind and body. Discoveries across the fields were all inspired by the principles of a living system which were understood and ready for therapeutic application. Cannon (1967), and his felicitous phrase, “the wisdom of the body” assisted therapists to make the link between homeostasis and bodymind self-healing (Carroll, 2009; Kunert, 2005). The broad term of self-regulation gained momentum in the last fifteen years and has been adopted and influenced by philosophy and a range of theorists. Of particular interest is the interdisciplinary work of Schore (2002), Damasio (2000), Panksepp (2009), Siegel et al. (2009) and above all Porges (2011).

In psychotherapy, the simple cause and effect and flight/fight models act as a closed system and reflect the metaphor of the brain as a mechanical model. This model is fast giving way to interactive holistic ecological open system models. It was the concepts within the work of Porges that resonated with my initial practice in bodymind affect regulation. This new approach renders the original flight/fight ANS model less convincing. The understanding from modern technology of brain scans and brain plasticity has shifted the scientific thinking towards more detailed holistic functional models. These new models show the interactive and relational nature of the body responsive to the environment and where the sensory proprioceptors can influence our responses through sound, light and movement. Porges (2011) has developed a model and has extended the theory of the autonomic nervous system (ANS).

1.4.1.3 Self-regulation as a spontaneous process of self-healing.

The work of Reich in the 1950s signalled the start of an era of body psychotherapy and clinical practice using the concept of self-regulation. Before Reich (1897-1957), Jung (1875-1961) believed symptoms and dreams were an important aspect of self-regulation, which, if not attended to, could become unconscious and compromise actions (Jung, 1923). Reich, a student of Freud (1856-1939), left his mentor to focus his attention on the body’s processes of restricted breathing as a defence to feeling.
Reich (1973) viewed muscle tension as a defensive mechanism. He observed changes that loosen tension, such as breathing, and directed movements, sound, and changes in skin colour and body temperature, as a signal for freeing up the energy flow of the whole body. Subtle intervention with the body tensions to achieve a more dynamic self-regulation is a core practice concept of body psychotherapists. Other systems, such as Gestalt, use the term “organism self-regulation” to describe the capacity of the individual to know or to sense through the body what the person needs (Perls, Hefferline, & Goodman, 1994). If there was repression of feeling and an incomplete process, for example unexpressed feelings about certain life events, these feelings could come again in the context of therapy and be resolved. Intervening in the parasympathetic sympathetic balance of the clients was an answer to the grounded Freudian descriptive notion of ‘repetition compulsion’ as it was transformed into a purposeful, self-regulatory context and was empowering.

The relationship to the client was the focus: it was important to be actively participating and relating. To highlight the importance of the relationship and the ‘trust in the process’ of helping to complete their own self-regulatory cycles, Boyesen (2001) used a metaphor: the therapist became a therapeutic ‘midwife’. Applying this principle to the use of touch, she discovered that a self-regulatory mechanism could be activated by connecting touch to the peristaltic sounds emanating from the gut (the end part of the vagal neural system). The key elements in the approach were trust and listening on all levels. The therapist needs to be present to attend to the phenomenon of the body, without interpretation and urgency, so that the client’s own spontaneous bodily response would move towards health.

1.4.1.4 Understanding the autonomic nervous system and the vagus nerve.

It has long been understood that the autonomic nervous system has two branches, the sympathetic, and the parasympathetic, the “fight or flight” response. In my training the sympathetic was perceived as the ‘up’ energy whilst the parasympathetic system, perceived as the ‘down’ energy, was the relaxation and balancing effect. This model of the autonomic nervous system evolved into various balance theories, with the aim of improving the cycle of both sympathetic and parasympathetic innervation. Most organs of the body have ANS innervation to the heart, the lungs and all the way down to the gut and peripheral nerve branches. Most of the parasympathetic system is controlled from the one nerve, called the vagus or 10th cranial nerve, which wanders from the brain to the gut. It was the abdominal viscera part of the vagus nerve that was the focus of the original work of Gerda Boyesen. She discovered the concept of psycho-peristalsis (Boyesen, 2001), the use of sound to listen and monitor the self-regulation of the gut. The vagus nerve, a tube which houses the neural
pathways from head to gut, was commonly used as an analogy during my training to understand these dynamic neuro-biological processes. Knowing that the movement of the gut used the parasympathetic system was central to understanding it as a regulator of the emotional stress stored in the gut/intestines (Boyesen, 2001). For example, emotional stress released through the sounds of the gut can be experienced by using touch directly on the vagus nerve on the side of the neck: one can witness the change, the calming of the breathing response. At the same time the therapist monitors the increase in the peristaltic sound response signalling a parasympathetic response has commenced. The massage systems Boyesen developed, all aimed to monitor as well as enhance this peristaltic response as a progressive change in the self-regulation. By mastering this understanding, it became possible for me as a therapist in a counselling role just to focus my mind on the gut to find a different sense of wellness. I believe that a similar process can happen with the mastery of the polyvagal theory into practice.

1.4.1.5 Stephen Porges and the polyvagal theory.

Porges (2011) is a modern-day expert researcher with 200 peer reviewed papers which have spanned the following disciplines: anaesthesiology, critical care medicine, ergonomics, exercise physiology, gerontology, neurology, obstetrics, paediatrics, psychiatry, psychology, space medicine and substance abuse (Prengle & Porges, 2011). His main thesis relates the ANS to the unconscious processes of the body. I believe his work is similar to the early pioneering bodywork of Reich (1973), Boyesen (2001), and Tomatis (1992, 1996, 2005), on the development of self-regulation and the body/mind/environment connection.

It has taken over forty years to bring forward a modern theoretical framework of the bodymind dynamic and practices that the above researchers were demonstrating; that is, the elusive link between the neural regulation of the autonomic nervous system and social-emotional processes. Porges (2011) “coined the term ‘neuroception’ to describe how neural circuits distinguish whether situations or people are safe, dangerous or life threatening” (p.11). Neuroception was the part that had been ignored, as there had been little research that linked the autonomic nervous system regulation, vocalisation and auditory processing (Porges, 2011, p. 11). This is similar to Tomatis’s research and method of the voice-ear-brain, which suggests that the leading ear establishes the audio vocal control and that the vestibular system is the somatic integrator (Tomatis, 1996). Porges also observed that the heart and lungs are connected to the part of the vagus nerve that innervates the ears. The polyvagal theory (Porges, 2003) suggests that in vertebrates the three stages of phylogenic development of the autonomic nervous system make up an ordered, hierarchically arranged, organising
system that is retained and behaviourally expressed unconsciously in mammals. These neural circuits initiate biological mechanisms, on a social communication level, and are linked to facial expression, listening and vocalisation. In terms of movement, these mechanisms initiate flight and fight behaviours and also suppress behaviour in some circumstances (Porges, 2003).

It is this aspect of social communication that is significant, as it provides an opportunity to understand and regulate emotional stress and justifies the use of sound and music in auditory processing therapies. Other researchers in medical research have worked to show the interrelationship of mental conflicts to the central nervous system (CNS) and the autonomic systems. One such researcher is Wilhelmsen (2000).

Both main therapies I have been involved with are satisfied by the polyvagal theory. Dr Tomatis’s research covered the connections in the ear, the neural pathways to the brain and the micro-regulation of the interaction of voice/ear/brain. At the distal end is the vagus pathway to the gut that Gerda Boyesen referred to as the psycho peristalsis (Boyesen, 2001). Boyesen noticed that when deep emotional stress was released through reaching the right level of visceral touch, the sounds of the gut would be activated, signalling the development of a new dynamic of self-regulation, which invariably left the person with a clearer mind (Southwell, 1982).

1.4.1.5.1 The Science behind the polyvagal theory.

Auditory processing (AP) refers to the neurological process of listening. The original research on listening was begun fifty years ago by a French ear, nose and throat physician, Dr A Tomatis (Tomatis, 1992, 1996, 2005). Like other innovators ahead of their time, his work was mostly ignored by the scientific community, as he went beyond the usual boundaries of his discipline. There were also difficulties developing evidence-based protocols, as his research was holistic in nature, developing from practice experience. This situation has changed recently, as there are indications from other disciplines that auditory processing is on the agenda in relation to health and learning (Krause & Chandrasekaran, 2010; Porges, 2011; Sharma, et al., 2009).

Listening is basically a motor act that of pricking up your ears, and involves tensing the muscles in the middle ear, which are regulated by the facial nerve. When these pathways are activated, social distance is reduced by making eye contact, vocalising, and facial expressions. The middle ear muscles can improve the ability to choose a sound source in a noisy environment; the opposite occurs when there is a reduced muscle tone. The facial expression
is minimal, sound is not differentiated and the person can lack social awareness (Porges, 2011). When there is interest in communicating, eye gaze is lifted and simultaneously ear muscles tense in anticipation of hearing the person’s voice. In noisy environments, more muscle tension is needed to focus the ears, and the result, commonly known as the ‘cocktail ear’ effect, can cause distress for the person who cannot prickle up their ears. As with any muscle in the body, if it has weak muscle tone it will not perform as well under pressure and will cause delay in processing as the muscle becomes stressed. It is likely that a person with poor facial muscle tone and an averted gaze is likely to have some form of auditory hypersensitivities and difficulty regulating their bodily states (Tomatis, 1996).

Porges (1995) observed that this flat face effect is a common feature of several psychiatric disorders, including anxiety, borderline personality, bipolar disorder, autism, hyperactivity, and Asperger Syndrome. He uses the analogy that it is as if the neural system regulating both the bodily states and the muscles goes “off line” (Porges, 1995). From the Tomatis theory, the low muscle tone in the face is neurally linked to the tongue and back to the inner ear muscles (1996). As the ear muscles become activated by modified music through Tomatis ear training, facial muscles take on a different tone as the musculature in the whole system shifts and changes. The whole pattern of the low/high muscle tone changes and a new balance is attained through brain plasticity. Such changes can also be made by repetitive movements; this is the principle used in applied behavioural therapy (ABT). However, ABT is not as direct as using sound to the ears in this therapeutic manner. Low muscle tone, a flat effect, was described by Porges as being either “unconscious or is an adaptation to a situation that the nervous system has evaluated as dangerous” (Dykema, 2006, p. 4). The unconscious adaptation is explained in the Polyvagal theory using evolutionary theory to account for the phylogenetic stages of neural control; a hierarchy which accounts for social communication activities and the mobilisation (fight/flight) or immobilisation response (Porges, 2011) when there is little social involvement. If this theory is correct, then the practice focus needs to find ways to reduce over-arousal. Past conventional strategies, for example electroconvulsive therapy, had limited effect on reducing the arousal (Ingram, Saling, & Schweitzer, 2008).

In a collaborative project (Cottingham, Porges, & Lyon, 1988), Porges tested his theories with another body functional practice known as Rolfing, which uses a systematic approach to deep muscle tensions in the body to bring about a better self-regulation to the neural system. This research assessed the parasympathetic tone of two groups (adults to 40 year olds and over sixty year olds) before undergoing a treatment of the “pelvic lift”. Heart rate patterns were assessed during the pelvic lift and during the durational touch and baseline control conditions.
The results showed “a significant increase in parasympathetic tone relative to durational touch and baseline conditions” (Cottingham, et al., 1988, p. 352) while the older group had no parasympathetic change.

Researchers who understand a functional self-regulation model based on the sensory system, particularly auditory processing (Krause & Chandrasekaran, 2010; Tallal, 2006), directly use a dynamic ‘balance’ approach to bring the central nervous system into harmony. These dynamic ‘balance’ models have been implemented in practice ahead of evidence-based practice. On the other hand, the dominant scientific discourse has validated Applied Behavioural Therapy (ABT) used in autism practice, which is evidence-based but has shown no long-term effects (Autism Behaviour Intervention Association, 2010).

Like Tomatis, Porges addressed the physiological processes and the obvious social disengagement behaviours. Such behaviours are thought to be driven by the body’s visceral states (Masgutova & Curlee, 2007), which is the principle that drove Reich (1973), Boyesen (1981) and other somatic body psychotherapists for the last 50 years. These dynamic balance models require systems which build strategies to reduce stress at the deeper bodily processing level (Carroll, 2009). I believe this move will support a preventative health and learning model.

1.4.1.6 Early brain plasticity research.

Since the advent of brain research, there has been a change in approach, from a mechanical model, fifty years ago, to a functional dynamic model for demonstrating that the brain can change itself, implying there is an inbuilt self-regulation in the nervous system. This section reviews some of the early research linking the brainbody and self-regulation processes.

Haier and Siegel (1988) focused on efficiency as the key self-regulatory concept for understanding intelligence. Later research by Haier and Benbow (1995) showed that people with high maths ability use more brain energy in a certain region: the temporal lobes. Although men and women performed at the same level on the test, using more brain energy in the temporal load was true only for men. As the brain structure was perceived as playing a role, other gender differences began to be revealed. For example, men have better visuo-spatial ability, which was thought to be a structural attribute (Haier, 2009).

Consistencies with fourteen Brodmann areas, distinct structural and functional regions within both cerebral hemispheres were identified in a further review of scientific studies on intelligence. The areas identified were distributed throughout the brain from the frontal lobe
to the parietal lobe. The idea that the frontal lobe alone was where intelligence lay was put to rest by Haier (2009).

Another direction of research into the nature of intelligence and the cognitive abilities has identified brain parameters that may help account for individual differences in psychometric test scores, as researchers identified brain networks beyond the general intelligence factor (Haier, Schroeder, Tang, Head, & Colom, 2010). Nardi (2011b) developed a brain mapping process to highlight what happens in particular parts of the brain. He found a clear correlation to the Jungian cognitive processes, sometimes with the brain showing a global pattern. “What activates a global pattern varies according to one’s context, area of expertise, and personality type” (Nardi, 2011a, p. 16). His research used electro-encephalogram (EEG) recordings of psychology students over a term. A “situated research paradigm” (Nardi, 2011a, p. 22) frames this research, blending qualitative with quantitative approaches to brain mapping. Students had different tasks, some individual, and this was used to trace how the different parts of the brain corresponded to type analysis (Briggs Myers, McCaulley, Quenk, & Hammer, 1999). All these researchers have added to our knowledge of the brain and its links to personality and to self-regulation. The work of another psychiatrist, Schore (1994), has explored plasticity functions of the right/left brain (laterality) and supports the right brain function as the source of affect regulation, thus justifying and validating bodmind functional approaches.

1.4.1.7 How does polyvagal theory inform my practice and link to bodmind, health and learning?

I have discussed how the Polyvagal theory parallels the Three Integrator theory of Tomatis (De Jean, 2008) by focusing on different aspects of neural self-regulation, particularly social communication, which is signalled by the engagement of the facial muscles. Porges did this with participants, who listened to modified sounds to trigger the neural mechanisms to achieve better eye contact and facial cues “and 60–80% of children treated demonstrate changes in eye gaze, heart rate activity, visceral state and ability to process language” (Dykema, 2006, p. 7). By consistently applying sound through bone conduction (neural) and air conduction (muscle control), the Tomatis Method facilitated improved muscle tone (Tomatis, 2005), which is a similar outcome to that of Porges. This process improves the processing of auditory lateralisation (affect regulation). All the observed changes mentioned above are seen in my clinical practice.

In an interview with Dykema (2006), Porges suggested that the polyvagal process is enhanced by using the voice in a modulated way to “talk to them softly, modulate our voices and tones
to trigger listening behaviours, and ensure that the individual is in a quieter environment in which there are no loud background noises” (p. 7). As ear flexibility is the main issue, loud background noises can trigger physiological states and defensive behaviour (Bellis, 2002), which may be similar to clients who display symptoms of what psychologists call non-regulating defensive behaviours.

In my practice, I have both mother and child on the same program. It is a program that stimulates the brain by improving the ear/brain connection through active listening to modified music. My aim is to create a safe, calm, environment which is un-stimulating to the senses and in which they can start to let go their hyper-vigilance. Social engaging behaviours such as making eye contact as we listen means giving up these hyper-vigilant behaviours. In the initial phase of therapy, it is most valuable to create a safe environment and to mention to the parent that, as the body relaxes naturally, falling asleep can be an indicator that the person is feeling safe and secure while listening to the music. As the neural system balances, the child does drop off to sleep, which can often be a turning point in the therapy. The body has let go and the social space has become safe and comfortable (Dykema, 2006).

1.4.1.7.1 Functions related to protection.

The observed physiological states of people such as “flat facial affect, flat muscle tone, drooping eyelids, flat voice tone, difficulty listening, ‘jittery’ states and non-relaxed” are all signs of what Porges called “adaptive functions” (Porges, 2009, p. 38). These adaptive functions can lead to social judgments and exclusion. They are not a conscious reaction, and usually cannot be turned off at will. For example, telling someone with poor eye contact to “look at me” when you are talking to them would add to their stress.

Although Tomatis did not target eye contact and facial cues, Tomatis practitioners take it for granted that these cues and other adaptive functions will improve in a few short days of treatment (BT, personal communication, 2012). Technological developments and practice improvements have been on-going since Tomatis invented his first Electronic Ear in the mid-to late 1950s, and the work became clinical practice in the 1970s. His first prototype and subsequent machines aim to restore a perfect listening ear by training the muscles in the inner ears to listen. Clinical results accelerated after Tomatis incorporated bone conduction into the program and, through technology, brought changes within the neural system.

The results from a meta-analysis which combined the results of 400 Tomatis clinical cases in Canada, was based on parent self-analyses at least six months after the completion of treatment. The results showed a success rate of 90% on the parameters of expressive listening.
receptive listening (or receptive oral language) and vestibular issues (Gilmore, et al., 1989). Receptive listening issues include the need to repeat instructions, distractibility, misinterpreting what is being said and difficulty following conversation in a noisy environment. These listening factors are accounted for within Porges’ adaptive function theory (Porges, 2011). What is not discussed by Porges is the length of treatment needed to ensure permanent enduring changes to these two social communication aspects.

In summary, the theories discussed above frame my understanding, values and practice of deep listening, the biological basis of auditory processing and the relationship between poor auditory processing, learning difficulties, social communication and health. Self-regulation of the ear is considered to be the biological mechanism which enables homeostasis and maintains mind/body balance.

The theories and values outlined above, which inform my practice, have been in mind when selecting the direction for the research. This research orientation will assist co-researchers to improve their emotional and psychological functioning; as part of self-regulation, learning and will prevent further bodymind stress.

1.5 Outline of the Thesis Structure

Chapter 1: The Elusive Other: Listening to Bodymind.
Chapter 1 presented discussion of my overriding values which shows my understanding of self-regulation and of auditory processing, the biological underpinning of listening and synthesises the new science discoveries in brain research. The discussion links these concepts to my present work as a Listening Consultant; then outlines the aims and objectives of the research approach; its significance and its details.

Chapter 2: The Context for the Research.
The three contexts discussed are higher education, dyslexia and my personal journey. The policy context of higher education, the composition of equity groups and the factors influencing these groups are also discussed. The discussion explores dyslexia in higher education, seen here, along with other marginalised groups, as a hidden disability in the context of the medical model. In the personal context I trace my history and background training to the thesis journey. My inspiration comes from innovative ideas and practice as a Listening Consultant, from wanting to study dyslexia because of the dissonance in the community, and from concerns in education about how best to support and teach those with dyslexia.
Chapter 3: Methodology and Methods.

Chapter 3 provides an explanation and discussion of the theoretical framing of the research by tracking the research journey from participatory action research (PAR) to self-study action research (SSAR) over three action research cycles. I also discuss the contribution of critical friends, which is consistent with PAR and SSAR.

The major view and approaches to learning are explored; including the contribution of Kolb’s learning style, critical education theory and humanism. As critical theory frames the research, the discussion also includes notions of practice, praxis, reflexivity and empowerment.

Action research processes, methods, learning strategies and analytical framework are described. The theories that underpin the learning strategies are explored, drawing predominantly on the work of Carol Gilligan. The description of the analytical methods also draws on the work of Freire, particularly his method of developing codes. This is demonstrated by the identification of the co-researchers’ learning needs and issues, as evidenced within the data.

Finally, the processes and procedures related to ethics approval and ethical context of the research, together with the notion of what counts as rigour in AR, is explored.

Chapter 4: The Gm Dyslexia Study.

This chapter is the first of three data chapters and explores the story of a known dyslexic postgraduate student who is deeply distressed and embroiled in a conflict with lecturers who misunderstood her writing processes and learning style. A discussion of the turning points of the learning stories reveal early schooling emotional issues; experiences in higher education, self and affect regulation in relation to laterality and handedness; and strategies for improving receptive listening and auditory processing.

Chapter 5: The Health Learning Link: The Core of Affect and Self-regulation.

In this second data chapter the focus is on affect self-regulation, disorientation and dissociation for three co-researchers. Their learning stories reveal a common theme of kinaesthetic learning with varying degrees of visual spatial issues. Two of the co-researchers have chronic health issues as well as work and study issues; the third co-researcher had no health issues. Each co-researcher’s story is told separately and learning strategies and outcomes are individualised.
Chapter 6: Health and Diverse Learning in the Habitus of Higher Education.

The third data chapter reveals the action learning of four co-researchers in the Health group. Each member of this group had disability issues and the activities revealed the connection between diverse learning and health. The chapter also explores the stories of two individual co-researchers with concurrent learning and health issues, such as PTSD. The action cycles supported them through their learning issues: one with a substantial writer’s block and the other with dyslexia. The stories reveal their experience within the university habitus, the learning activities implementation and the outcomes for each co-researcher.

Chapter 7: A Synthesis of the Stories and Aspects of Self-Study.

Chapter 7 draws together and synthesises the diverse learning and health concerns of the co-researchers, as well as exploring the self-study aspects of the research. The discussion is in three sections: a summary of emergent themes; the commonalities and differences of the co-researchers; and a full discussion on the self-study aspect of the research.

Chapter 8: Final reflections.

The final chapter reflects on the research intention, discusses the achievements and benefits, reviews my living contradictions and discusses the credibility and limitations of the research. The chapter concludes with a discussion of the insights and implications for new directions in policy and practice that will enhance inclusivity and diversity in higher education.

1.6 Citation Style, Representation and Writing Style

The citation style used is the American Psychological Association (APA) 6th Ed. The body text is Times New Roman 12 pt, left aligned. Headings are APA level 1-5. These headings utilise a numerical system of hierarchy and resemble a mind map that shows the relationships between various concepts. While it is unusual in a qualitative thesis of this type to use such an approach, it has been of great assistance to the organisation of my own cognitive processes.

Presentation in the data chapters (Chapters 4, 5 and 6) is treated in the following way:

Verbal transcripts: When directly quoting from transcripts the data is indented, size 11, Times New Roman and single spaced with no quotation marks. The co-researchers’ initials and year are identified in brackets after the full stop. This is for data placed to highlight some specific feature (for example significant short dialogues), or for long
quotations (40 words or more). Shorter data quotations are presented in the APA body text style.

Written data: This has the same features as voice data, except it is boxed.

Created prose: Boxes are used for I-poems, short stories and prose.

The style of writing I use is similar to embodied writing, which focuses on the internal self and highlights the lived experience of the bodymind (Anderson, 2001). For example, the nuance of the inner “felt-sense” (Gendlin, 1981) and feelings helps to orientate the senses. The intention of the lived experience is to give permission to express through the whole sensory system, including the proprioceptive level of the sensory body. I took this approach in order, as the writer, to express the feelings from the life events of the co-researchers. I could then integrate both the obvious (tangible) and the intangible feelings into the text. Through this deep listening on all levels, I aimed to develop a type of sympathetic resonance with the reader. This style of writing describes the dynamic interaction of the habitus (Anderson, 2001) and is particularly used in the data chapters as I endeavoured to embody the experience through the voices of the co-researchers and my reflections.

Embodied writing includes both internal and external data (Ellis, 2004). Such perceptions as imagination, perception, kinaesthetic and visceral are valued as internal data. At times I also used external data such as co-researchers’ sensorimotor reactions that may be invisible to an observer. This way of writing “does not have the ‘external witness’ of conventional ‘objective’ science rather is both concrete and specific of all sensory modalities and is not necessarily limited to the physical senses” (Anderson, 2001 p. 3).

The stories from the co-researchers are embedded in experience and analysed through my first-person writing of prose, I-poems and meta-reflections. The data chosen from the co-researchers’ texts relate to and demonstrate my underlying values: the influence of my background theoretical knowledge in listening and self-regulation practices and the relationship to learning and health issues. I recognised both my embodiment of this knowledge, as I worked with the co-researchers, and the “folding back” and effects that this process had on my private practice. Like concentric circles following the dropping of a stone in water, as the story of the development of the research unfolded, the circles became larger as I moved from dyslexia to diverse learning and explored the experience and effects on health of learning differently in higher education.
1.7 Summary of Findings

The new knowledge I have discovered is threefold. Firstly was revealing the marginalisation and the effects of marginalisation on diverse learners. For the co-researchers with dyslexia, this was not a new experience, however. Those who experience being marginalised because of being mature-age students (over 40) and having a chronic health issue, such as chronic fatigue and post-traumatic stress disorder, can find it a profound experience to be classified as disabled. For some this would be like being rendered useless.

The themes were synthesised to identify teaching and learning issues such as lack of teacher expertise and disciplinary issues. These factors in higher education interacted with the co-researchers’ student role, their prior learning and their health and wellbeing issues. Despite this, co-researchers overcame many obstacles, experienced small moments of empowerment and finally successfully completed their programs of study.

Secondly, the habitus of the university lacked inclusive policies that could support diverse learning; where such support is available, a deficit medical model predominates.

Finally, SSAR, for the co-researchers and myself, provided a framework for a deeper understanding across learning, health and the educational needs of diverse learners in higher education.

1.8 Chapter Conclusion

The intention of this research was to understand the learning issues for people in higher education who have dyslexia or who are diverse learners, and to explore the efficacy of learning support for those vulnerable because of concurrent and invisible disabilities.

A brief overview of the research journey and the values that underpin the motivation for the research is provided.

In this chapter, I highlight my professional interest in bodymind integration through awareness and use of sound and development of listening to establish a robust independent self-regulation. The section also draws on the theories that have informed the research through an exploration of the scientific basis of self-regulation from a bodymind self-healing perspective, the history of self-regulation and the neurological biological connections.

This section has articulated the biological theories that inform my professional practice and A brief outline of the structure and presentation style is described. Each chapter provides a map of the thesis. The section on representation, writing and citation style explains and justifies the
citation style, writing style and the way different texts are represented in the thesis. A brief summary of the main findings is also posited.

Chapter 2 now develops the contexts that have influenced and provided direction for the research journey: higher education, dyslexia and my own background.
Chapter 2.

The Contexts

This chapter discusses the contexts that influenced my research journey over eight years. Firstly, the policy context of higher education traces the history of the changing composition of equity and the factors influencing those changes since the Australian Disability Discrimination Act of 1992 (DDA, 1992). Those mandated equity funding policies have resulted in more students coming into universities from the low socio-economic, remote, rural, and Indigenous backgrounds which then starts to influence teaching and learning policies and strategies. There are equity groups which continue to be underfunded despite these new trends, for example students with learning disabilities, mental health and chronic health issues, and women in higher education.

The traditional nature in which these policies are being deployed, servicing students using a deficit model of disability, can be attitudinal and exclusionary (Hughes & Paterson, 1997; Tregaskis, 2002; Vickery, 2001), and needs to give way to more inclusive social or ecological models (Goodley, 2001; 2005; 2008). The inclusive models incorporate a neuro-biological ‘balance’ model of direct teaching with constructivist methods of student-centred and group processes (Hill & Crévola, n.d.).

The second context focuses on dyslexia known in Australia as a specific learning difficulty (SLD) which is one of the unidentified marginalised groups in any level educational policy: tertiary, secondary or primary; of those who learn differently. The invisibility of people with dyslexia is partly brought about by the policy gap between the Federal DDA (1992) and State Education policies. How this affects community attitudes and those working to assist learning differences is discussed together with the way in which new social and ecological models are being introduced.

The third context, the personal, discusses my background and professional journey to the doctoral study initially to understand why dyslexia is so invisible and whether learning outcomes were improving. I look at the main contexts in education; literacy and policy; social, health and higher education constructions of dyslexia.
2.1 The Policy Context.

2.1.1 Equity practice in the Australian higher education climate.

Higher education is going through unprecedented reform on all levels relating to learning, teaching and equity groups. The first National Plan for equity identified the groups and targeted access funding for wider participation for particular groups, notably for low socio-economic students (LSE) and rural and remote students (Australia & Australia, 1990, p. 41). The result of this initiative was an overall increase of 17% for low socio-economic students (LSES), 11% for rural enrolments, and enrolments from students living in remote regions fell by 24% between 1996 and 2005. Martin (2007) considered this a disappointing result. Other results generally were equally weak in response. For example, Non-English speaking (NES) background students were selected to target awareness programs and support programs in Higher education establishments by 1992. In retrospect this guidance was insufficient given the complexity of the issues within the strong contingent of international students, and their substantial contribution that makes this sector Australia’s third highest ranked export. For people with disabilities these early responses did not differentiate and define the multiple categories. In addition, by not being clearly defined it was generally assumed that disability meant physical disabilities.


The Bradley Report was a wakeup call to acknowledge just how far Australia had fallen behind in our investment in higher education. Australia was ranked 9th out of 30 Organisation for Cooperative Development countries (OECD) with only 29% of our population (25-34 year olds) achieving higher education qualifications, a drop from a 7th place ranking ten years earlier. Meanwhile other OECD countries had set their targets to have 50% of the population of 25-34 year olds achieve higher education qualifications (Bradley, Noonan, Nugent, & Scales, 2008, p. xi).

It was a surprising result given that just twenty years earlier Australia had been one of the first countries to restructure their higher education system and widen participation. While these increasing numbers meant more diversity in the student population, no major change in teaching funding was expected; that rather, some funds would be allocated “to establish initiatives to increase both the enrolment of, and success of, students from disadvantaged backgrounds ” (Bradley, et al., 2008, p. xii). Students had become more disengaged demonstrated by the high attrition rates in those years along with the concurrent decline in the
quality of educational experience, for example exemplified by high workloads for students and large class sizes.

Paralleling this situation, the late 1990s saw the rapid increase of students coming from other countries to make up a quarter of first year students. “With higher education underpinning 60% of educational sector earnings, educational services had become our third largest export…” (Bradley, et al., 2008, p. 15). The main target was to get greater proportions of equity students qualified, and particularly the under-represented SES group as it could be set as a benchmark against other OECD countries. Both funding to assist institutional structural changes and a national framework were suggested in order to “allow institutions to play to its strengths” with student funding following the student, rather than being allocated to the institution (Bradley, et al., 2008, p. xiii). This was a significant change: to play to its strengths had competitive ramifications, effectively made it mandatory for each university to take responsibility for retaining their students. This set the scene for equity and diversity to become “everyone’s business” (Kift, 2008).

By 2020 the expected target for disadvantaged groups will reach 20% of student populations (Bradley, et al., 2008, p. xiv). Provision was made again for the early targeted equity groups, the rural and remote students, to widen their participation. It was recommended that universities find innovative and collaborative ways to provide local solutions. Despite these ideals, LSE, regional and remote-student numbers have continued to show a decline in attendance rates over some years (Martin, 2007) and most evidenced are the difficulties and inefficiencies stemming from the structures of tertiary provision (Bradley, et al., 2008).

I became aware of the imminent changes following the Bradley, et al.,(2008) report when I presented a short paper and workshop entitled “Could a social model of disability empower all diverse learners in FYHE?” (Distel, 2008) at the conference on first year experience (FYE) in higher education conference in Hobart 2008. My workshop experientially demonstrated the issue of diverse learners, the discussion was lively and my interactive approach was appreciated. The key note speaker was Professor Sally Kift, a research fellow with the former Australian Learning and Teaching Council (ALTC), now called Office of Learning, on secondment from Queensland University of Technology (QUT). Her development of a coherent institutional approach to counter the attrition rates could be considered radical as it was heralding extensive curriculum reform for the engagement of first year students. This was a timely innovation for other Australian universities (Kift, 2008) as the increasing equity funding means a new curriculum needs to work effectively in diverse learning groups. The following year she initiated a curriculum design forum which highlighted the scope of the
QUT reforms and brought together teachers and researchers from universities across Australia to discuss their work. By working out a series of coordinated projects across campus Kift now envisaged the first year experience in higher education as ‘everybody’s business’; a blueprint or strategy for across campus reforms in line with the new reporting and standardising methods coming in (Bradley, et al., 2008).

2.1.3 Southern Cross University (SCU) equity statistics.

The 1998-2008 statistics from the Department of Education, Employment and Workplace Relations (2008) of all Australian domestic university students showed the disability group in the equity groupings ranged from 3-6% of the total number of students. NSW had an average percentage of 4.79%, with SCU percentage of 0.7%. Of the equity groupings, SCU has the highest percentage for the low socio economic students (LSES) students with 27.36% of total enrolments, which was above the anticipated projection (Bradley, et al., 2008). Traditionally this university has attracted LSES students and maintained this advantage in contrast to like sized regional NSW universities, for example: Wollongong, New England and Charles Sturt universities. However, the 2008 statistics for two Queensland regional universities show they have outstripped SCU in this demographic: Central Queensland University (CQU) with 45.5% of LSES students, and University of Southern Queensland (USQ) 30.68%. With the overall national percentage of LSES students at 14.95%, means the major cities must have very low rates compared to the rural Universities and could be perceived as an untapped source of potential students.

2.1.4 Factors influencing equity groups in Australia.

There has been a strong increase in international students and the exporting of Education services overseas. For example, since 2002 international students studying in higher education in Australia have increased by nearly 38% (Australian Education International, 2011). However, signs of lower levels of social integration are a concern; one study reported a number of issues regarding international students. The international students did not feel part of a group committed to learning (46% compared with 56% other students); they had little sense of belonging (35% compared with 52 %); and were more critical of the teaching. Nearly half of this cohort reported their university did not live up to their expectations compared to the domestic students with 27% (Krause, Hartley, James, & McInnis, 2005).
2.1.4.1 The changing composition of equity groups.

Equity statistics from the Australian Bureau of Statistics (ABS) are derived from university enrolment procedures that have differing ways of gathering information. There is the direct application form approach, which is a more closed deficit model - a passive approach, where all that is required of the potential student is to tick-a-box system with the categories of impairment as hearing, mobility, learning, medical, vision and other (Southern Cross University, 2012a). Aggregating this type of system meant 3% of students ticked the disability box, while the statistics based on post codes show 18% rural, 2% isolated and 16% LSES. Of importance is the number of women in the latter group; 56% were women and a further 21% were women from non-traditional fields (Olson, 2001). A policy of voluntary use of the services means students with a disability may not make timely access to services if not actively picked up at enrolment.

More information was needed and a question was developed asking if “they have a disability affecting their studies illustrated with a list of examples” (James, Baldwin, Coates, Krause, & McInnis, 2004, p. 36, 37). Would such a coding help understanding of the learning issues students may face when the person only perceives themselves as having a chronic health issue for example? It seems doubtful and adds to the marginalisation of those students experience who are normally invisible. For example, a student with dyslexic characteristics would be unlikely to ‘tick a box’ on entry to later become classified as a disabled student. The perceived need may be a struggle with additional health issues, for example either fatigue, PTSD, anxiety or depression were more central for some of my co-researchers. This type of statistic gives little information and a false picture of this disability category, which can in some cases be a temporary situation and may be highlighting a missed learning opportunity. Currently there are sixteen universities that have broken from the traditional deficit approach and embraced the equity and diversity issue by using the Educational Access Scheme ("Educational access scheme," 2012) which gives a transparent inviting feeling to potential students with long term issues and this is instigated from their first encounter with the institution.

2.1.4.2 Women as part of the non-traditional ‘Other’ equity group.

The Australian Bureau of Statistics (ABS) (2004) had a category of women who were enrolled in non-traditional courses, for example electrical engineering, which included postgraduate women. The overall target was to increase women’s participation in higher education by 40%, and for postgraduate women to increase research participation.
proportionally to the undergraduate females enrolled in each discipline by 1995 (2004). On a community level, since the 1971 census higher education qualified people only made up 3% of 20-64 year olds, which had increased in 2001 increased to 16%. At the same time participation in higher education by women went from 2% to 17%, greater than for men (4-15%). Mature-age women, those over 40 years old may bring more experience to a course. In SCU mature-age women are not categorised as yet but they make up 20.15% of the total equity group. Research is needed to further explore particularly the postgraduate women subset, in order to find ways to better assist and direct funding when their student status leads to vulnerability in both health and learning.

To be engaged in their student researcher role and new learning, mature-age postgraduate women need opportunities to reflect on their prior learning and former work roles to bring forward their strengths in the new learning and roles. For example, a usually assertive independent learner faltered when she sought help for her writing block from student services and refused what was offered as inappropriate for her and was not offered anything further. She had rights under the DDA (1992), was registered as having a disability in one outside the main categories; the ‘other’ group disabilities for example chronic health issues or mental health issues which are invisible. This incident showed how access to funding is limited for this ill-defined group. Yet this cohort with their strong prior learning knowledge and experience could be perceived as an untapped resource to further develop. For example, what could be learned about equity and diversity from their prior experiences in the higher education habitus? The process of needing to seek help and be considered as disabled feels like an anathema to some individuals.

As the institutional approach and philosophy of engagement, transparency and focus on learning shift over time, some of the dilemmas my co-researchers faced may be resolved (See Table 1.1). It is hoped that their prior skills would be more likely to be acknowledged and potentially enhance the learning situation for all. Their issues could be mental health, chronic health and ‘other’ non-categorised learning issues but they have a commonality of invisibility and disconnection from the main stream university life. How could engagement, a sense of belonging and learning across campus be enhanced for these diverse learners?

A good practice example was a project in the United Kingdom which started with a group of students with dyslexia meeting with a lecturer in one university institution and led to a collaborative project across three institutions (Herrington & French, 2008). As a peer group they managed to get many of their learning needs met as well as achieving institutional
changes. Postgraduate women in particular are an untapped source of capability, potential influence, particularly from those occupations usually filled by men, for example engineering.

### 2.1.4.3 A hidden equity group: Dyslexia.

In Australia, while dyslexia is not acknowledged generally in education policies, the signs of acknowledgement have quickened particularly since the National Dyslexia Forum in 2009, which brought together many stakeholders for the first time. Twenty people including researchers, psychologists, parents, and representatives from peak bodies met. A small committee formed to report and develop strategies on the needs of people with dyslexia in Australia. Their report has been tabled in Federal Parliament (Bond et al., 2010). Since that time community awareness has continued to increase, with more use of the word ‘dyslexia’ by teachers (personal observation), and articles in the newspaper supporting the report (Patty, 2010). The peak body for specific learning difficulties (Speld) now use the word in their Newsletter and are running articles; (Speld Q and NSW) as well, there have been reports of unfair treatment in schools (Burke, 2003). A new voluntary organisation has been established to develop dyslexia understanding and to spearhead professional training of teachers in language-based sensory modes (Clements, 2012). A national speaking tour by Neil Mackay, an educational consultant and initiator of the idea of ‘dyslexic friendly schools’ in the United Kingdom, has been sponsored by the Australian consortium of Speld state groups (Auspeld), to talk to parents and professionals around the country. Awareness of the ‘problem’ possibly, but political action is required to at least get the states’ legislations in line so that dyslexia is at least legally covered under the Australian DDA which obliges schools to take action. However, such legislation may create more stress for parents, who may opt to have their children attend private specialist courses outside the school system. Both the legislation and the specialist courses may be of limited value in the long run if schools make policy changes but the social learning environment remains unchanged.

In tertiary education in the United Kingdom, dyslexia is acknowledged with policy support and with the development of a group of specialist tutors in dyslexia taking a socially inclusive stance (ADSHE: The Association of Dyslexia Specialists in higher education, 2009). I was invited to a seminar of this association when I was in London in 2009. My main learning that day was to recognise that the use of the label ‘dyslexia’ was appropriate and desirable. It was understood as a generalising learning style needing specialised help and representing a wider neuro-diverse cohort of students (Pollak, 2009, Armstrong, 2010 #1404). In Australia such a cohort of neuro-diverse students is classified as a hidden group of ‘Other’ within the national disability statistics of higher education.
2.1.5 The first year experience (FYE) in higher education.

At a time when there has been strong growth in the rate of International students in higher education there has been an increasing attrition rate of the whole FYE cohort. A national study (Long, Ferrier, & Heagney, 2006) involving 34 universities with 4390 domestic students found the largest influence on attrition rates was “needing a study break” (24.3%), “felt stress and anxiety” (14%), and not liking the “teaching and expectation of the subject” accounted for 25.55% (as cited in Adams, Banks, Davis, & Dickson, 2010, p. 4). While the estimated educational cost per student is $7,800 for the several case study universities in this study, for the International students this figure rises to $13,500 per student. Some of the difference is in the high recruitment costs for international students (Adams, et al., 2010, p. 16.). However, international students generally have a retention rate of 10.58% compared to domestic students with 18.97% (Adams, et al., 2010, p. 10) and both have become entwined as the dominant equity agenda. Early signs of cultural diversity became acknowledged in university mission statements following the first equity report (Olson, 2001).

A recent thematic analysis by Bosanquet, Rowe, & Winchester-Seeto (2011) of graduate attitude statements across fifteen years (1996-2000, 2001-2005, 2006-2010) showed 75% of the statements recognised for the first time ‘a global perspective.’ As well 53% of statement had the theme of ‘appreciates and values diversity’. This attribute has increased from 38% (2001-2005) to 44% in the 2006-2010 time-bands.

By the late 1990s a quarter of the population of first year students were born overseas and could potentially have language issues. As many as 15% were speaking another language, that is a non-English speaking background (NESB) at home and this number rose to 26% in Sydney (ABS). However, the historical context of Australian stereotyping of migrants means a ‘cultural deficiency’ myth continued, particularly when higher education international students were not proficient in English and made up nearly 20% of the first year students (Olson, 2001).

With such a large cohort of international and NESB students even a concerted effort across campus to reduce stereotyping at the grassroots level of first year students would at best be piecemeal. A typical stereotype of international students was they “are rote learners who drag our standards down” because of their lack of English integration (Purdie, 1995). Racism in the form of violence towards Indian students was suspected and reached a peak when one hundred and fifty two such incidents were reported in one year. This caused a nation-wide and international scandal. However it was later corrected by the Indian High Commission who revealed only twenty three of that number were definitely racist attacks ("Only 23 of 152 Oz
attacks racist, Ministry tells LS,” 2010). One response was a workshop convened by the Academy of the Social Sciences in Australia, the Australian Human Rights Commission and Universities Australia which examined and looked for evidence in order to understand these attacks from a social science perspective, by looking at how to reduce the racial related crimes, enhance safety and develop an evidence-base for policymakers to act on (Graycar, 2010). The end result is that dyslexia as an equity group is overshadowed.

2.1.6 Improvement in English language learning

It has now been recognised that International students need better opportunities to learn English. As the education sector is fast becoming a political force, representing our third highest ranking as an Australian export and their needs should to be taken into account more. It was not until I attended the Australian Association for Language Learning (AALL) conference (2008) where Kift again was key note speaker, did I understand the detail, and extent of the project she heads at QUT and its relevance to all facets of First Year education for academic, learning support staff and English language learning. In my quest to acknowledge dyslexia early in my research, I learned of the difficulties student services have in communicating such learning dilemmas across academic silos (Chanock, 2007). I was very impressed by a presentation by a postgraduate dyslexic student who had experienced such professional help throughout her study from Dr Kate Chanock, Associate Professor in the Academic Language and Learning Unit (ALL) at Latrobe University. The progress of this student helped my realise how isolated my co-researchers were from ongoing meaningful support, and the lack of understanding that academic help needed to effectively work with their language and learning issues.

A Symposium on English language ‘competence’ of international students highlighted some of the complexity, diversity and difficulty of regulating this sector (Australian Education International, 2007). One example is the very diverse entry standards ranging from students being accepted into an institution, having to be further tested to prove their competence while other institutions have no testing at all. Similarly at exit there are no uniform or common exit standards across different disciplines. Despite such differences the final report gave no support to externally restricting the number and variety of pathways leading to higher study rather than internal strengthening of in-course English language and academic support for internationals and domestic students (Australian Education International, 2007). This symposium had followed on the heels of two critical papers that had caused media interest. Birrell (2006) argued that the English standards on completion of courses in Australia were below the minimum level required for the Department of Immigration and Citizenship to
issue a student visa in the first place. He had based his statistics on the one third of students who, on completion of university studies, had gained permanent status, whereas Bretag (2007) interviewed fourteen academics from ten universities and suggested that the situation of inadequate English of International students on completion of their studies was because of plagiarism. These “sensational” researchers drew media attention and led to Department of Education and Work Place Relations (DEEWR) commissioning a project to develop a set of good practice principles (GPP) for English Language proficiency in academic studies, across disciplinary boundaries. This project was perceived by the Australian Universities Quality Agency (AUQA) (2009) as a “quality enhancement activity for all”. While the target group was international students, these generalised principles could be applied to all higher education students and developed as diversity and inclusive learning.

2.1.7 Second language (L2) research into listening.

At the 2011 Conference of the Australian Association for Learning and Language (AALL) Picard & Velautham (2011) presented their research which developed listening independently through practices which improved comprehension using both knowledge sources, that is top down and bottom up listening strategies. A top down process used context and prior knowledge to build student comprehension, while the bottom up processes are “when listeners construct meaning by accretion, gradually combining increasingly larger units of meaning from the phoneme-level up to discourse-level features…[these skills] are developed by word segmentation skills” (Vandergrift, 2007, p. 13). This background research direction has shown that a dynamic model of listening in the context of second language (L2), learners can improve their comprehension (Vandergrift, 2003, 2007; 2006). To effectively learn a second language, the learner needs to feel in control of the comprehension, processes which involves listening and ear laterality (Bellis, 2004; Leopold, 2009; Tomatis, 1996). For example, helping students to get accurate voice pitch to ‘tune in’ to their listening and self-learning style would mean mastery of a raft of multi-model technologies would become more accessible for diverse learners.

The work of Vandergrift could develop second language learning (2L); it could also help equity groups to begin to find answers to the GGP questions raised. Facilitating deep listening takes time. It requires mutual trust in the teacher student relationship to so that reflective practices can deepen, and critical thinking skills and creative solutions can be developed. For example, one lecturer used an innovative way of teaching students to listen by applying in-depth interview principles in a research methods course. The lecturer observed how these listening principles reflexively informed her teaching practices (Chase, 2003). My experience
co-researchers showed that when chronic health issues and learning issues arose during their study period, they needed a trusted supportive proactive space or forum at a time when their ability to be more active in their learning and health processes was hampered.

2.2 Dyslexia: A learner difficulty, a learning disability or learning ability?

This section introduces two quotations: one from a newspaper and the other a professional view on how speech and language research impacts with Australian children. I then discuss how dyslexia can become a disability in higher education and then the background of reading and literacy development and the implementation of standardised testing the “National Assessment Program – Literacy and Numeracy” (NAPLAN).

One in seven Australians suffer from dyslexia. The effect of dyslexia in society includes unemployment, poverty, alcoholism, drug abuse and dependency, and even family breakdowns. Children with dyslexia often have high IQs but poor reading and writing skills (Moyes, 2008a, p. 1).(my emphasis)

This newspaper quotation paints a sensationally poor picture of dyslexia by using the word ‘suffer’ which may engender a sympathetic response and which portrays dyslexia as a medical condition. Certainly there are social consequences of dyslexia, for example, as demonstrated in the US by an article “Failure to treat dyslexia increases crime” which found that the incidences of dyslexia in a Texas prison were triple the rate on the outside (Henson, 2005). How society perceives an issue may be dependent on notions from the popular press, and as this story gave no sources it is not possible to substantiate any of it.

It is impossible to understand from statistics the depth of the issue of dyslexia. However, if dyslexia is seen as an auditory processing issue connected to speech and language issues then there are some statistics. A speech and language researcher from Charles Sturt University (CSU) compiled statistics from a large-scale study to find numbers of children with speech impairments in the population. The study found that the number of speech difficulties “ranges from 0.12% to 20.8%” (McCormack, McLeod, Harrison, McAllister, & McKinnon, 2007, p. 1). With a mid-range of this study set at 10% there is some agreement with other researcher’s attempts to get a percentage figure for learning difficulties. The American Academy of Pediatrics (2009) noted that, “Depending on the definition chosen, 5% to 17.5% of people in the United States have a learning disability, with an estimated 2.6 million children aged 6 to 11 years affected” (American Academy of Pediatrics, Council on Children with Disabilities, American Academy of Ophthalmology, American Association for Pediatric Ophthalmology and Strabismus, & American Association of Certified Orthoptists, p. 837). As the issue of
literacy becomes measured by literacy testing through primary and secondary schools a picture is emerging of the extent of the literacy issue worldwide. For example, more than 40% of adults are considered functionally illiterate that means they cannot read sufficiently to make informed decisions.

While dyslexia is not acknowledged in post tertiary schooling, in higher education a self-referral system operates. Those students who struggle with literacy issues can be deemed to have dyslexia and can get help through funding supported by the DDA (1992) however, their numbers get lost in the way the statistics are reported. Chesterfried-Evans (2003), speaking at the NSW Parliamentary inquiry on dyslexic student funding, suggested dyslexia affected 7% of the population and was “holding back many bright students from realising their full potential” (p. 4194). Further Chesterfield-Evans explained how students with dyslexia do not qualify for funding support because the disability criteria of the Department of Education, Employment and Training (DEET) do not recognise dyslexia (Chesterfield-Evans, 2003, p. 4194). It became clear to me from the Chesterfield-Evans testimony that the non-recognition of dyslexia is a state legislative issue needing to be addressed separately by all states and territories.

My early recognition that dyslexia was an invisible issue in education came from parents’ stories of the practices which their children endure in the name of education in some schools. Some of the children’s stories seemed grossly unfair to me as an outsider, as what they endured made learning more difficult and deeply affected their wellbeing. For example, I recognised that the children who did get help were under the auspices of the school special needs department with the children with severe disability, and many teachers have few strategies to cater for the dyslexic child. On a social level, I experienced a practitioner becoming hostile because I used the word ‘dyslexia’, and suggested that such a label was useful for distinguishing a unique learning style and positive attributes. I was giving a free information session held at a school and supported by a teacher from that school. The main protagonist was an educational counsellor who walked out during my talk taking a few other teachers with him. On the other hand during a group meeting of six students on my Masters course four people openly acknowledged their dyslexia, told stories of invisibility in their school experiences. These students were highly successful in work unlike other people with dyslexia who may get labelled as ‘mad’ or ‘bad’. From that early experience of successful adults in the Masters program I started questioning how higher education manages students with dyslexia.
2.2.1 Literacy Education: the Australian ‘dissonance’ to learning difficulties.

While recognising that English literacy skills at the end of primary school can be a predictor of future social, cultural and work opportunities there has been a paucity of information in Australia regarding how well literacy skills were being achieved. There had been no attempt to collect such data since a survey in 1980 to obtain literacy rates in Australia. However, change started as state education departments introduced literacy assessment programs. The significant difference in literacy methodologies between states and school districts meant it was impossible to draw conclusions on the overall state of literacy in Australia. Not knowing the breadth and depth of the children’s literacy problems and special literacy needs was unacceptable (Australia, 1993). Some concern was expressed that reading and writing took up “as little as 4% of teacher training time” (Healey, 1997, p. 5) and that approximately “…one in four children leave primary school with severe reading, writing and spelling problems” (Healey, 1997, p. 7).

A report discussing workforce literacy from the Council of Australian Governments (COAG 2008) commented that 43.5% of working age Australians have literacy and numeracy skills below the minimum level needed to deal effectively with society. This means that at a national level 60% of working age people from the low socio-economic group (LSES) have low levels of literacy compared to 29.3% in the least disadvantaged groups (Coltheart & Prior, 2007). Further independent evidence of the decline in literacy standards in Australia comes from independent research of the OECD’s International Programme for International Student Assessment (PISA). Between 2000 and 2006, Australia dropped back four places in the world ranking behind New Zealand, Canada, Hong Kong and South Korea, as reported at the Learning Difficulties Australia Seminar by Barry McGraw, Chair of the Australian National Curriculum (2009). From this global perspective the percentage of time allocated for teaching literacy in teacher training course has not changed.

Dissonance is inevitable because state and territory governments control their own education departments and their teachers are trained under the auspices of each independent higher education institution. In Australia there are forty three university teacher training colleges all with independent policies and practices. It is hard to see how consistent policies and pedagogies can be widely spread without more centralised control otherwise, as happens now; teachers are influenced by their own localized training methods. This is one explanation why there can be such differing standards of teaching in any one school and between states.

The development of National curricula and standardised testing (NAPLAN) has led to dedicated websites, for example on state education departments, and to publishing the literacy
teaching guides giving the rationale for the importance of phonics in teaching of reading (New South Wales Department of Education and Training, 2011). This was one of many recommendations from the National Literacy Report (Rowe, 2005). A newspaper article Ideological crusade reported how Jim Rose praised NSW education for leading the way by providing “some firm guidance for principals and teachers rather than leaving them to re-invent reading instruction school by school, with the hope that “a mix of phonics and whole reading will prevail” (“Ideological crusade,” 2009, p. 15).

The whole reading approach has been a dominant influence in Australian education teaching for many years. It has been considered to be responsible for the rising rate of 25% of those leaving primary school with major literacy issues (Healey, 1997). The main program used in schools was reading recovery (Clay, 1994) which initially had world-wide success, but which recently has fallen into disrepute because of the lack of rigor in its research (Groff, 2004). “No child left behind” (2002) discussed reading recovery as a flawed method because of inconsistencies in data collection because it did not rate as an evidence-based practice. Other research discussed it as lacking: “linguistic knowledge and the love of reading are often missing” (Healey, 1997, p. 2).

However, the educational systems in Australia had embraced reading recovery as a specialised individualised training and had invested a large outlay on training people to become specialist reading recovery teachers. The rhetoric and devotion of the teachers trained in this method, I think held back the development of alternative methods that could help more long term in the classroom. According to a local specialised reading recovery teacher little follow up coaching was given in the form of ongoing work to extend these children further (MN, personal communication, 2006). This means the crucial and necessary part of mastering a new subject is to have follow on guidance and independent practice otherwise the mastery is incomplete. Crawford (1993) believed to get reading embodied and mastered would take at least two years of systematic instruction. How long would be needed then for those with entrenched learning difficulties? The reading recovery program seemed to have a stranglehold in Australia, other methods, particularly phonic understanding and practices, were at that time hard to implement and be sustained.

The phonics course was run by a specialised United Kingdom trained teacher Paul Whiting who advocated and taught this method at Sydney University (Healey, 1997). Despite this early start phonics has not had widespread use in schools, because it was targeted towards children with dyslexia and the educational institutions still do not have dyslexia as a criterion for disability.
The situation of teaching phonetically is likely to change. Before the Dyslexia Report (Coltheart et al., 2010) was tabled, a specialised not-for-profit organisation, the Australian Dyslexia Association (ADA) emerged specifically to train teachers in awareness of dyslexia. I wondered why it has taken Australia so long to establish remedial help which had been earlier brought to Australia with such links to the International Dyslexia Association (IDA) and the Orton-Gilligan method. Was it just the lack of understanding of dyslexia and its ‘invisibility’? Or could such a method as proposed by Orton-Gillingham be seen as using sensory methods which some teachers may think look too much like kindergarten to children in primary school?

In the 1990s, a newspaper article (The Australian) entitled *A sound approach to reading* heralded possibly the first phonics based program coming to Australia. This initiative to bring a US facilitator to train teachers was funded by a private educational consultant with “good credentials” and not by an education department as they had “no definitive policy on it” (Healey, 1997, p. 9). Thus implementing a phonics program did not happen and had to wait until the research clearly indicated a balanced approach which included phonics as appropriate.

### 2.2.1.1 How does a literacy non-policy affect student learning over time?

It could be argued that such a non-policy or invisible policy may be why the learning pedagogy experienced in Australia results in students having a narrow view of learning. A study by Purdie (1995) compared a group of Australian and Japanese students from Year11 and Year12. There were 463 students involved from five schools in each country. The Australian students thought memorising and reproducing information were the key aspects of learning (60%) while among their counterpart of Japanese students only 26% thought memorising and reproducing information were key aspects. The Australian students (50%) thought the essential component of learning was to increase knowledge and gave little regard to any personal fulfilment of learning (5%), whereas their counterpart Japanese students had a broader view of defined learning as increasing knowledge (40%) and being a lifelong, experiential process leading to personal fulfilment (35%) (Purdie, 1995). Could such research be showing the legacy of our ad hoc learning pedagogy and be partly to blame for our ever increasing literacy rates?

As education in higher education becomes international and global, stereotypical attitudes emerge,, such as “Asian student are rote learners and surface learners, as it is clearly inaccurate” (Purdie, 1995, p. 6). An empowering pedagogy, one that understands strengths
and learning styles, would assure better outcomes for inclusionary policies. For example, a multi-sensory approach such as mentioned above or other eclectic or general models which combine both content enhancement (direct or explicit instruction) and learning strategy instruction are gaining popularity with researchers and practitioners (Purdie & Ellis, 2005).

2.2.1.2 What are my health and educational concerns regarding dyslexia?

My knowledge and philosophy mean that I favour a learning ability model of practice which is relational and communication based. When I talk publicly, I reframe dyslexia as a functional issue of the brain and senses, with particular reference to auditory processing. In a social learning environment, I initially suggest ‘surface’ listening strategies and discuss listening as a bio-neurological reality, and its relationship to stress. On a ‘deep’ neuro-development level, it is possible to access and build self-regulation capacity by training neural pathways to enhance brain functioning through using sound, particularly by the controlled use of the voice.

On a social level, my position is that something hidden and invisible, such as dyslexia, does not go away and may become more intractable. To understand what dyslexia is and to label it makes up the first part of developing understanding of the dynamic process of learning to read. I am concerned that bright articulate gifted children and adults who may be dyslexic do not get the educational help they need during their education. There is a disparity between the States and Commonwealth Educational systems regarding how dyslexia is treated in schools. NSW is the exception, where a legislation amendment to the Education Act (1990) now has an additional category of “children with special needs, those with significant learning difficulties are catered for” (Moyes, 2008b). This change means that theoretically, children who are assessed by psychologists as persons with dyslexia and who show ‘significant’ specific learning difficulties would be eligible for help under the funding allocated to the Learning Assistance Program for NSW Public Schools (“Learning assistance program ”, 2008). When the rest of the state and territory governments have amended their Education Acts as NSW has, the definition of disability in relation to learning in the Australian DDA policy (1992) would be applicable. Part of their definition of disability included “a disorder or malfunction that results in the person learning differently from someone who does not have the disorder or malfunction … including a disorder that presently exits or, may exist in the future” (Australia, 1992, Section 5.1).

The rationale for the NSW Governments Education Amendment was “to provide greater certainty … unjustifiable hardship ... equal access to be considered at all stages rather than
just at enrolment and admission” (2004, p. 5). Clearly such legislation changes at a state level would help people with disability to get more continuous specific help from the federal DDA (1992). Once all states have completed their education amendments it may not be possible legally to continue to ignore dyslexia, as is currently happening.

Although the DDA (1992) began the process of legal status for equity, Australia lacked policy direction on literacy, learning difficulties and disability. It was the Teaching of Literacy Report (Rowe, 2005) went some way to address the issues by making twenty recommendations which could have potentially improved the situation. However, it was largely ignored by the Australian Liberal Government as was the Nelson Review (Nelson, 2002) which received a ‘soft’ response from the then Minister for Education (Coltheart & Prior, 2007). After two years of the Australian Labour Government coming into power in 2007, there were reliable statistics being built on literacy for the whole of Australia. The process of improving literacy started in earnest in 2009. For the first time the population knew just how bad our overall level of literacy was and how far we were behind the rest of the western world.

2.2.1.3 What other factors influenced the present turnaround?

A newspaper (Sydney Morning Herald October, 2008), reported the case of a man who needed help to fill out a form to become a member of disability council in NSW and who was refused help by officials in the Attorney’s General Department. The man was Jim Bond, a person with dyslexia who acts as an advocate for others with dyslexia. A court case on anti-discriminatory practice followed: the court ordered the department send an apology to the man, and recommended that staff attend anti-discrimination training (2008a). The office of Dr Moyes, a parliamentarian who acknowledges his dyslexia, became involved and supported the action as he understood the dilemma and knew how personally destructive for Bond such an action could become. He brought forward the necessary legislative changes (2008a). This means that students with dyslexia in that state have the protection of the DDA (1998) and can push the education department to take responsibility for improving learning outcomes. The implications of the actions signalled a significant shift in Australia, of attitudes towards dyslexia; as at least one Australian state attempts to make dyslexia visible.

In June 2009, a national meeting, the Dyslexia Stakeholder Forum was called by Bill Shorten, the then Parliamentary Secretary for Disabilities and Children’s Services. A working party emerged consisting of eight forum members chaired by Professor Max Coltheart. Their brief was to write a report proposing a national action agenda to assist people with dyslexia and to
develop a common educational definition. The background to the forum was earlier meetings with the dyslexia interest groups country wide, which had looked for opinion on the adequacy of special education places, professional support and teacher training. These groups had expressed concern that the non-recognition of dyslexia as a specific disability under the DDA, meant no support in any area – education or employment. By January 2010, their report was presented back to the Parliamentary committee Coltheart, et al. (2010). This put dyslexia in the context of general literacy levels in Australia and gave a strong case for concern, by discussing the serious implications of the social, economic and personal consequences of dyslexia. Their nineteen recommendations would address and decrease these social, economic and personal costs of dyslexia. There has been no federal government action as yet.

2.2.1.4 Overseas acknowledgement of literacy issues and dyslexia.

An earlier reading report from the United States highlighted the advantages of evidence-based research and favoured a phonetic approach ("No Child Left Behind Act 2001," 2002) while a more recent report on dyslexia from the United Kingdom (Rose, 2009) made nineteen recommendations, and taking a more social and inclusive approach and advocating models that are structured phonics and are interactive. Two recommendations which show inclusivity are “short courses for teachers to develop their knowledge of up to date evidence-based practices in literacy interventions, and ongoing guidance for parents through an interactive website and links to the Inclusion Development Program” (Rose, 2008, p. 26).

Meanwhile, although in New Zealand dyslexia was recognised by the Ministry for Education in 2007, Marshall (2008) reported that people with dyslexia experienced a lag in getting help through the system. His review of dyslexia discussed a policy of early recognition of literacy and the implementation of preventative measures. New Zealand seems to have enough support to be taking dyslexia seriously. In Australia, recognition of dyslexia is only just starting although there has been some action on implementing the literacy preventative measure of reading aloud. For example author childrens’ author Mem Fox (1994) stated that giving early attention to children regularly by being read to them, could help self-esteem issues from developing even if later reading tests show they are not reading to their age level. Following prevention, and identification, another aspect is to have evidence-based workable literacy models linking and Justifying a phonetic approach. Such practices could prevent further issues developing (Coltheart, Patterson & Marshall, 1980).
2.2.1.5 Social influences of dyslexia.

What do not go away are the ongoing self-esteem issues of children who learn differently, which suggests a vulnerability to later health issues. In a newspaper article titled *The invisible scourge* Tarica (2009) interviewed Nola Firth, a psychologist who summed up the mental health issue as being “it is your attitude that is of crucial importance. It is not how much difficulty you had with your reading and spelling, it is how you approach it that is the indicator of whether or not your life outcome 10 or 15 years later was successful or not” (p.15).

Nola Firth when a PhD candidate, was awarded a Churchill scholarship to study dyslexia, took part in the Dyslexic Forum working group. Their recommendations and report went to the Australian Government in January 2010 (Coltheart, et al., 2010). Like Firth, my concern is the social and psychological impact over time for children and adults who learn differently, I believe this is a key to sustainable learning and health success. The following extracts show how families can be in despair when their children struggle with learning in a climate that minimally supports their learning. From the United Kingdom a mother stated:

“I gave up on her school. I was literally banging my head on a brick wall. Everyone knew she couldn’t read to save her life and that’s what was causing all her other problems, especially at home, it was a nightmare” (Rose, 2009, p.2).

With such a load of emotional stress at home on top of the actual learning issues, it is not surprising that children then become vulnerable to mental health issues. From New Zealand, an extract from an interim report inquiring into their intervention services for children with dyslexia by the Specific Learning Difficulties Association (Speld) New Zealand operations noted that:

Mothers spoke of this time (primary school) as being the most worrying, fraught times where they experienced disappointment in their child and the school system, guilt that they were “bad mothers”, guilt towards their own child for getting so angry with them over their learning difficulties, anger with teachers and schools and their own lack of knowledge and understanding, and absolute relief when they heard their child was dyslexic, and there was a reason for their lack of progress (Brooking & Rowlands, 2009, p. 13).

The United Kingdom and recently New Zealand have moved to ‘dyslexic friendly’ school policies which are carried through and acted upon in higher education. Australia’s attitude is
still that dyslexia is not an educational issue and stays a hidden handicap. As discussed earlier, recent changes in NSW (2005) have amended their linking the Education Acts to the DDA (1992) which heralds the possibility of inclusive education for SLD students with early identification, intervention, and collaboration between professionals as working principles (2007). When students self-report dyslexia in some Australian universities, they are in the category of ‘Other’ in the reporting of disability statistics (DDA 1992).

Management of disability is influenced by the Equity performance indicators that are the marking criteria for higher education subjects. A sociocultural understanding of disability rather than the underlying bio-medical model helps those who disclose their disability with information on access and retention. This allows a bias in the data in favour of those who have distinguishable disabilities (Brett & Kavanagh, 2008, p. 3) while those others with more invisible characteristics like dyslexia, mental health, and Post Traumatic Stress, are not accounted for by the indicator. Further they will have difficulties in self-disclosing and will continue to be invisible to the services. The review of Australian higher education (2008) noted some disclosure improvements. This was enough for them to place these other invisible disabilities out of scope favouring the Bradley, et al.,(2008) recommendations (Section 2.1.2) of giving institutions increased funding for LSES, rural, remote and NESB students who are under-represented in the educational institutions. Presently dyslexia is managed using a medical model with pre-testing, and with psychological testing which is harrowing, demeaning and disempowering for adults who have no previous diagnosis. This was expressed in an interview with a co-researcher AD (Meeting 30 September 2008). By not having an open cohesive interactive model and policy acknowledged on all levels, this minority equity ‘other’ group will continue to be invisible. Until learning difference and diversity are part of a positive social model of disability, “learned helplessness” (Seligman, 1972) and more social isolation behaviours are inevitable for this group. How the DDA (1992) policy is practised affects students with diverse learning issues and is evident in the co-researchers’ stories.

2.2.1.6 Perceiving dyslexia as a difficulty not a disability.

Whether dyslexia is perceived as a disability as in the United States, a learning difficulty as in the United Kingdom and Australia; or just a different way of thinking, the outcomes for students are shaped by socially constructed policies and their funding priorities. My concern is that the foundational educational system leaves emotional scars, lowering and sometimes destroying self-esteem to such an extent that generally bright, articulate children are treated unfairly. The social impact of unhelpful stereotypical attitudes and images sometimes
promoted by teachers and the community can halt a love of learning or can emotionally put back a child’s learning by years.

The beliefs of students are central to understanding and bringing changes in learning. In Australia Firth and Cunningham (2004) worked with trainee teachers and introducing them to successful adults with dyslexia to develop understanding of dyslexia and learning styles. A ground breaking United Kingdom research project examined how students’ beliefs in the origins of dyslexia could influence their study outcomes. In the research those who viewed dyslexia as a learning style made better progress than those who considered it as a medical condition (Pollak, 2004). The implication of this research is that the notion of learned helplessness could be exacerbated in a culture supporting a deficit model even though the learning difficulty is invisible. For example, contrast how Autism Spectrum Disorder is treated very differently in Australia: the high profile of a former deputy Prime Minister Tim Fisher, having an autistic child, helped bring autism into public awareness. A package of $190 million over five years was announced prior to the 2007 Australian election and was agreed by both parties (Lynch, & Homeless Persons' Legal Clinic, 2005). This disability group had also been invisible until an uprising of cases world-wide. One report presented to the US Government reform committee hearing on Autism suggested in 1978 that the rate of autism in the population was 1 in 10,000.

2.2.1.7 A social model of disability.

The idea that society has a part to play in including people with disabilities in the community is a virtuous endeavour with the hope that what is provided leads to a person with a disability feeling more empowered. This has not always been the case. The so-called ‘disability industry’ has grown since the 1990s following Care in the Community policies which started the move from hospital care to community care. By not following up with plans and money to support these ex-patients, we seem to have created another level of society, such as the homeless many of whom are ‘revolving door’ people with mental health issues (Lynch, et al., 2005). Nothing has changed as stakeholders still have little control; from an individualistic enclosed medical model to exposure to societal influences has made some of the once invisible visible.

A United States research program considered that the way students dealt with their learning disability had more influence on their life’s progress than the disability itself (Reiff, Gerber, & Gisberg, 1993). The results from a 20-year longitudinal research study with forty-one participants who had previously attended the Frostig Centre, a not-for-profit US organisation
founded in 1951, clarified the attributes of successful adults with learning difficulties/disabilities (LD) as self-awareness, emotional stability, proactivity, goal setting and social support systems. Although they were considered to be successful adults, the study found that new themes have emerged, however, the lifetime nature of LD, the need for continuing services and the painful social difficulties still continue to hamper those interviewed (Goldberg, Higgins, Raskind, M, & Herman, 2003).

It is essential, then, that we work to change the situation in Australia, to start considering empowerment and social and emotional communication to help the community understand that these aspects are just as important as academic achievement. Change will happen faster if we collaborate to look for the children’s attributes and strengths as we work towards acknowledging dyslexia. Research suggests that there are five main stages to acknowledging a disability which are: awareness, labelling, understanding/negotiating, and compartmentalising and transformation (Higgins, Raskind, Goldberg, & Herman, 2002). We have hardly begun in relation to dyslexia. Resilience research is seen as one answer to the exclusion issues that learning difficulties bring; has become a popular ‘buzz’ word in schools and programs developed to work on self-esteem and self-efficacy (Mathews, 2005). A recent example of a holistic approach in Australia is a private school which is developing the work of Seligman and Csikszentmihalyi (2000) and Positive Psychology. Their programs infused the idea of resilience, having the internal capacity to bounce back in conflicting situations. They had students in Y7 to Y10 who benefited from this approach during their school term, which culminated in a term long residential course. The aim was to help their students successfully transition the teenage years by increasing their resilience (Geelong Grammar School, 2011). This approach attempted to counter-balance the mental stress experienced by students through developing their creativity, understanding their positive emotions, and increasing their self-esteem. This school may have more funding opportunity however; other schools could use this approach as it mainly requires flexibility in teaching policy. Embedding such values into the very fabric of the curriculum would reflect change from a purely deficit model and its inherent behavioural skills and would support a more positive learning experience. When a deficit model underpins the educational, social or medical institutions it problematises issues and sets up the potential for the person receiving help to experience feelings of learned helplessness and social isolation as well as those of individual disempowerment and isolation and stress.

When I started my doctorate in 2005 I found that common medical definitions of SLD worldwide ranged from simple to complex. The earlier report from Boon (2001) had dyslexia
firmly as a medical condition dominated by groups of health practitioners competing and arguing for their particular definition being the right one. That situation has changed as more collaboration across disciplines has encouraged broader definitions of dyslexia (Frith, 2007).

2.2.1.8 My first understanding of dyslexia as a medical issue.

Goswami (2006) used both an interactive multi-sensory approach and an interactive multi-sensory approach and had brain imaging as her research tool for her exploration of the common factors in dyslexia and other cultural languages. Early research showed a dyslexic brain had less ‘light up’ on the left brain when a reading aloud task was performed by people with dyslexia compared to reading by normal readers (Goswami, 2006). When consistent instruction was continued for twelve months the images showed such improvement, thus confirming the dynamic nature of laterality and the plasticity of the brain. Prior to these dynamic brain models, there were competing definitions. There was no policy until DDA (1992), which meant SLD (dyslexia); as it was known in Australia in the 1990s, hampered the development of a common workable definition and effectively kept dyslexia hidden. A definition from the website of the International Dyslexia Association (IDA) a key stakeholder organisation expresses some of this confusion:

…dyslexia is a specific learning disability that is neurological in origin. It is characterised by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities. These difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede the growth of vocabulary and background knowledge (International Dyslexia Association, 2002, p. 1).

The advice from this fact sheet was adopted by the IDA Board of Directors on November 12, 2002. Their rationale was that dyslexia affects individuals throughout their lives and they hoped their definition would identify children. They believe most definitions do not acknowledge the children they aim to identify (2002).

2.2.1.9 Definitions of dyslexia from health disciplines.

Two examples highlight the difficulty educators earlier had in understanding how they can practically help. One defined dyslexia as “a disorder manifested by difficulties in learning to
read despite conventional instruction, adequate intelligence and socio-cultural opportunity. It is dependent upon fundamental cognitive disabilities, which are frequently of constitution” (Snowling, 2000, p. 15).

The second as:

a disorder in one or more of the basic psychological processes involved in understanding or in using language (spoken or written), which may manifest itself as an imperfect ability to listen, think, speak, read, write, spell or to do mathematical calculations. It also includes directional confusion, sequencing difficulties and short-term memory retention problems and inefficient working memory. The Diagnostic and Statistical Manual of Mental Disorders (as cited in Boon, 2001, p. 5).

While both earlier definitions show the breadth of the issues involved they keep the issues as a disability by using words such as “disorder” or “imperfect”. In this context what does “adequate intelligence” mean? Such definitions bear little resemblance to the issues teachers may be dealing with and the resultant behavioural issues. Could the behaviour be because of a curriculum and pedagogy which frustrates the student with learning differences? They will either succumb to reactive classroom behaviours or become the compliant student, causing no problems and learning little as they slip further and further behind. A more complex medical definition, specifically in relation to ADHD, adds in the possibility of overlapping symptoms with dyslexia. For example notes “hyperactivity and impulsivity, or inattention, which interferes with social, academic or occupational function; and appears in two or more settings” and then adds “that such impairment has to be seen before the child is seven years old” (Boon, 2001, p. 5).

This definition acknowledges the environment and relies on practitioner perceptions of impulsivity and hyperactivity. Should a teacher have to decide whether the child is exuberant or having a pathological response? Would a health practitioner be able to give precise indicators of medication levels from such a non-specific definition? From these initial definitions other ‘labels’ showing professional specialism have been applied, such as “Dyslexia: dyspraxia; central auditory processing disorders; visual processing disorders; receptive, expressive and pragmatic language disabilities; speech and articulation disorders and working/short-term memory deficit” (Boon, 2001, p. 5). Boon described dyslexia as a professional specialism in Australia. In my experience there are few psychologists who as
standard practice are willing to use the label dyslexia although dyslexia continues to be unacknowledged in education.

2.2.2.10 An educational model of dyslexia.

Attending educational conferences in the late 1990s organised by peak bodies such as Speld and Learning Disability Australia (LDA), I noticed that the emphasis was on learning to read and not on dyslexia. I naively thought a peak body on learning difficulties would bring a more specialised view. A pivotal report from the United States ("No Child Left Behind Act 2001," 2002) had a philosophy of inclusivity, equity yet emphasised the individual, and the disability rather than the learning. Meanwhile a different picture emerged in the United Kingdom, considered to be leading in research in dyslexia, which demonstrated literacy reforms using an inclusive social model and which advocated in most areas of education and work practices (Dillow, 2009). I concluded Australia was following the medical individualistic United States model. By the 2000s these English speaking countries, had found evidence-based workable educational models and had developed some agreement on the definition of dyslexia. These definitions have a component of phonological processing deficit which shifted thinking to perceiving dyslexia as a word decoding issue rather than as earlier thought, a reading comprehension problem (Snowling, 2000).

In the last ten years Snowling has been supported by the Australian learning difficulties peak bodies (Auspeld, LDA) to address conferences with this message but to little avail as we still have little phonics being taught in the schools in Australia (SD, personal communication, 2007). A number of actions followed. Firstly, there was the comprehensive Teaching of Literacy report (Rowe, 2005); the peak bodies (SPELD and LDA) then began advocating for earlier intervention (Twaddell, 2009); and the quality research of Coltheart who was involved in both peak bodies, became more prominent (Coltheart, et al., 1980). A public confirmation of the value of preventative health was made by Fiona Stanley, Australian of the Year 2003. Her organization advocated strongly for bringing the preventative health message and the learning issues together. She and other neurologists have reported that they can now show that the period from conception to the first three, four or five years of life is crucial in terms of brain development (Stanley, 2006). She was particularly looking at the issues of child mental health and adolescent mental problems, as one factor she pointed to was that suicide rates appeared to be increasing in Australia. How people interact with peers is the community’s social capacity, and so if the suicide rates are getting worse, one aspect would be that the learning difficulties in those early school years have not been
addressed sufficiently (Steier, 1991). During the 1990s, despite these best efforts, little changed in the literacy issues and dyslexia confronting Australia. There was little government initiative and community activity to rectify a growing literacy issue.

2.2.11 Dyslexia in higher education in Australia.

In higher education, dyslexia was already recognised and given support under the DDA (1992). However, because dyslexia had been invisible as a learning issue and label in Australia, understanding of how to effectively help such students was and still is limited. Whilst I am not advocating for the label, a definition which is mutually suitable for cross-disciplinary collaboration, for example, could improve and establish resource help. For instance, United Kingdom research opened up multi-disciplinary research opportunities for improving the literacy education across fifteen European countries (Smythe, 2005). Such collaborative efforts may inevitably lead to more appropriate educational pedagogical choices for all including marginalised groups.

Under the Australian Disability Discrimination Act (1992) and the Disability Standards for Education 2005 (2005) a growing number of diverse students with different learning and health issues are entitled to reasonable academic accommodations. The mix of student population in the US is predicted to become more international, older, ethnically and culturally diverse, and are all characterised as disabled (Porter, 1994). In Australia, disability was set to remain on the margins with higher education policies targeting the low socio-economic status (LSES) students as the government equity funding is set to increase yearly between 2010 and 2013 from an overall yearly $56.5 M to $168.5M. Henderson (1992) showed that the American trends for first-year self-report of students with a disability had tripled since the late 1970s. By 1991 they were roughly 9% of the student populations (cited in Porter, 1994). Similarly in Australia, information on the numbers of people with a disability and how these numbers have grown is scarce. DDA (1992) does not specify dyslexia as a disability but describes dyslexia for statistical purposes, while government agency statistics place any dyslexia statistics in the ‘other’ category. For example, State Education Departments’ statistics across Australia have different criteria for defining disability which vary from specific and narrow, to some not including students with dyslexia or even those with a medical condition. As a result, no distinctive numbers of dyslexia categories are available.

ABS Survey of Disability, Aging and Carers (Australian Bureau of Statistics, 1998) showed that 8% of all school children from 5 to 17 years identified in the disability category. Of this
number 16% were in the category of ADHD, ‘other disorder’ 9% and ‘other mental and behavioural’ 24%. The latter is possibly the Asperger Syndrome /Autism group and the ‘other disorder’ group may be where students with dyslexia severe enough to warrant diagnosis would be placed. These figures relate to diagnosed children and do not account for the compliant student with a learning difficulty, socially acceptable in secondary school, who yet, when arriving in tertiary institutions, can struggle, ‘burn out’ and fail in their first year in higher education without support and particularly in educational processes based on group work.

The same problem, of overly broad definitions of disability between institutions and based on self-reporting, skewed a survey of students with disabilities in higher education in Australia (Johnson, 2000). The study aimed to find trends for the next decade and found it impossible to make any comparison across secondary and post-secondary education sectors; however, they could only conclude students coming into higher education with a disability would follow the general population trend of increasing in numbers. A later study reported “an estimated 27% increase … in the numbers of students with a disability or medical condition eligible to access post-secondary education between 1998 and 2008 based on the Australian Bureau of Statistics data” (Johnson, 2003, p. 1). One state focused on dissemination of information on disability and staff development by using a universal design which “provided an ideal framework for the provision of more flexible and inclusive practices in education” (Johnson, 2003, p. 2). Since then other higher education institutions have put similar practices in place.

### 2.3 The personal context: Understanding the Professional Self

I start the section with some of my life history to show two aspects; the influence of habitus on my life, and the experience of the dynamics and development of empowerment through personal reflexivity. According to Pearce (2008), by exploring the influence of habitus I could provide understanding of the effects of my early influences on my professional self-development by personal reflexivity. Following is my habitus story.

#### 2.3.1 Was I born in a middle class family or were they just different and diverse?

While both my parents were hairdressers, they had high aspirations for their children. They were both creative teachers, lovers of the arts and experts in their fields. Both were from other countries my father experiencing on arrival in the 1930’s being a ‘migrant’, not feeling welcomed by the church as he had poor English and a strong accent. It was before the great depression in Europe in the late 1920s. His brother migrated when things were getting tough in Germany and in Australia he couldn’t get work for over 12 months and my father supported him during that time. My mother was culturally more secure. My grandfather brought his family from England in 1913. My mother was two years old. I consider my grandfather was upwardly mobile,
as he started a small manufacturing business and became a renowned tenor. My mother wanted to be an artist but her father would not hear of it. She took on the trade of hairdressing and had her own hairdressing business before she married my father, a talented hairdressing teacher. As the children came she worked from home knitting garments on industrial machines before she turned to dressmaking.

I was the youngest of three and the only girl. My mothers’ first child’s birth was traumatic; she nearly died of post birth shock as he was so big. From then on he was a problem, screaming so loud the neighbours inquired as to whether she was hitting him! She sought help and understanding by going to night school to learn psychology. This was in the 1940s, quite unheard of a women seeking adult learning. Her separation and consequent divorce from my father were related to my brother. She knew he needed help as he was getting more and more uncontrollable but my father could not accept there was anything wrong. My motivation to work with children came from the experience of growing up with this scary brother who could get violent with very little provocation.

I left school at 15 not because I wanted to; I loved school and was close to the top student. I was persuaded by my mother’s circumstances as my brother was to start university the following year. Her priority as a single parent was to return from country to city to set up home so that he could stay at home and for her to find a job. It made sense for me to get a job as it would be less of a burden for her. Office work was to be my lot in life. I lasted two years before I was bored and started my journey back to learning, achieving an honours degree before I was thirty years old. I have spent many years since enjoying learning both formally and informally.

There are various theories on the motivation of working class students in higher education. Green (2003) had the idea that students would aspire to be assimilated into a new elite class. McKenzie (2008) argued it was more important to understand the emotional and psychological impact for example alienation, self-doubt, intellectual excitement and compromise which were more akin to the working class experience than to continuing with elitist myths. On reflection my life has been punctuated by learning experiences similar to those Mackenzie mentions, in particular alienation and self-doubt and this was so for some of the co-researchers, I think particularly of co-researcher Gm’s prose The Periodic Table Test (Section 4.2.1.2).

The first time I remember listening deeply to myself and feeling empowered from the ‘inside-out’ came in the 1970s during a body focused workshop. It was a moment of feeling, knowing, recognising I had choice in the situation, and I felt the responsibility of that choice—it was an embodied experience. What was outstanding was the way the facilitator worked with an embodied sense of presence and silence. It represented empowerment and a belief in his authenticity and congruence – a person who walked their talk. Other experiences of body psychotherapy facilitation had been of the ‘push and shove’ or ‘get out the feelings’ variety which I found very disempowering. I was particularly scared when, after a group, I witnessed people temporarily mentally disturbed. On the other hand these experiences in body therapy gave me a sense of freedom from just talk as the focus was on the nuance of the bodily experience. It was very appealing and I wanted to pursue this process further.
That experience was at a time when I was studying in an innovative postgraduate course that led to my change in life direction. I had just completed a four-year university degree and I came upon this course because it promoted communication and talked about ‘a self-directed learning experience’. It was a Graduate Diploma of Extension at the Hawkesbury Agriculture College (HAC). I did not understand what self-directed learning meant other than it seemed different to the usual classroom lectures, inviting my participation in my own learning; it sounded interesting. The course had originated as training for agricultural extension officers employed mainly by state agriculture departments. The role of extension officers was to advise farmers of best practice and technological improvements; the course aimed to broaden the role to include a helping part rather than just being advisory/technical personnel. In this intake of thirteen participants I was the only female. It was an internal full-time course facilitated the group by four male staff. There were seven extension officers, two international Indigenous extension officers and four independent individuals from health and business.

I was looking to establish a professional identity following my completion of an honours degree in economics which I already knew would not my choice of career. My life education had to catch up quickly on many issues – particularly in relation to myself as woman. As a self-directed learning group we were given latitude to choose and make our own study plans, and then set about how to enact them. My big learning was how to facilitate and communicate within this group. That year gave me a turning point and a new direction for my life.

Following the course I was employed in the college department as the course administrative coordinator to help with the influx of new students in the external course. Expansion of the course into part-time external students the year before meant a more generalised version of the course was just taking on a second intake. These students were from more diverse backgrounds and the balance was more female. The major change I had that year was finding myself and body psychotherapy, later I went to the United Kingdom to study and train in Biodynamic Psychology with the Norwegian psychologist Gerda Boyesen (2001). That facilitator who had helped me in the experience of my first empowering moment came from this training centre.

It was later through a client, Roland, at the centre in London that I heard about the work of Tomatis (Tomatis, 1978, 1992, 1996; Tomatis, 2005). Roland casually mentioned he was dyslexic and had gone to Dr Tomatis for treatment “not because there was something wrong with me but because my brother was going”. However, he wanted to succeed in getting a university degree and was faltering as he was at his third university having failed at two universities earlier. He passed following his treatment. I was intrigued that simply listening to
modified music could profoundly change his learning. Many years later I was sent feedback on his experiences with Tomatis; one story on how difficult it was for him to read in higher education is included (Section 5.2.2.2.1).

Home after nine years away in the United Kingdom, early in 1991 I followed up on the Tomatis training in the United States. A further trip to the United States, led to contacting Ron Davis (1994, 2003) after discovering his book. I had learned about Davis through my work with Roland who had shown me a London magazine article called The Gift of Dyslexia and connected deeply to this article. From a literacy standpoint it had similar principles to those I was engaged with in body work with Roland. Davis aimed to ‘orientate’ the person, while the body work aimed to improve self-regulation; both were empowering processes involving the internal processes of body-mind. I have embodied the values and ideas of both these innovators; they have been central to my work in the last fifteen years as a listening and educational consultant and have influenced the direction of my dissertation.

2.3.1.1 Working and living in England 1980.

The four year training with Gerda Boyesen offered a more ‘caring’ feminine approach to body psychotherapy. Earlier experiences in Australia had been with therapists using a ‘pushing’ male approach which I disliked as it could be too provocative and often left people disturbed. In comparison, the intention of the Boyesen work was an edict; to ‘Make friends with the resistance!’ which enabled non-confrontational listening and acceptance.

This manner of working allowed an empowering gentle therapeutic (learning) process to develop. The therapeutic process with the primary goal of acceptance and allowing space, meant the relationship and intervention could go to the surface level of the client in the present moment on whatever level the client presented. This could be personal, social and/or spiritual. The therapists learnt how to be present in themselves, work with what was present for the client, observe the accompanying dynamic in the body, and reflect these observations back through voice, touch or developing emotional release of feelings. To learn to follow the ‘red thread’, a metaphor for the presenting issue, resulted in a powerful process and course of action. For example, if working on the verbal communication level, such a process could help clients come out of their alienation, victim blaming, learned helplessness or powerlessness.

That learning was over thirty years ago and the professional belief and values that I learned are as strong as ever and underpin my actions in both work and research roles. I still carry the intention to ‘make friends with the resistance!’ which is the value of acceptance on whatever level the person expresses. This manner of working can at times be confusing if people have
not experienced acceptance at this level and have only experienced a more ‘top down’ controlling prescriptive learning or teaching style. I think particularly of the teachers in my study. While they appreciated the structure I implemented they were reluctant to take responsibility and share their thoughts and feelings. For example, I made suggestions over the phone and only later could I trace the co-researcher’s lack of involvement back to that contact. Were they scared of the suggestion? The tension created when there is a dissonance that is not resolved can be creative or unfulfilling, the latter in this example. If viewed as a creative tension it can lead to empowerment and ‘peak moments’. In my ‘naïve realism’ I assumed I knew sufficient about the teacher’s context to make the suggestion I did which proved not to be the case.

2.3.1.2 The return to Australia.

I arrived back from the United Kingdom to a changed country. It was the year following the 200th year celebration of Australia’s settlement; I had been away nine years. I had been hesitant to return to Australia knowing I was going into the unknown professionally and knowing I would need to be ‘independent’ and strong. Two major ‘interferences’ delayed my professional self-development. One was employment. My last full-time work before leaving the United Kingdom was as a staff development officer in the Social Services in the Care in the Community initiative, while I continued with somatic psychotherapy clients and training groups. Both these professional contexts were richly rewarding and I hoped to take up a similar form of training work and/or private psychotherapy on my return. Neither of these came to fruition in those early years. Formal work in the social welfare sector was not possible as they considered my qualifications were not correct despite my developing an innovative Mental Health day centre and my staff development experiences.

The second interference was that I could not get registration with the local psychotherapy association. I was shocked, stunned and appalled that after a four-year experiential training, involvement in curriculum development, working as an international trainer in Germany and London, and co-ordinating the London clinic, I did not meet their entry membership requirements. In hindsight, the conflict was at a philosophical level. I used an embodied dynamic self-interpretation whereas the association placed emphasis on a psychoanalytical interpretation. This rejection was a deep culture shock; it felt like a stripping of part of my identity, built up over nearly ten years and I struggled to find myself – work, home and place.

Feeling ‘cut adrift’ from the professional work I had practiced for nearly ten years, I decided to take time to make a new decision on my career and I returned to UWS-Hawkesbury, where
I had previously worked and studied. I joined the first research Masters program in Social Ecology and felt on familiar ground, having returned regularly from England for the summer intensive residential.

2.3.2 PhD research 2005: My early identity issue

In my naïve start to planning my research through AR cycles, I underestimated how my identity was wrapped up in the role of private practitioner, and it was late in the third cycle of AR before I unpacked this through my reflective processes and could observe a similar phenomenon with some of my co-researchers (Section 6.3). My researcher identity began to become integrated when I changed from the focus of dyslexia to that of diverse learners and became more an ‘insider’ in the self-study aspects of the AR3 cycle.

I initially used the word ‘dyslexia’ and thought I would be exploring with co-researchers their psychological and social effects of dyslexia and implement listening strategies in my first phase of AR1 groups. I wondered why there was a lack of engagement and speculated it may be a cultural phenomenon to do with being identified as having dyslexia. As dyslexia is denied, potential co-researchers struggled to identify with this word. My ‘idealist’ temperament (McGuinness, 2004) can, under pressure, revert into a ‘crusader mentality’ or a strong desire to ‘change the world’ and these attitudes were present in my early encounters in these groups. I think particularly of an incident when I wanted to introduce a new idea at the AR1 second meeting and was met with hostility and challenge of my ways of working by a co-researcher. I had thought it was just a matter of re-inscribing dyslexia as a talent and a learning style; what a simplistic start. I now have understood the historical and present day context of dyslexia in Australia as a ‘hidden handicap’ or a diverse learning style where it very much depends on the social context as to how the person develops. The more encompassing label of diverse learners, away from the stigma of exclusion, may act as the catalyst for embracing students’ learning styles. In Australia, international students in higher education are an economic force. The language needs of those students may enforce a re-inscribing of all those marginalised in higher education environments. What effect will market forces of the global economy have in the future?

By the midterm of my research (2007-08), I had completed a circle; back looking at dyslexia definitions and found convincing arguments for defining dyslexia in a user-friendly way that would honour both inclusive teaching practices and methods to enhance relationships and learning.
2.3.3 A rationale for embracing the private practitioner-professional Self.

My professional Self as a Listening Consultant developed after I completed overseas training with Dr Tomatis and I set up private practice in 1997. It seemed an ideal avenue for my temperament which is intuitive feeling; a common feature of this temperament is being dreamers with a central focus on relationships (Stoop, 1998) and with a kinaesthetic learning style, a learning-by-doing style and awareness of the importance of sensory stimulation through movement (Hannaford, 1995). Yet to communicate my learning takes time, as I can take on a personal ‘invisibility’ and a silenced self when under stress. My biggest learning moments have been when I found myself in many different contexts. Three examples; in my postgraduate yearlong group as the only woman; finding my embodied voice in biodynamic psychology through learning to listen to the eternal wisdom of the gut; and my current work listening to families to help them improve their listening communications.

My continual listening to parents and children in my private practice led to an uneasy feeling of unfairness, of how some children in school with dyslexia do not get appropriate help for their learning style because of their ‘invisibility’ and the lack of policy. Having no category of dyslexia in educational policy, means that teachers have as little education as the community concerning the issues and ramifications for people with dyslexia. Without that attention, many teachers may not consider individual students to be ‘bad enough’ to warrant special resources. However, to be rendered illiterate through a system of schooling that does not teach all children to become literate is unconscionable. Stories from parents about the unhappiness, frustration, stress and marginalisation of their children in the school environment continue. From my experience and observation of dyslexic children, they particularly experience a pressure to be ‘normal’ but they feel different and have no sense of what ‘normal’ means. Such mental confusion can lead to out-of-control behaviours, and to being labelled as ‘bad’ as the child struggles to learn in an environment that does not understand them.

Yet on the other hand we are fed stories of the talent of the dyslexic individual who occasionally makes headlines in the newspapers. The latest one is Jessica Watson, the youngest female to circumnavigate the world (Donaghey, 2010), who is a great motivator to other young people in her determination to ‘live her dream’ after her mother had read her the story of Jesse Martin, the lone sailor, when she was 11 years old – she was quite severely dyslexic as a child, which in practice is not the case now. She is an inspiration for others given focus and determination. Such exceptional people can influence people’s perception about dyslexia, but on the other hand may give people the impression that our schools are catering for this group (J.J, personal communication, 2007).
In practice this was not the case. I became particularly alarmed when I saw a child as young as six years old who had “dumbed down” (Gatto, 2002) his intelligence and was lacking enthusiasm for any learning. Another example is an eight year old who continually says that he is ‘rubbish’ and his mother cannot persuade him otherwise. A child can be intelligent and still respond inconsistently in the educational environment. I know that these two children were under extreme stress. Their method of releasing their stress was not working; they were both imploding types rather than being explosive ‘bad’ behaviour children, the ones who get the attention of teachers. Commonly, the imploding children are, overall, unable to dissipate their accumulating stress in either their school or their home environment, mainly because their stress is covert and not often recognised as stress. I have found that once this accumulated stress is released, some children can resume a fast rate of learning. How helpful it would be if professionals understood and accepted the nature of the learning style of people with dyslexia. Some generalised strategies could be put in place so that their stress did not build up.

On a social level, programs that build on resilience are one such answer (Firth, 2010). Another example was a five year old client who, when I first met him, could not tell the difference was between letter and sound of ‘a’ and an ‘A’, he did not know that both letters have the same sound. By getting his ears processing more efficiently, his brain plasticity changed; he became a reader, and learnt new self-help strategies to help his dyslexic learning style. He went from that earlier level of defensiveness/stress to being in the top 10% in the State in the NAPLAN test of English, and in computer studies within three years following treatment (SL, personal communication, 2010).

Rankin (2010) conducted a small Australian study at Latrobe University of dyslexic students who had been diagnosed in childhood. The study aimed to assist the students in developing a stronger voice. Eleven families were attracted to the research; five students and some parents were interviewed. The parents talked of the inconsistent approach to supporting or assisting the learning, particularly in the high school system, and how as parents they were treated with suspicion and blamed for the learning difficulties of their child. Both parents and students thought that the early education system had failed them. It was damning that the nature of dyslexia was not understood by special educators, and that an attitude of dyslexia as “just a reading problem” existed even in a private school (Rankin, 2010). One striking feature of the study was the emotional intensity and engagement of all participants; another was a glimpse of the high financial and social cost associated with providing enough support for the students. The study acknowledged a bias that the families were highly qualified professionals.
My experiences from 1998 onwards of presenting to colleagues, teachers and attending learning difficulties conferences, confirmed a general lack of understanding of the value of deep listening and its effect on learning and stress issues.

2.4 Chapter Conclusion

This chapter looked at three main contexts: policy, dyslexia and my personal context. There was difficulty separating out the policy confusion within the Australian context. The Federal DDA (1992) and policy is relevant to the higher education context because their education funding is under Federal control. The states are responsible for post tertiary education; however until recently there has been little educational coordination and cooperation between states and the Federal government. I have shown that the struggle to make dyslexia visible has created six states and two territories with potential for dissonance in their educational policies. Therefore I found it necessary to look at the historical background of literacy education in order to provide a background context for the issues confronting dyslexia in Australia.

I have worked backwards, from the present-day higher education equity practices and policies, to reveal the hidden nature of dyslexia in Australia, compared to other nations, in particular the United Kingdom. The first-year experience revealed in the higher education literature is driven by high attrition rates. This factor has been a platform for innovative developments in teaching and learning, the development of expressed policies of inclusive education and the changing composition of equity groups (Kift, 2009). In particular, women are making a major contribution, particularly in the postgraduate area. Another contribution is from the economic force and policies related to the increase of international students who make up Australia’s third highest export market. Overarching this is the equity domestic targets: students from low socio economic backgrounds (LSE), from non-English speaking backgrounds (NESB), from distant and remote demographics, and Indigenous students have had exponential growth in funding in the last few years in order to reach these targets. Equity and diversity issues are now affecting every level of university life in Australia.

An example I explored was English language learning. It has come to the fore in order to improve learning, particularly in higher education. There are many barriers such as the diverse entry standards and different regulations between states, which at the present time, undermine the implementation of a regulated sector. Second language research into listening was explored and valued because listening is an inclusive topic and complements any development of higher learning and critical reasoning.
Dyslexia is an unknown quantity when people in universities come forward to obtain compensatory help they are required to obtain a disability classification. Such a move can be counterproductive for some; others can greatly benefit. However, a barrier to success is the interest in and understanding of learning styles of those who acknowledge that they require help. The development of literacy education from a dyslexia perspective in Australia is at least ten years behind when compared with other English speaking countries.

The whole word versus phonics debate has, I believe, exacerbated the delivery of literacy. Because there has been no coordination between states on educational policies this has led to a ‘whimsical’ delivery of teacher training in relation to literacy skills for two generations. Inclusive policies that include dyslexia both in the United Kingdom (UK) and New Zealand (NZ), are more comprehensive across education and industry. New Zealand now has distinct policies and action in place, while Australia is just at the first stage of community awareness and amendments within one of the state education departments (NSW) (Section 2.2.1.2) to bring dyslexia into the learning difficulties category in line with the Federal Disability Discrimination Act (DDA) (1992). There are another five states and two territories yet to amend their Education Acts.

I have explored the definition of dyslexia to show the changes historically from a medical model, in which each discipline competitively had their own definition, to a more holistic and systems based model. However, the labelling of dyslexia and other learning disabilities in university relies on initial screening and psychological IQ testing which may not give sufficient direction to the practitioners working in any educational field. Requests for consideration are generally thought to be rising. Unfortunately, in Australia it is impossible to obtain accurate figures because of the different criteria used by each state and territory. I referred to two studies by Johnson (2000, 2003) to indicate the early move in Australia to bring inclusivity into disability policy and implementation. Although I have given only brief attention in this chapter to learning support and language learning departments in universities, I have attended and presented at conferences (2008–2010) in both areas and acknowledge the contribution to knowledge development in this area which can in some cases be the impetus for universities to conduct cross-disciplinary work with academic staff.

The following chapter explores the research journey including a discussion of the action research from its participation and self-study perspectives, the theories that informed and drove the research. The action research processes and cycles are described, along with learning activities and analytical methods. Finally the ethical aspects and rigour are discussed.
Chapter 3.
Methodology and Methods

This chapter will explain and discuss the theoretical framing of the research by tracing the research journey from participatory action research (PAR) to self-study action research (SSAR). In order to more fully understand the application of the main concepts and theory that underpinned both SSAR and my values, I implemented both reflective and reflexive methods which utilised both cognitive and affect aspects: the Listening Guide, a dyslexia definition, and my struggles with the chaos and uncertainty in the practitioner researcher role, and the dialogical and relational aspects with co-researchers. I confine my review of approaches to learning to exploring the inner process of how people learn in relation to their habitus. Therefore Constructivism, which understands learning as inter-subjective and co-constructed (Doyle, 2012; Gilligan et al., 1990), was the focus of the review. In addition, an understanding of adult learning and of learning styles was the chosen development methodology reviewed within the context of participatory action research and later self-study action research.

Three AR cycles were conducted over three years with the focus of the first two PAR cycles on dyslexia from an outsider perspective. The purpose was twofold: to understand the experience of dyslexia from a social and psychological perspective, and to implement techniques from my professional practice in order to assist the learning of the co-researchers. Consistent with a critical framing of PAR was the notion of change and empowerment of co-researchers. However, a lack of co-researcher involvement in cycles 1 and 2 prompted a re-think of the project and the decision was taken to shift the focus to SSAR in cycle 3.

In cycle 3 the first aim was to understand diverse learning and the experience of diverse learners; the staff and students in higher education. The second was to implement techniques from my professional practice in order to assist diverse learners by carrying out these activities reflectively, and for me to reflexively understand and incorporate my learning into my professional practice.

To understand dyslexia and diverse learning in AR1 and 2 and to develop discussion, the techniques included using two checklists; How can Listening be Identified? and The Dyslexia Characteristics Checklist (Appendix 1). When the latter checklist was used a discussion of the meaning of the word dyslexia followed. In AR3 the learning methods were developing for example, I-poems (based on the Listening Guide), writing exercises, reading aloud, and using
technology programs. Of these methods, the I-poems from the Listening Guide allowed an intangible level of analysis to take place during the AR cycles.

Consistent with PAR and SSAR, my understanding was enhanced through critical friends, whose role in such research is to provide feedback and critique. These can be professional or lay persons. I invited professional persons from my networks. For example, post-doctoral fellows, another PhD student, and lay people were willing to be part of the process of critique. The research journey at times covered a rocky terrain that was scattered with clear pathways, loss of direction, and then a search for new directions. The discussion of the three AR cycles will identify actions and outcomes. Drawing on the literature, the theoretical underpinning of PAR and SSAR, the learning theories that informed my thinking and the techniques implemented with the co-researchers will be discussed.

After the completion of the three cycles, the conversations, activities and outcomes, a second level of analysis was undertaken through the construction of themes and subthemes. The method by which this was carried out will be discussed. Finally, the processes and procedures related to ethics approval and ethical context of the research, together with the notion of what counts as rigour in AR, will be explored.

A summary of the Action Research cycles is presented in Figure 3.1:

![Summary of Action Research cycles.](image)

**3.1 Approaches to Learning**

In psychology there are several schools of thought about how learning takes place. Rationalism (or idealism) based on the idea of an existing biological plan stresses the role of experience and active learning. An empiricism paradigm is the view that reality is universal, objective, value-free and quantifiable; is the epistemology for generating knowledge; and is
the foundation of the scientific method. Such a stance ignores the fact that humans have a brain and can interpret and make sense of their own world. Locke (1690) claimed, “[t]here is nothing in the mind that is not first in the senses” (as cited in Carlile & Jordan, 2005, p. 13), which implies that individuals can be reduced to passive recipients unable to construct their own world. Thus the ‘real’ world of science seeks only to predict and find direct relationships between cause and effect.

### 3.1.1 The Constructivists.

The three learning approaches derived from Empiricism are behavioural, cognitive and constructivism, with the latter the only one which takes into account knowledge as constructed. Constructivism has moved beyond the scientific method by focusing on the individual as a ‘sense maker’, with unique individual differences, as well as allowing for the ‘sameness’ that unites humans to be identified. In other words, constructivism takes into account both the inner realities of ‘sense making’ and the outer realities of sameness.

Fry, Ketteridge, and Marshall (2008) describe constructivism as “like a continuous building and amending of structures in the mind that ‘hold’ knowledge” (p. 9). In other words an individual constructs their own representation in an active process. Although constructionist dialogues are open for all, they invite without giving direction, can open the inquiry into “the potential of relational being and meaning”, and will ultimately be a “redrawing of psychological processes” (Gergen, 2003, p. 43).

Although constructionist dialogues are open for all, they invite but do not lay down direction, and can open the inquiry into “the potential of relational being” and meaning, and the “redrawing of psychological processes” (Gergen, 2003, p. 43.). Ashworth (2003) used the phrases “the quality sensibility…[and the] unity of mind of the qualitative psychologists [as] moving in a post-modern direction… by the process of perceiving unique individual differences, and at the same time allowing for the ‘sameness’ [the life-world] that unites humans to be identified” (p. 23). The social aspects of learning then can be thought of in terms of inclusivity: as the integration of making sense of our inner realities and the outer realities of the sameness (Ashworth, 2003). This epistemology is emerging in higher education as a student-centred or learning-centred focus particularly in diverse or marginalised parts of the culture.

Vygotsky (1978), an early educationalist, showed how learning was part of communication by researching the communication between mother and infant as necessary for acquiring both language and concepts. He also suggested that the opposite may be ‘true’ that without
communication there may be no thought. His concept of a zone of proximal development (ZPD) is “the distance between the actual development level [of the person] as determined by independent problem solving and the level of potential development as determined through problem solving under [either] adult guidance or in collaboration with more capable peers” (Vygotsky, 1978, p. 86).

This notion has been accepted in linguistic theories, where the importance of communication and dialogue as key elements of constructivism to facilitate meaning is stressed (Vygotsky, 1978). Practice examples are the development of the ‘scaffolding’ of knowledge, peer support and tutoring. This is a sound pedagogical reason for the growth in collaborative learning structures in higher education, as culture has a large role to play in the construction of identity and further into the society.

The interdependence of social constructivism means that there is a possibility to account for all constructions whether in the personal, community, social, or world view, and these can become reflexive processes between the researcher and the subject. Etherington (2004a, 2004b) shows how this dynamic process applied using her own stories in different phases of her life in higher educational groupings. She went through the role of client, student, supervisor and facilitator as she moved towards a reflexive researcher identity.

Researchers take on different methodologies from existentialism: heuristic, ethnography and auto-ethnography (Ellis, 2004), which have the common feature of an analysis which emphasises the development towards non-hierarchical, reflexive and interactional practices. In so doing the potential is there to expose the researcher to moral dilemmas which otherwise would not be noticed using non-reflexive research methods (Etherington, 2004a). This epistemology is emerging in higher education as a student-centred or learner-centred focus becomes part of that culture.

3.1.1.1 Adult learning (1950s to 1980s and beyond).

“We need to turn the rhetoric of lifelong learning into a reality”
(Bradley, et al. p.xii, 2008) (my emphasis)

This view encompasses a broad group of theories with different ideas concerning the way people learn. A common view is that of learning as based on the significance of an experience or concept. The autonomy of the individual student is accepted and the teacher acts as a facilitator to help the learner discover meaning and understanding, rather than just to accumulate information as the cognitivists would wish. The underlying principle stresses diversity in learning given that learners come to the learning situation with different constructs.
An individual’s learning style is considered to be the way that person prefers to learn (Fleming, Mc Kee, & Huntley-Moore, 2011). According to Fleming et al. (2011) while the terms was discussed in the early 1800s, it is thought to have been used first by Thelen in 1954. The application of cognitive style to learning is also referred to as the individual’s learning style (Exley, 2003). While this is so, Kratzig and Arbuthnott (2006) have argued that learning style is composed of cognitive as well as affective and psychological characteristics that determine how an individual interacts with the multiple aspects of a particular environment. Further, they state that “individuals differ in the sense modality of stimuli from which they best absorb, retain and process information” (Kratzig & Arbuthnott, 2006, p. 238). From this perspective notions of learning styles are based on the sensory modalities such as kinaesthetic (tactile), visual and auditory (Exley, 2003; Kratzig, 2006; Neuhauser, 2002).

There are many learning style theory models. Whilst there is some overlap in the concept used, there is no easy way to compare approaches – there is no core technical vocabulary, which means that extensive scientific justification for these theories is lacking (Coffield, Moseley, Hall, & Ecclestone, 2004). Definitions vary across different academic disciplines; different measurement tools are used in various research projects and the research findings lack robustness because of the small study sizes (Fleming, et al., 2011). Therefore, learning style theory is open to debate and critique.

The largest review of learning styles was conducted by Coffield, et al. (2004) who identified 3800 research papers on learning styles. These were culled down to 351 papers covering 13 major theorists who met the criteria: being widely used and quoted; regarded as central to the field; based on explicit theory; representative of available models; and led on to further work. The test/questionnaire was widely used (2004, p. 17). Methods for the determination of learning style vary by discipline, context, learning theory, values and group norms. The following discussion focuses on Kolb’s method as it was an approach that “seeks to integrate cognitive and socio-emotional factors” as derived from the Experiential Learning Model (Kolb, 1981, p.235).

By using the criteria of internal consistency, test-retest reliability, construct validity and predictive validity they found that only one of these met all four criteria. Kolb had only one criterion: the criteria test-retest reliability. On the other hand, the Myers Briggs Type Indicator (MBTI) a popular personality model met two criteria: test-retest reliability and internal consistency. Both these models are extensively used in professional practice across learning and business situations.
Kolb (1981) developed the Learning Style Inventory (LSI) that allowed learning styles to be measured across several dimensions “abstract-concrete and active-reflective”. On testing the LSI he identified four learning styles and emphasised that these learning styles should not become labels for stereotyping individuals.

Convergers. The predominant learning style is Abstract Conceptualisation and Active Experimentation. People with this learning style perform best in situations where there is one answer to a particular problem or question.

Divergers. The predominant learning style is Concrete Experience and Reflective Observation. People with this learning style perform best in situations that require ideas to be generated in an active process such as “brainstorming”.

Assimilators. The predominant learning style is Abstract Conceptualisation and Reflective Observation. People with this learning style perform best in situations that requires “inductive reasoning” and the assimilation of “disparate observations into an integrated explanation”.

Accommodators. The predominant learning style is Concrete Experience and Active Experimentation. People with this learning style tend to solve problems through “intuitive trial and error” and avoid an analytical approach.

Kolb (1981) suggested that individual cognitive functions may vary depending on context. He offers the example in which an individual may demonstrate both a concrete approach in interpersonal interactions and an abstract thinking style while managing a problem at work. Fleming, et al. (2011) suggest that using “several learning styles is advocated as it enables individuals to become effective all round learners and professionals who can benefit from a wide range of learning opportunities utilising whatever combination of learning styles the situation requires” (p. 448).

My thinking and actions have been influenced in my practice by the use of two most popular models: Kolb (1984b) and Knowles’ Andragogy along with self-directed learning (Section 3.2.5). From the beginning of the research I perceived both of these as compatible with the processes of AR. I found Kolb easily explainable as a brain based information processing model, able to be easily integrated into meetings with co-researchers and acting along with the AR learning cycle as a theoretical language to explore learning. I had used this model and language in my earlier University experiences. These perceptual information processing models which have a biological base can inform and bring change to our habitus – our embedded attitudes and habits coming from our environment or personal history. Such changes in perception can be used as a way of developing understanding of social identity and
codes. Two examples of this type of learning style are the visual spatial cognitive map (Silverman, 2000) and the brain gym exercises, which include activation to the visual, spatial and movement centres of the brain (Dennison & Dennison, 1989; Hannaford, 1995). These are modern-day versions of learning ‘from experience of the mind and senses’ as discussed above as part of an empiricist paradigm. When looking at Lewin’s basic map of an AR cycle (Lewin & Lewin, 1948, p. 206), I realised that he was expressing “a different kind of interpretive practice than the more traditional empirical-analytical research of the day” (Smith, 2001, p. 8).

The early map of the AR according to Lewin and Lewin (1948) is shown in Figure 3.2

![Figure 3.2 Lewin's original idea of an action research cycle (Adapted from Lewin 1948).](image)

From this original work it became easier to see how comfortably the work of Kolb (1984b) fits into this idea of AR as shown in Figure 3.3.

3.1.1.1 How the Kolb Action Research learning cycle works.

![Figure 3.3 A simple Kolb individual Action Learning cycle (Adapted from Kolb, 1984b).](image)
My explanation of this model is simple. I asked myself “How do I learn?” I think it can be agreed that the four aspects depicted in Figure 3.3 are universal. I learn by doing something (do); by observing or reflecting on what I have done (see); by feeling something about the something (feel); and by thinking. An example is to explore learning difference (style) and to look at the individual dynamics of the cycle. The first desire is to learn something. Start at any point in the cycle, such as feeling something from a recent experience. Then ask: What action can I take? Taking the action (doing), and follow up with cognitive thinking by reflecting on the experience (observation). This can lead to finding a key idea. Learning is not as clear cut as this example. Different permutations are possible: for example, stages can repeatedly be missed, or one stays in one stage; however, eventually the four stages lead to taking on a key idea. A new reflective process starts, leading to a synthesis of that experience and onward to repeated iterations and the growth of new knowledge, depth and improved practice. The diagram below depicts the cyclical nature of this experience.

![Cyclical Model of Action Learning Cycle](image)

Figure 3.4 A cyclical model of an Action Learning cycle (Adapted from Kolb, 1984)

The most important aspect of this model is the potential to develop internal satisfaction, better self-regulation and empowerment, as seen with the pioneering work of Freire (1970) and as critical education theory demonstrates, providing that the intention is to enhance learning and not just to ‘diagnose’ a situation.

### 3.1.1.2 Critical education theory.

Critical education had its beginnings with the pioneering work of Freire (1970) and found a place in higher education through Shor, who followed closely the Freirian work (Shor & Freire, 1987). The prolific theorist Giroux (2006) has carried on, developed and advanced the
theories of Freire into the idea of border pedagogy. This notion can be likened to the North American notion of a democratic civic education. It is a vision of education to address the challenges from the potential of increased world population and the politically changing world of the 21st Century. This reformulation of critical pedagogy as a public pedagogy would, for example, bring all forms of knowledge to public engagement in order “to secure and challenge the ways in which power is deployed, affirmed and resisted within and outside traditional discourses and cultural spheres” (Giroux, 2006, p. XX1). He urges educators and academics to “be critical, creative and hopeful” (Giroux, 2006, p. 181) about the potential of what they and their students can offer.

I met the ideas of critical or empowerment education the book Pedagogy of the Oppressed (Freire, 1970) when I was at my first Hawkesbury Agricultural College experience (1978). My understanding then was that it was a way of understanding which could cross the boundaries of community and educational research. On that course, we were involved in both individual and group efforts to identify issues and to learn how to critically assess both the social and historical roots of issues. The ultimate aim was to have a sense of a healthier group (or society) and to find common ways to move through any barriers to achieving goals (Wadsworth, 2011). I found that by being involved in that community of learners I could, through new experiences, find my individual voice.

It was surprising to see how I could influence decisions in the immediate environment and could perceive and act to extend my influence into other areas. An example from my life was in developing a day centre for people with chronic mental health. My aim was to have an empowerment model based on my own previous experience in learning. I set up the structure in the centre to run as a cooperative group, insisting that the people from the mental hospital were not to be called patients, but rather, members of the centre, and I involved them in the day-to-day decision making. This led to an empowering effective environment; a first establishment in the social services to include people with mental health issues in the decision making process of the centre. To ensure an open communication with all stakeholders, I formed an advisory group with the main professionals involved with the members and included members and professional feedback in a report after six months of operating. My voice was heard at head office and I was head-hunted to staff development to help others set up similar empowering projects in the United Kingdom national Care in the Community initiative. In that position I targeted all levels of organisation, individuals, and groups, and structural change happened. Wallerstein (1988) argued that empowerment is a broad process.
which can involve prevention as well as other goals of community connectedness, self-development, improved quality of life and social justice.

Freire’s contribution of the notions of codification and ‘conscientisation’ through reflection and action, were pivotal to ensuring an empowering process. It required learning how to deeply listen to learners’ needs, particularly in the fact finding (reconnaissance) stage of the interaction. The work was then to summarise the needs and apply through action the creative representations (the codes) which helped participants talk and refine their needs. As important was to develop the practice of posing questions rather than problematising issues.

3.1.2 Humanism.

Freud gave us the vision of the role of a conscious and subconscious process at war. Skinner ... psychological habits are all that matter ... Piaget ... blends both visions ...[an]emphasis on ... the genetic and experiential facts to structure of the development of intellect (Sample, Charles, & Bardhart, 1977, p. 37).

These approaches of Freud, Skinner and Piaget were limiting according to psychologists Maslow, (1940-60s) and Rogers (1960-80s), who both grounded their work on celebrating all facets of the human as the individual learner, and on a general positive view of humans. They extended humanity to an existence of fulfilling one’s potential by including the areas of feeling, emotion, spirituality and creativity (Sample, et al., 1977).

Maslow (1943) developed a pyramid hierarchy of human needs, still very much used, tool to understand self-actualisation. He perceived acceptance, lack of prejudice, morality, creativity, spontaneity, and problem solving as achievable only if the basic needs for food and shelter are first met, followed by the needs of safety, belonging, love and esteem.

Rogers’ work in therapy spanned forty-six years and was revolutionary because the interaction between client and therapist was client-centred. He said that “in a general way therapy is a learning process” (Rogers, 1951, p. 132), and went on to develop nineteen propositions for a theory of personality and behaviour (ibid., pp 483-524). If therapy is a learning process parallel with the concept in education of learner-centred, then the expectation is that self-development of learners would be gained through understanding and cooperation. The role of the teacher needed to become more flexible, to change from a view of “teacher as all knowing” towards a view of “teacher as facilitator of learning”. Questions become important about how learners learn and what motivates them.
An educator who attempted to answer this question was Knowles (1980), who claimed the pedagogy of teaching in HE was by default the teaching of adult learners. He explored how teaching children and adults assumes different values and applied the term “pedagogy” for the art and science of teaching children, and “andragogy” for the art and science of helping adults learn (Knowles, 1980, p. 43).

The principles considered in Table 3.1 illustrate some of the different values that underlie the assumptions of pedagogy and andragogy.

<table>
<thead>
<tr>
<th>Diverse assumption underlying:</th>
<th>Pedagogy–child learners</th>
<th>Andragogy–adult learners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concepts about learners</td>
<td>The learner is dependent, and teacher takes on all responsibility for learning.</td>
<td>From maturity, the adult moves towards independent self-directed learning.</td>
</tr>
<tr>
<td>The learner experience</td>
<td>Of little consequence, hence techniques primarily transmitted. For example, lectures and presentations.</td>
<td>Experience valued as a resource for self learning and others. More value placed on experience than knowledge received passively.</td>
</tr>
<tr>
<td>Are you ready and willing to learn?</td>
<td>Where the society or school is the authority of what is learned, often perceived as of little practical value.</td>
<td>Motivated and ready to learn from experience to solve everyday problems encountered.</td>
</tr>
<tr>
<td>Learner orientation</td>
<td>Learning by acquiring knowledge. The common metaphor: student as jug while the teacher pours the water into it.</td>
<td>Education perceived as a way to develop competence; apply now and the future. Can act as a resource to group; performance-centred.</td>
</tr>
</tbody>
</table>

Table 3.1 A comparison of assumptions underlying child and adult learning.

Other researchers, such as Fry and colleagues (2008), concluded that as adults gain maturity they become more self-directed means their accumulated experience becomes a rich resource. Adults then become more problem-centred with their motivation being inner
directed. Thus their learning readiness is motivated by more needing to know rather than subject-centred as the children (Fry, et al., 2008).

Barnet (2004), for example, calls for an “ontological turn” to a pedagogy of human beings. Solving learning issues by using methods which develop adult learning principles, communication and self-understanding can be addressed through critical theory and action research methodologies.

The following section’s discussion will explore in detail the relevance of action research to this project.

3.2 Understanding Action Research: From Participative Action Research (PAR) to Self-Study Action Research (SSAR)

3.2.1 Why did I choose to use Action Research?

My initial thoughts about the research was wanting to take my private professional knowledge into another context, to find a way to reflect on the nature of my transition from individual private practitioner using a deficit model of dyslexia and disability to researcher/practitioner and a social/educational model of practice. I wanted to be deeply involved in my change process, and knew from previous practice and understanding that AR would be a suitable methodology. Initially my aim was to explore the effects of SLD (dyslexia) from a psychological and social perspective in a different context from private practice. The issues that my private practice clients faced in school were about fairness and equity and I was curious to know whether, and how, the same issues impacted on those who learn differently as adults in higher education. This was confirmed in the first two cycles as my question became both inward and relationally focused on how I could develop my reflexivity.

3.2.2 The epistemology of Action Research methodology and the embodiment of my values.

The epistemology is the theory of how knowledge is developed and the methodology of AR is constructionist. Methodology is generally understood as the theory that drives the research, the methods the techniques for collecting the stories of the co-researchers. This section will explore my first theoretical understandings of AR, the history of Action Research and identifies the various methodological approaches.

I start with cooperative AR, as Heron and Reasons’ work in co-counselling from the University of Surrey influenced my therapeutic understanding and training work at that time.
3.2.2.1 The ways of knowing in cooperative AR.

The term ‘cooperative inquiry’ originated in the United Kingdom from the pivotal book by Reason and Rowan (1981). In conjunction with Heron and Reason (2008) and Reason and Bradbury (2008) the original research set the guidelines particularly to how groups could validate their practices through the use of action research. The roots of this approach came from the early work of Herron and Reason where Heron (1988) discussed the epistemology in this new paradigm research and argued “that experiential knowing is knowledge by acquaintance…realised by direct face to face encounter with person, place or thing: it tells us the interplay between the posited world and the presented world” (p.42) Knowing through the immediacy of perceiving, through empathy and resonance is what brings the quality of being. Presentational knowledge emerges from experiential knowing, and is informed by the processes of the discourse. Its products are revealed through significant moments, for example, through sound, music, prose and I-poems. Propositional knowing is the intellectualising of ideas and theories communicated through language. Practical knowing is understanding how to do something, be it a skill, a product, or a competence; it can relate to any level of knowing and can be woven into everyday life. Levels of knowing such as interpersonal, transpersonal or political can be supported by a community of practice or technical knowhow (Heron, 1988). This is different to cooperative AR processes which are set intentionally and therefore can have greater validity when in congruence with each other.

A later model clearly delineated this knowledge as first-, second- and third-person research (Reason & Bradbury, 2008). It is possible for example using a second person AR construct to perceive and act on how all parts work together in an inquiry group as cycles of action and reflection are worked through. In my research I engaged in a similar process: it was like an extended epistemology of experiential, presentational, propositional and practical ways of knowing. Sometimes the knowledge of experiential learning included both process and outcomes.

In summing up, our knowing is grounded in our experience, expressed through images and stories, understood by theories that make sense to us: it can then be expressed in worthwhile action in our lives. With this background I work back to the original ideas of AR.

3.2.3.2 A history of Action Research (AR).

In the 1930s, Kurt Lewin first started doing “quasi experimental testing” in the community in order to show “there could be could be greater gains through democratic participation rather than autocratic coercion” (cited in Adelman, 1993, p. 7). When Lewin came to the US in the
1940s, his concern was to “raise the self-esteem of minority groups to help them seek ‘independence, equality, and co-operation” (Lewin (1946) cited in Adelman, 1993, p. 7).

According to two of his former students, Cartwright and Zander (1953), action research came to mean a “…systematic enquiry…in the quest for…effectiveness through democratic participation” (p. 7), a stance considerably different to the traditional scientific version of AR of hypothesis forming and testing. Lewin was prioritising theory development as a result of “democratic participation”, whereas the scientific version of AR at that time prioritised the theoretical aspects of their hypotheses (Carr & Kemmis, 1986, p. 28). McKernan (1991) considered that Lewin’s contribution was arguing that to “understand and change certain social practices, social scientists have to include practitioners from the real social world in all phases of inquiry” (Cited in Kemmis & McTaggart, 1988, p. 10). It was commonly thought that Lewin was the first to construct a theory of AR described as “proceeding in a spiral of steps, each of which is composed of planning, action and the evaluation of the result of action” (Kemmis & McTaggart, 1988, p. 8). As evaluation can be defined as both observation and the reflection of that observation, the much-used AR cycle of Plan, Act, Observe and Reflect had its origins from this era (Carr & Kemmis, 1986). Schon discussed extensively the technical/rational approach to problem solving which involved the teachers in the decision-making process (1983), yet according to Feldman, Paugh, and Mills (2004) it is possibly still the most common form of AR practiced in teaching in the US (p. 295).

3.2.3.2.1 The teacher-as-researcher mode.

In the United Kingdom the teacher-as-researcher model of AR led by Stenhouse (1981), and was predominantly used for school-based curriculum development. In Australia, Carr and Kemmis (1986) modified the idea to suggest developing “a critical emancipatory community of practitioners committed to examining their practice” (p. 44). Grundy, building on the ideas of Habermas (1971) and van Mannen (1977), developed the use of teachers experiences and their observations and following the original technical/rational AR approach, brought forward two further emerging modes (Grundy, 1988): the practical and the emancipatory. She showed the difference between these modes through practical examples, thus acknowledging and recognising that a teacher’s choice in using these three modes would wholly depend on their epistemology. The intent of the practical approach was to understand the teacher’s knowledge, and the student. Action from the research resulted from interactions within the group rather than from the positivist stance of acting upon the environment, which was more apparent in the technical rational approach. Studies using the emancipatory orientation were aimed at the broader social issues, situations and structures which were disempowering both...
the teachers and the students. If the assumptions underlying this disempowerment could be critiqued and acted upon, all involved would have some level of freedom from restrictive beliefs.

A philosophical difference developed from the Grundy notion of practical reasoning and the more common everyday way of dealing with problems. Grundy’s (1988) concept of practical reasoning was like a form of deliberation. Aristotle (1985) described this deliberation: as it takes in those matters where only general rules can be laid down and in which the issue is ... uncertain ... incapable of definite rule or prediction ... not so much deliberate about what end to aim at, as about ... the best means to such an end (p. 328).

Rather than the well-formed technical questions and the testing of hypotheses of ‘techne’, the deliberation of an emancipatory-critical approach meant action researchers had to address transparency issues. It is important to do what Schon (1983) described as wading into “the ‘swampy lowland’ where situations are confusing ‘messes’ incapable of technical solutions” (1983, p. 39). Similarly, Mills (2000) took a problem solving how-to approach to his AR and linked social science, critical theory and the humanities by acknowledging their fundamental shared purposes.

Post modernists argue that “truth is relative, conditional and situational and that knowledge is always an outgrowth of prior experience” (Feldman, et al., 2004, p. 946) thus pulling apart the ways of knowledge formation by questioning the basic assumptions of everyday life. This is similar to a critical emancipatory approach which provides practitioners with a method to examine their ordinary, everyday, taken-for-granted ways of working and to represent both context and politically constructed experiences.

3.2.3.2 The North American teacher research movement.

Distinct from the above type of AR, the North American research came late in the 1970s or early 1980s, at the time of the acceptance of qualitative and case study research. The original purpose of the movement was for teachers to improve their teaching of writing. It was through sharing together that the teachers realised themselves to be experts who gained knowledge by their classroom experiences of continually trying out new ideas to improve their practice. Some had workshop gatherings which set up an important ethos of presenting their work to others and critiquing it and the teachers had developed an empowering way of developing their practice. It took ten years before university researchers of teachers and the teacher
educators followed this original group’s lead. Researchers perceived how narrative practices were being used as forms of action inquiry and this “legitimated them as methods for further development of teachers own practice” (Feldman, et al., 2004, p. 947).

3.2.3.2.3 PAR and participatory research.

Both PAR and participatory research have emancipatory goals, as discussed above, but the emphasis was more on a humane and just society. In Australia the main pioneer of community Action Research at grassroots was Wadsworth whose book *Do It Yourself Social Research*, first published in 1984, has informed PAR in Australia for decades. She viewed participatory research as “a collective knowledge generation process in which oppressed groups articulate and act to implement social change agendas” (Wadsworth, 2011, p. 4). Although both PAR and participatory research are educational, they are less practised in formal education settings in most industrialised countries. For example, in the United States they are used mainly in rural and urban communities, labour unions and grassroots organisations.

The many early initiators in education have taken on different forms of AR. For example, Bawden (2005) used AR in a systems approach to agricultural education in the early 1980s; Grundy’s contribution to AR modes was mentioned earlier and for her later collaborative work in higher education (Grundy, Robison, and Tomazos, 2001); Zuber-Skerrit (1996) for her ongoing work in professional development in higher education; Carr and Kemmis (1986) and Kemmis and Smith (2008) for Kemmis’s extensive development of emancipatory AR in many educational contexts; Boud (1986) for his early work in work-based experiential learning and student self-assessment methods; Dick (2006, 2009) for his on-going work in reviewing the world-wide literature of AR and pioneering a world-wide web AR course; and Stringer (2007) particularly for his work in empowering Indigenous communities and students in tertiary education. All these researchers continue to contribute in various ways to AR in education in Australia. Another category, collaborative research, usually between university researchers and people outside the university, can be structurally similar to participatory research; however, it does not usually work with the democratic and emancipatory ideals of PAR (Department of Education, 2004).

3.2.4 Self-study Action Research (SSAR).

Following reflection and feedback from participants after the first AR1 cycle, I could not justify continuing my AR cycles using a PAR approach because of lack of participant involvement. At the same time I realised that using the word dyslexia may have accounted for
this outcome. Thus my first phase of PAR could be likened to practitioner research as a study of others (Feldman, et al., 2004, p. 950), as demonstrated graphically in Figure 3.5.

![Figure 3.5 Researcher looking at Others (Adapted from Feldman, 2004)](image)

I then had a transition phase (AR2), as I explored how I could improve my practice and began to consider the higher education environment. I began to change my perception, to being an outside practitioner from a different environment, to a researcher/practitioner in higher education. At this time I started working with critical friends who helped with the reflections on some of my own I-poems (Section 7.4.3.1.2). My change of intention affected my way of working with some of the co-researchers in AR3. I was less imposing of my ideas and flowed within their space, and endeavouring to engage meaningfully with their issues. I was flexible and engaged more in listening, with little structuring of the meetings. It became more a study of self (Feldman, et al., 2004, p. 950).
Explanations: The arrow left side of the woman (a) she is questioning her Self; the arrow (b) going from the left side woman to questioning her mirror reflection: Self in practice on the right view. The final arrow (c) Self in practice – shows the possibility of researching how we understand ourselves in practice.

*Figure 3.6 A dynamic interplay: a study of Self (Adapted from Feldman 2004).*

The figure above demonstrates that my transition to self-study involved the merging of personal stories from my role in private practice and how these stories merged with my role as practitioner researcher in the context of tertiary education. By AR3 cycle, as the lens turned to focus more on me, there was a growing sense of a new identity in the transition from practitioner to practitioner researcher and educator. This growing sense is depicted in Figure 3.6: the transition is from Self to Self as practitioner-researcher. How I thought about myself in my practice role deepened, as did the discussions with the co-researchers. For an example, read the identity discussion with co-researcher Ma (Section 6.3).

### 3.2.4.1 Other types of self-study in AR.

A fine example from Feldman (2004) showed the process of learning how self-study can be applied using different epistemologies. Feldman reviewed with colleagues their transition from being action researchers (AR) to perceiving themselves as self-study action researchers (SSAR). In order to have a common model to review their chosen paper, Feldman’s group used the methods of a well-known feminist, Harding (1989), who posited three distinguishing features of feminist research: “The ‘discovery’ of gender and its consequence … women’s
experience as a scientific resource … the reflexivity of feminist research” (Feldman, et al., 2004, p. 4).

By deeply examining these concepts the researchers came up with “paralleled’ distinctions of what they perceived as the common features of the self-study and named them:

“The importance of self … That teacher educators could be a source of research… The turning of the focus to self means employing a critical outlook on self and the role of researcher/educator” (Feldman, et al., 2004, p. 4). (my emphasis)

The experience of Feldman et, al (2004) as they moved towards a self-study approach, was helped when they aligned their work to existentialism because they realised: “teaching is a way of being and the self emerges from experience” (2004, p. x). Existentialism provided a theoretical basis for the methodological features of self-study. This work further validated the importance of critical self-reflection in educational research and reinforced my perceptions of the suitability of SSAR for my project. In particular their work deepened my understanding of self-reflexivity.

Further to this, their review proposed that there were three main models of SSAR. These are now discussed, towards suggesting a model for my research.

3.2.4.1.1 Researcher as teacher educator.

For the first model Feldman used the work of Henderson (2002), who critiqued her own practice as a teacher educator using a constructivist pedagogy assignment which she had used with students for nine years. Henderson (2002) chose three critical friends who were from a linguistically and culturally diverse student teacher group. They focused their attention on the difference between her practice and the students’ experience of her practice. While their results showed a gap between practice and experience, she planned to address the practice issues in which the contradictions were embedded. The researchers believed the actions signified a shift in her focus towards an emerging self (as cited in Feldman, et al., 2004, p. 151).

3.2.4.1.2 Practice in teacher education.

For this example Feldman, et al. (2004) cite a study by Kosnik (2001) the explored the overlap of roles between a teacher educator and the program director when redesigning a teacher education program. While both these studies were considered to be self-study, the Henderson study looked at the researcher as teacher educator; while the Kosnik study looked
at how practice and teacher education can collaborate. Both can be depicted in a researcher’s role in a collaborative group in the sketch below.

3.2.4.1.3 Collaborative self-study of a collaborative group.

The final model example was of five Chilean educators involved in a national agenda to introduce a constructivist approach to their teacher education programs. These researchers summarised each of their individual studies using a criteria-modified version of Harding’s methodological features of ‘discovery’ of self and its consequences of the expectations of teacher educators as a researcher resource.

The Kosnik (2001) study (3.2.4.1.2) above focused on critical incidents in order to interrogate the ‘living contradictions’, whereas the Chilean research set out to be self-study and emerged into a study of a collective self (Feldman, et al., 2004) and posed difficulties. For example, how could they write up the research? Should they do separate narratives or find common themes? They chose to find common themes, which meant they had to have a “further cycle of investigation and the creation of a group experience from the individual experiences” (2004, p. 970). Their study highlighted what Hamilton and Pinnegar (1998) considered to be an edict for self-study: “process, product, content and context” need to be included and worked with (cited in Feldman, et al., 2004, p. 970).

Figure 3.7 graphically demonstrates the move from individual self-study to collaborative group research.

Figure 3.7 A collaborative self-study of a collaborative group.

The Feldman et al. (2004) paper concluded from their own study that in their experience of the move towards a self-study approach, they needed to align their work with existentialism because for them “teaching is a way of being and the self emerges from experience” and provided a theoretical basis for the methodological features of self-study (2004, p. 973).
3.2.5 Elements of self-study action research (SSAR) that influenced my research journey.

The Whitehead and McNiff method (2006) of SSAR provided the opportunity to acknowledge the mess as authentic, and the reality of having times of confusion and being without direction in the research. I had read other writings on the issue, in particular Mellor (1998), which broadened my understanding of the meaning of transparency and authenticity in practice. I had found acceptance that it was possible to integrate writing from the Self, using a cognitive reflective narrative style. I also perceived the McNiff (2009b) writing process to be seamless in its acknowledgement of the practice and theory of SSAR. Her example of the pitfalls of her practice stories was particularly poignant: her times in South Africa as she became aware of her whiteness, her authority and being the one different. It added to the authenticity, transparency and validity of the methodological process she advocates (McNiff, 2009b).

The approach to SSAR developed in the 1980s when Whitehead began to challenge the epistemology of education research by moving from the emphasis on the social field of action inquiry to the living process when the practitioner asks: “What can I do to improve practice?” (Whitehead, 1988, p1). The processes of answering this question involved the practitioner in generating their own theories of action/knowledge. The process of focusing on theory generation from making sense of experience is a process very different to other educational research processes which use propositional knowledge. This is an iterative process, where the focus of inquiry shifts, from external processes of continuous cycles of action-thinking-planning and action, to internal theories of knowing. One researcher expressed it as discovering that:

many of the dominant traditional conceptualisations of knowledge are of a technical rational nature and these can frequently restrict creative and dynamic forms of learning… [and]… shifted my epistemology from locating knowledge solely in an externalist and objectivist perspective to an organic, dynamic, personal, dialogical yet inclusional perspective (Glenn, 2006, p. 15).

The living contradiction, focusing on the ‘I’, is a way of recognising points of conflict. This can occur in either the researcher or the co-researcher or both. Such conflicts can be either internally or externally stimulated and have the potential to transform into a point of personal theory making. A parallel concept, from Argyris and Schon (1974), was that in situations people act from their own mental maps. There can be a difference between what they think
we are doing (theory-in-action) and what we would like others to think they do, in practice. They called the latter the espoused theory or value. This concept gives an opportunity of seeing how transparent our values are in the reality of practice. For example, the value I hold from body therapy is to “make friends with the resistance” (Boyesen, 2001), I interpreted this as accepting the living contradiction the person was showing in the relationship. The intention then is finding a way of actioning this espoused value. The power of reaching out by deeply accepting the person in the intensity of the moment can move the person to a mental transformation. Such moments are commonly experienced in body therapy, signal an outward expansive movement (or action) in line with an inward mental/physical movement. For example, Roche (2007) demonstrated in her research process how her internal mental changes eventually became part of her action in the classroom and her influence increased in the school setting. That she found balance between the inner and outer movement of the dynamic of engagement in her classroom was evident when both the internal and external beliefs and values of both the researcher and the participants were balanced (Roche, 2007). She clearly demonstrated her process of transformation as she moved from little self-awareness of the processes involved in her teaching practice to having children speaking and thinking creatively. The writing of her PhD was her integration as she revealed the transparent nature of the process she had been through. This transformative process took place when she could cognitively understand her living contradictions by changing her practice focus to herself rather than to the children.

She had continually been “looking for ways of improving what the children might do better, rather than what I might do differently” (Roche, 2007, p. 16). This sounded like her contrapuntal point when she turned her search from the children to herself, as she realises she had done “virtually no problematising or critique, and little or no theorising” (Roche, 2007, p. 16) about what might be the issues in the way she was working: “my ‘I’ is distant and abstract” (Roche, 2007, p. 16) and she could not ask herself important critical questions. Other similar examples became her evidence as these contradictions became the “cornerstone position” of her theory building.

After some years of helping students reveal their living contradictions in their writing, keeping the focus on their own learning processes, a type of transformative work, McNiff and Whitehead wrote two books which show how the two strands of the social and the personal could be integrated into living theories of practice (2006; 2009). These books, which give practical guides for student researchers to work from this position of inner focus, have become a template for teacher practitioners and other diverse research projects for researchers.
For example, for Laidlaw (1996) an outstanding practitioner researcher using the living contradiction her PhD study was the result of her volunteer work in China, where she supported teachers and administrators in developing a theory of sustainable development.

My understanding that SSAR was a dynamic, inclusive, individualised process meant I could relate it to my life work, which gave me confidence that it would be a useful methodology in any discipline. Transparency, honesty and including the mess are the features which stood out initially for me. I found by engaging with texts, for example “I know how to set the caged bird free” (McNiff, 2008) and “How do I contribute to transformation of…” McNiff 2009a), I began to learn the structure of SSAR: that the philosophical stance and the action principles were embodied in the story was particularly helpful yet challenging. I thought of possible ways to structure my work by weaving story with action learning processes and which I could both be involved and achieve distance from my own processes.

Until I had become more self-reflexive and critical I was not fully committed to the research process. This was the time following the low involvement of participants in the first two cycles AR1 and AR2, which became a turning point as I had to re-think, read and work out a new strategy. I was in the “mess” (Cook, 2009) when I revisited my roots in Social Ecology through the writings of Wright, Camden-Pratt, & Hill (2011) and recognised how on another level that work supported critical theory, notions of habitus and the emancipatory school of AR.

Initially this approach seemed ideal for my situation because of the intensity of the marginalisation of people with dyslexia in universities. I believed what was needed was for the stories to be told and then for me to help individuals understand the issues. A first person narrative voice, a self-reflective process, and an emphasis on a relational epistemology, used together, give an opportunity to make the whole process of validation interactive for the reader. It confirmed at this stage my understanding that theory is generated reflexively, and self-reflection was the process by which this was achieved.

3.2.6 My perception of the difference between McNiff and Whitehead SSAR and others.

At the heart of action research is, I believe, how practitioners investigate and offer explanations for their practice, and hold themselves accountable for their practice. Commonly a variety of reflective practices are used, networking with others to act as a ‘sounding board’ for ideas and critiquing either or both the spoken and written word. Such reflections benefit
all by building relationships, personal and professional learning and other development opportunities.

The McNiff Whitehead (2006) approach is different in its consistent focus on inclusional logics which is a holistic systems approach centrally focused on the ‘I’ and on the dynamics of the relationships. This was very much in accord with my previous study of social ecology, a study of the relationship between people, communities and their environment which stresses the interdependence and diversity of human and non-human life (Wright, et al., 2011). As I am particularly interested in the ‘invisible’ healing aspects of the non-verbal interactions in communication and the transformational qualities of listening and sound, this type of SSAR methodology would accommodate such an exploration and interpretation. My interest focused on the listening/learning dynamics of the relationship between myself and co-researchers and on the potential for improvement through empowerment and self-regulation.

McDonagh (2004) also gave me a clearer understanding of how an AR process can influence different levels within a given AR context. For example, McDonagh asked her group of special needs students a pivotal question: “How did you learn to spell?” She reasoned this could be a common theme for her group of dyslexic students. That question was answered the same way by all the students: “I don’t know”. Within a short time, using an empowering facilitation, the students were confidently addressing their peers in other classes on what it was like to be dyslexic and how they learnt spelling techniques from each other. In turn this process influenced the teachers present, the whole school and the district, as a change in attitude took place on all those levels of understanding of dyslexia. McDonagh followed this line of inquiry and widened the circle of influence to national educational policy and curriculum development in later research work. This example showed how her students made a major shift in learning from each other, a turning point in their emotional self-understanding of how they learn by developing listening and reflective practices.

3.2.6.1 Critical friends.

Critical friends (CF) offer support, provide challenge, provide consultancy either by bringing ideas from within the organisation, or leading an enquiry and knowledge, preferably from outside the organisation (National College for School Leadership, 2005). I believe a critical friend needs to be skilled in reflective practices and be an exemplary listener, and it was on this basis that I incorporated critical friends into my research.

Offering support and providing challenge are fundamental to the CF relationship. For example the CF can initially take on the role of a listener, challenging the researcher’s ideas
by asking reflective questions to challenge their thinking. Ideally the CF choose each other to
develop into a mutually driven relationship. As such, ground rules are carefully negotiated;
trust and respect ensure that the CF has a reciprocal relationship, being available at unsociable
hours. They can become your greatest ally, able to critique and always aiming to praise and
support (McNiff, Lomax, & Whitehead, 1996). The consultancy role can be most helpful
when the critical friends are able to bring ideas from another context. For example, if the
researcher is on the level of outside practitioner discussing some practice aspect, the challenge
would be to place a reflective question back which focuses on the researcher role in the study
context. Using reflective questioning ensures that reflective dialogue develops rather than
defensiveness and new ideas. Such critiquing enables the exploration of values, beliefs,
assumptions and knowledge and a new perspective can be established.

Another aspect is providing consultancy. I had individual critical friends who specifically
fulfilled a consultancy role on an ad hoc basis some a number of times and others only once. I
called these CF individually to consult when I was finding I was not getting the point of
something. As well, consultancy can be taking a role in a group context. An example is a
supervisor within higher education leading an inquiry involving a group of her Masters and
PhD students. The facilitation of such a meeting would help offer opportunities for the group
to deeply learn from each other and to develop into a functional validation group. The group
of Irish researchers supervised by McNiff developed their skills as critical friends, which
benefited the consistency and validity of the research and led to quality PhDs. The influence
of these practitioner researchers has spread as in their post-doctoral researcher years they have
produced their first book, which details ways of using a SSAR process to enhance practice in
the classroom. The writing of the book clearly reflects the collaborative nature of their
relationships (McDonagh, Roche, Sullivan, & Glenn, 2011).

Critical friends can act to lead enquiries. If the critical friends work in higher education, have
research backgrounds and collaborate across a network of, for example, primary schools, and
they are in a good position to take on being ‘brokers’ of their expertise across the network.
They can open up opportunities for changing practice in the light of other practices.

I incorporated critical friends in order to allow feedback on some of the methodology I was
using, for example, when I developed the I-poems and included prose from the co-
researchers. To reflect on the content of a co-researcher’s prose, for example, the prose “I was
angry” (Section 5.2.1.1), I sought understanding using analysis of opinion from four
experienced practitioners. I was having difficulties with the work and needed a way to shift
from my assumptions and beliefs, which I had been unknowingly been projecting into my
interpretations. Another example, by Foulger (2010) reflects the flexibility of the inclusion of critical friends when a researcher was having what she called her “data disarray” (p.144). A colleague helped her make sense and get distance from the dilemmas and pitfalls of the self-as-practitioner researcher role, so that she could get beyond the practitioner values, beliefs and assumptions which potentially could have lessened her perspective. In hindsight, this type of input would have been a great help to me in the earlier part of the research. In particular when I was at my first mess point in my research to have the knowledge of the questions I could have been asking.

3.2.6.1.1 A meta-cognitive reflection: The value of critical friends.

Early in my research, when following comments and feedback from a critical friend I noticed my pattern of agreeing with her first comment, then setting about reordering the structure, taking out parts and categorising them. I was tacitly agreeing with her without further reflection on her comments. Later when I had another example of reflection from a critical friend, I jumped all the previous steps and immediately spiralled into self-doubt. In the beginning my reflective processes were simply to clarify my thoughts on my actions. As the process deepened I had to take responsibility to weigh up carefully the other’s discourse in relation to my own. In reading and in dialogue with people, I have both an obligation and challenge to take my context and take the person step-by-step through what I consider a new discourse. This writing reflection is a dialoguing with me and I began to generate a new knowledge-thinking and process within myself.

3.2.6.1.2 Details of my inclusion of critical friends.

My aim was to have people who would be willing to reflect on my written work and challenge my beliefs. I wanted people who had been involved in teaching or who may have worked in higher education, or had knowledge of Action Research. I attended and presented at Action Learning and Action Research conferences (ALARA) at the local, state and international meetings during the research period, as well as at conferences concerned with equity and diversity, disability and first year in higher education (FYHE). My main reason was to gather with participants/others/colleagues to discuss and work up a network of critical friends in order to deepen my understanding of higher education particularly those practices that could help diverse learners.

Four people from higher education environments or recently retired, had significant impact as critical friends. The first one helped me out early on the style of writing. She was a post-doctoral lecturer who took the time during her holidays to arrange a phone call with me.
following some email contact. Following that first phone call, I reflected back to her and she answered my initial reflective ramblings by email. This email was in the form of a number of critical questions which I was at first daunted by until I realised I did not have to answer them all!

I had been reminded of the power of reflective questioning and strategic questioning as demonstrated by Peavey (2000), whose work I had directly encountered earlier during my Masters. She describes communication as “having an assumption of inertia in first order communication an attitude of ‘Things will stay the same’” (Peavey, 2000, p. 3). When the speaker becomes more strategic in the use of questions and more focused to the sense of the reality of the situation, new information is created rather than known information.

Knowing strategic questioning equipped me for later, when I found a fellow PhD student willing to share papers and critique each other’s work. We exchanged chapters and made comments on the paper, and had fortnightly phone meetings. This continued for twelve months until this critical friend was at the end of her thesis time and had to focus on her writing. I was disappointed as it had been a great help to me and it helped having regular session to bring up my skills in writing and critiquing. I further developed reflective skills in the research and with my co-researchers, particularly when I helped Supa, a co-researcher, critique her video (Section 6.3.7.1). I had one other who acted as an early sounding-board, and then later I developed a relationship with two ex-clients who have both acted as trouble-shooters: one more on an emotional level when I had met some impasse in the study, the other who has been good at critiquing writing and computer skills development. All were of value, helpful contributing in essentially different ways that kept me motivated over the years of the research.

3.2.7 Notions of critical theory.

This section explores elements of critical theory-in-practice and research and draws together notions of praxis, critical reflection and reflexivity. The origins of the notion of praxis are found in the Marxist notion of putting theory into practice (Lather, 1991). Reflexivity is generally understood as the idea of something bending back on itself and is considered from two perspectives, self-reflexivity and research reflexivity (Steier, 1991). Critical reflection is the cognitive activity that links these three concepts together. From a critical theory perspective, putting theory into practice requires the exploration of the notions of empowerment (Lord & Hutchison, 1993).
3.2.7.1 What is practice?

Practice can be interpreted as “[t]he enactment of a role of a profession or occupational group in service or contributing to society”, and can be characterised as “doing, knowing, being and becoming” (Higgs, Horsfall, & Grace, 2009, p. 3). I understood that ‘doing and knowing’, as practice knowledge in action, could be influenced by culture and by my personal frame of reference, which includes previous learning, life history and all my practitioner intentions and interests. By the addition of the element of practitioner intentions and interests to the practice definition, it becomes one of praxis which is “a form of practice that is ethically informed, committed and guided by critical reflection of practice traditions and one’s own practice” (Higgs, et al., 2009, p. 4).

The distinction between these two definitions rests with my conscious choice about what shapes my practice. For example, it may be desirable to challenge traditional practice traditions (my “tacit or ingrained behaviours”) and my ethical conduct (p. 4). An example from my practice is when my clients often have other practitioners involved with their children who have a disability label. The parents have often experienced structures imposed on them as a way of caring for their child. I needed to learn whether the behaviour I saw was learned from a previous practitioner, the parent or was a reaction from the client. In this situation, how do I challenge my own practice traditions? Simply using an innovative method is often a challenge to the practice traditions of any of the professional practitioners involved with the children I am working with.

3.2.7.2 A Pedagogy of empowerment.

The Freirian view of education (Shor, 1992) was that it is about learning to take control. However, Heaney (1995) stated that this “is not an individual objective but rather as a ‘boot strap’ theory of empowerment” (p.1). By this he meant that power was not a given; rather, it was created by the emerging praxis of the group. Using a PAR with illiterate peasants who were in a state of passivity, Freire (1970) aimed to achieve a “critical consciousness”; that is, the participants could begin to perceive social, political and economic contradictions, and then “take action against the oppressive elements of reality” (p.35). So by rejecting passivity and practicing dialogue and strategic questioning, participants could develop a voice in their community.

I was drawn to revisit a critical empowerment model from my practice: learned helplessness and disempowerment experienced by those who learnt differently have led to ‘hidden’ educational marginalised groups. Involvement in a community brings the possibility to
develop new experiences through the use of individual voice, and then follow how these voices can influence decisions in their immediate environment and beyond into the social spheres of all those involved. An example from Wallenstein and Bernstein (1988) of the application of an empowering effect in health education involved seeing the interdependent nature of change, not just as individual health improvement but as inclusive of community and environmental change. The need is to target all levels beyond the individual, to the group and overall habitus. Their example demonstrated to me that empowerment can be seen as a broad process involving prevention, as well as other goals of community connectedness, self-development, improved quality of life and natural justice.

This preventative nature of empowerment informs my practice, thus ensuring knowledge is shared with co-researchers. The following example demonstrates how empowerment can be established, within a primary school setting with children with dyslexia.

3.2.7.3 A literature example of practice producing praxis.

Praxis can be described as multi-faceted, like a picture on many levels. From a feminist perspective praxis is a belief system grounded in reciprocal relationships and personal development which is characterised by mutual caring, a focus on emotions and small community groups working for change (O'Toole, 2003).

The practice highlighted below of a dialogue cited by McDonagh (2006) shows these values. It is a scenario where three eight year old children are discussing a picture; one child (T) had drawn from his embodied sensory experience of being dyslexic. First J and then B interpreted the drawing as follows:

```
J: I think it’s like a monster; with the eyes and the big nose. It has one massive eye and one little eye. And it has a kind of key rings. It has something beside the eyes…

B: I think it’s like all the teachers, looking and saying and talking to you like and saying you’re not good and all that.

T says how it is:
I’ll tell you what I drew, ’cause, yeah I tried to draw. Eyes, mouth. I tried to draw ears. Nobody recognised my ears.
J: I thought they were key rings…
```
Then T interprets his own drawing:

T: What I see is dyslexia affects eyes, ears and talking. That’s why I drew three things. And it jumbles them all up all over the place, looking like a monster— J was right. So, sometimes eyes are getting messages; sometimes ears are getting messages; sometimes your eyes are seeing things that you hear differently. That’s my bad drawing of an ear. That’s an ear in there. I wasn’t very good at ears. And anybody who has all this jumble of all this—like with dyslexia—eyes and ears and lips can still know things crystal clear.
(McDonagh, 2006, p. 288)

McDonagh takes the child’s reflection and moves towards an educational praxis perspective, and describing T’s dyslexia as “processing difficulties and simultaneously how these distortions can give him clarity of thought and communication” (2006, p. 288). This information could be important in adding value to research about dyslexia from multiple perspectives by using such creative processes as art works as a code for discussion.

I resonated with both the process and the content. What T described neatly fits my experience and theories of the perceptual issues of students with dyslexia and others with learning difficulties also describe. The process of coming out of a perceptual confusion to a point of focused clarity, I interpret as going from disorientation to a point of orientation. The students were instructed to draw what dyslexia meant to them, were given the opportunity to communicate with peers—in their proximal zone— at another level of learning. Such enhancement of all their learning situations effectively reduced their stress. Such an opportunity to speak of these issues is rare in a classroom but rarer is the quality of the embodiment of T’s intangible perceptions.

With my co-researchers I created ways to diffuse their perceptual confusion – an indicator of stress – which was often a common factor within the work of the AR cycles. To manage this associated stress, two attributes necessary to develop are awareness (consciousness) and a relationship to the social environment. The development and valuing of trust and safety can
bring the educational environment to a communication that is open and honest, allowing such transformative processes to happen as happened with T.

A view of dyslexia from a balance perspective is that the learning process is experienced as a spectrum from loving-to-learn to learning nothing, or from being focused on the task to being completely overwhelmed by it. When there is a lack of integration of the visual auditory kinaesthetic senses it creates difficulty in getting to a point of dynamic balance. When the sensory modes come under pressure in the learning environment, as happens continually with children with learning difficulties, the least that happens is scrambled perceptions. For example, think of a time when someone put you on the spot and remember the uncomfortable feeling as your mind goes blank. Usually what we do is take a moment and have a way to recover. For some people that may be employing their thinking, getting back their focus, and restoring their equilibrium. The difference for those with dyslexia and other more serious learning disabilities, for example autism and Aspergers, is that often they do not have sufficient strategies to control their distorted perception and therefore the stress and confusion build up (Williams, 1996).

The concept of “internal locus of control” is used to describe the process of the boundaries between what a person learns internally and what can be learned with other people. The background to this educational concept is the zone of proximal development (ZPD) previously explained (Section 3.2.1) and represented in the diagram Figure 3.8. as three circles.
A more individual process is the notion to disorientation according to Davis (2003):

the loss of one’s position, direction in relation to other things; a state of mind
in which mental perceptions do not agree with the true facts and conditions in
the environment; in some people, this is an automatic response to confusion
(Davis, p. 346).

When the attention is on focusing systematically, it invites the student to find their internal
locus of control or orientation in order to learn how to correct any sensory distortions as they
occur in their learning. Once the person masters this internal correction, they have a method
of addressing their inconsistent functioning of the senses. The technique relies on the person
having a “felt-sense” (Gendlin, 1981), an awareness of their internal perceptions. For some
this may not be possible long term unless the social environment has developed into an open
trusting space. In T’s case, he describes his perceptions as “crystal clear”, the senses in
harmony, which would become a platform for T to build on in other situations. The control
became internal by using an internal point of perception.

Tomatis (1978) alluded to a similar idea; however, his concern was to identify the auditory
perceptual point, where one is focused on listening to themselves as they speak and
establishing a focus and connection of the voice/ear/brain. Reading and focusing on listening
to your own voice can start an internal process of shifting the auditory perception point to a more ‘balanced’, point considered to be the central position above the top of the head. Practice using these ideas, suggests that the visual and auditory perception points are the integrating factor.

The main issues with sensory perception in learning disabilities generally are that the senses are often in a state of constant overwhelm, as if there are no filters. This phenomenon, known as gestalt perception is discussed by Bogdashina (2003, 2010) who perceived the cause of sensory confusion as a “sensory gating deficit [of] being too open” (2010) and has supporting scientific evidence Light & Braff (1999, p. 31). The gating deficit concurs in conjunction with the notion of brain lateralisation. A recent research project showed the efficiency of chickens doing simultaneous tasks of foraging for food and vigilance to predators, suggesting “that cerebral lateralisation enhances brain efficiency in cognitive tasks that demand the simultaneous but different use of both hemispheres” (Rogers, Zucca, & Vallortigara, 2004, p. 420). Laterality and the practice technology I use ‘dynamically gates’ the sound from one side of the hemisphere to the other (Tomatis, 1992). Once through to the auditory cortex an internalised and self-managed ability becomes possible with a focused perception point. The change can be experienced as clarity of thought, learning and self-empowerment. Once this grounding is established, further correction of perceptions which may remain internally distorted can be worked through with ease. For example, letters of the alphabet become stable and clear thus improving reading. This explains the principle behind why people with dyslexia can have inconsistent perceptual confusion, or what Davis (1994) referred to as the process of disorientation, when reading and spelling.

I was impressed that student T could recognise his inner dynamic, both the scrambling of his voice ear brain and when his senses came in sync in a gestalt. This was a teachable moment which signals he had moved to strengthen his internal locus of control (Vygotsky, 1978). What he was doing was a reflexive act which was a start towards inner development of knowing. I will now discuss in detail its application.

### 3.2.7.4 What is reflexivity?

Reflexive practice as a means of getting feedback on what we have heard is understood at its basic level as a two-way practice to improve communication. Reflexivity is when you take that reflection and reflect again, and is like a meta-reflection of the subject. The main point is that it can be either tangible, which is perceived through language, or intangible, which is anything which is not language, such as, personally having a hunch, or seeing an image or a
sound. When individuals engage in purposeful and intentional discussion, and actively listen in order to potentially add to each other’s understanding and development – this is a discourse. On a wider level of participation in higher education, these discourses can be seen as each subject area having a particular set of values which are shared by those involved in that subject area.

3.2.7.4.1 Developing self-reflexive understanding.

I first had to find my own understanding of self-reflective processes. I needed to act. My process was to use the texts of two of the PhD writings of McNiff’s Irish students (McDonagh, et al., 2011; Roche, 2007) to dialogue with myself by asking questions about concepts I wanted to understand more deeply. I would apply my answers in my context, which led to more self-questions and engagement with my research inquiries. It was only then that I could acknowledge that I had felt silenced inside myself by a fear of failure, as I believed at that time that I had failed the first round of AR because of the lack of continuity of co-researchers.

By shifting my thinking to perceive my work as “being in the world”, it became a “critical ontological vision” (Kincheloe, 2003, p. 47) which helped move me beyond my present state of being, my ontological self, as I discerned the forces that have shaped me through personal understanding of my life experiences. This implied that my epistemological and ontological stance had converged around questions of identity and could not easily be separated, yet were reflectively shaped though a process of self-reflection. By ontological vision, Kincheloe (2003) meant to:

ask questions about ethics, morality, politics, emotion, and gut feelings, seeking not precise steps to reshape our subjectivity but a framework of principles with which we can negotiate. Thus, we join the quest for new, expanded, more just and interconnected ways of being human (p. 47).

This explanation of ontological vision gave me a sense of having a place, space and belief in my research work as grounded in health and well-being. Now I was clear with my rationale for researching both literacy and learning theories in educational practice: such practice had deeply influenced my participant group.

3.2.7.4.2 Developing reflexivity using narrative.

The work of Pearce (2005) was a major turning point in my development of this research. I
felt a connection and a recognition of how I could use narrative to start the process of a deeper reflection of an emerging professional self. I had already taken my first step, which was to understand the professional self through questioning and naming my values, and had established an interpretive framework, in order to bring a deeper understanding of the professional context. Earlier, I had felt like a deskilled outsider as I moved from my private professional context to practise/researching at an unfamiliar educational context. Pearce (2005) demonstrated, by using a simple personal story from her childhood school situation, how an interpretive framework could be established and acted on. Her story described how, as one of the top students in her class, she was afforded a special place – to sit towards the back of the room. Her story captured the sensory and physical nature of the experience vividly and she described how this privilege was disrupted by a change of classroom teacher. “Miss Lancaster started to move us around. First she broke up the rows of desks and sat us in big groups. We sat next to all sorts of different people, so no one could be [at the] ‘top’ or ‘bottom’ ” (Pearce, 2008, p. 48). The seat change and teaching style placed her in a new position seeing everyone. Yet she only remembers herself and friend as the top of the class and the two bottom children as the marginalised children.

It showed how the values and learning from that story are still present in the adult, albeit now conscious. I have used some of my client stories to illustrate points for the interpretation of my professional background. This use of the small stories, prose, poems, and drawings was a natural progression for me to develop a conceptual understanding before I started to write up the data. I tell the stories from clinical practice, meetings with stakeholders and interpret them from these four multiple perspectives: clinical (health), educative, social and psychological. The notion of ‘habitus’ is central to the interpretive framework of Pearce et al. (2008). They cited Bourdieu:

> the interaction between objective structures (such as schools) and the personal experiences or histories(e.g. students in schools) and culminates in a person’s ‘acquired habitus’ …the continuing interactions between objective structures and personal experiences continually shape and modify our habitus and continue to shape further experiences (cited in Pearce, Down, & Moore, 2008, p. 4).

From my research perspective, this notion means the importance of the historical context of dyslexia in Australia for example; the effects on students and the teaching of teachers historically meant a lack of recognition and therefore no policies. Habitus on the individual
level can be viewed as the dynamic process of the inner and outer boundaries of self, a form of embodiment. In keeping with AR cycles, a multi-level perspective of the term ‘institutional habitus’ is used to describe the impact of culture or class of an individual’s behaviour mediated through the organisation they belong to. For example, the perceptions of dyslexia from a school teacher will depend on the way her particular organisation works with a hidden disability.

I used the idea of habitus in the analysis of my stories and I planned to story and writing-as-inquiry methods as one of my methods. This had been used successfully to focus inner reflections on the trauma confronting Gm, for example (Section 4.4.1.1). Coming from a base of learning experiences in bodymind methods, I sought ways to improve my communication on this different way of being and knowing, such as the process of development as a professional facilitator for diverse learners, as those who learn differently are grounded in the social habitus I came from. I realised that telling some of my early family experience, my roots, my acquired habitus, had implications for what I brought to my relationships with my co-researchers. This engagement with the professional self performed an important role in helping me understand both the acceptance and rejecting attitudes I bring to the relationship with the co-researchers, and acted as a basis for my own model of interpretation of their stories.

3.3 A Description of the Action Research Processes

The number of steps I undertook and the activities in the research process are outlined below:

i. Ethics approval

ii. Recruitment strategies included meeting with and talking to:

iii. Staff of Learning Assistance at the university

iv. Community meetings

v. Other students in Indigenous studies course I was undertaking

vi. Participants in several postgraduate conferences

vii. People who responded to a university wide email inviting students and staff to participate in the research.

viii. Package to potential participants who responded to information about the research: letter of invitation to participate, informed consent form, plain language
statement, dates for meetings., and the two checklists, *Auditory processing: how can listening be identified? Dyslexia characteristics*

ix. Action Research cycle 1

x. Handouts in AR1: meeting structure, tasks and trust roles that support group functioning.

xi. Action Research cycle 2

xii. Package to potential participants who responded to information about the research: letter of invitation to participate, Informed consent, plain language statement, dates for meetings, the auditory processing checklist: *How can listening be identified?* and the Language of Dyslexia research project update.

xiii. Action Research cycle 3

xiv. Package to potential participants who responded to information about the research: letter of invitation to participate, Informed consent, plain language statement, dates for meetings, the checklist Auditory processing checklist: *How can listening be identified?* and the Language of Dyslexia research project update.

xv. Handouts in AR3: An action learning model, discussion on phases of action cycles, expectations for participating and your action, dates for meetings, Listening Guide, a reflection page, *The attitudes stereotype* handout to be completed at home.

xvi. Meetings with individual co-researchers between 2008 and 2010.

### 3.3.1 Action Research cycles.

Three AR cycles were conducted between 2006 and 2010 with groups of co-researchers. The number of co-researchers in each cycle varied between two and four and the number of meetings in each cycle also varied. AR2 in 2007 was abandoned after three meetings because of poor attendance and lack of movement and interest of the two co-researchers. Face-to-face meetings together with email and phone conversations occurred with four individuals in AR3. The number of meetings varied with each individual depending on need.

The graphic representations that follow illustrate aspects of the action research cycles. Table 3.2 outlines the cycles, co-researcher type and number, the number of meetings and the co-researchers’ learning stories, while Figure 3.9 provides a summary of the evolution from PAR to SSAR. Figure 3.10 shows the sequence of co-researcher participation in groups and in
individual meetings, indicating those co-researchers who participated both as group members and as individuals, and those who participated only as group members.

Table 3.2 A summary of action research cycles.

<table>
<thead>
<tr>
<th>AR Cycle</th>
<th>Year</th>
<th>Type</th>
<th>Meetings</th>
<th>Number of Co-researchers</th>
<th>Co-researcher</th>
<th>Stories</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2006</td>
<td>Group</td>
<td>10</td>
<td>4</td>
<td>Jas, Gst, Jos, Am</td>
<td>Jas, Gst</td>
</tr>
<tr>
<td>1</td>
<td>2006</td>
<td>Individual</td>
<td>1</td>
<td>1</td>
<td>AD</td>
<td>AD</td>
</tr>
<tr>
<td>1</td>
<td>2006</td>
<td>Face-to-face</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>2007</td>
<td>Group</td>
<td>3</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>2008</td>
<td>Community: Teachers</td>
<td>4</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>2008</td>
<td>Higher education</td>
<td>4</td>
<td>4</td>
<td>Gst, La, Ma, Mt</td>
<td>Gst, Ma</td>
</tr>
<tr>
<td>3</td>
<td>2008</td>
<td>Health Group</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>2008 to 2010</td>
<td>Individual</td>
<td>6 (Gm) 16 (Ma) 22(Supa)</td>
<td>4</td>
<td>Ph Supa (Gst, Ma)</td>
<td>Gm, Ph Supa</td>
</tr>
</tbody>
</table>
Figure 3.9 A summary of the evolution from PAR to SSAR, the research groups and types of meetings.

AR 1 (2006)
- Group of 4 higher education students & staff — 10 meetings
- One higher education student — 1 meeting

AR 2 (2007)
- Group of 2 higher education students — 3 meetings

AR 3 (2008-2010)
- Group of 4 community teachers — 4 meetings
- Group of 4 higher education students — 4 meetings
- 4 individual higher education students — from 6-22 face-to-face meetings, plus email and phone

Figure 3.10 Co-researcher participation in groups and as individuals.
3.3.2 Documentation of conversations and activities in each cycle and individual meeting.

The group meeting conversations and individual phone conversations were audio taped. I kept meeting and email conversations were filed in the computer. The audio tapes and written notes were transcribed by a private overseas company. I conducted two readings of the transcripts. Firstly, I identified the salient quotations in regard to the aims and questions I was interested to answer. In the second reading I looked for techniques; the quality of the relationship; listening, and learning issues. I generated a large amount of text which seemed at first to be an insurmountable amount to analyse.

3.3.3 Methods, learning strategies and analytic framework.

The methods used in research are generally understood to be those techniques that are implemented in order to collect evidence or data. The range of techniques used is identified in Figure 3.11 (see page 104). These techniques served a dual role, as strategies to assist the learning of co-researchers and as an analytic strategy for understanding the co-researchers, experience and understanding of dyslexia and diverse learning in higher education. In particular, the Listening Guide was used during AR cycles to develop codes that identified the co-researchers learning issues.

3.3.3.1 Interviews.

My initial strategy with potential co-researchers was to email or talk on the phone to judge their interest and intentions. An exceptional face-to-face interview with a potential co-researcher for the first AR cycle was conducted but she could not attend the cycle because of the night meeting scheduling, poor health and lack of transport. This interview was two hours in length, was audio taped and transcribed and revealed a rich insider perspective of her dyslexia. The questions I asked her were based on the characteristics of dyslexia checklist, her experience of dyslexia diagnosis and her learning struggles in higher education.

3.3.3.2 Other learning techniques utilised in AR3.

Further learning techniques in AR3 centred on either listening or elements of the action learning cycle and both which became the main focus of all meetings. Co-researchers had all been given the two checklists on listening and dyslexia characteristics as part of their starting
package (Appendix 4), and elements of either of these were used in response to what the co-
researchers needed or requested.

3.3.3.2.1 Reading aloud (Gm, Ph) and the Health Group.

Gm read aloud her prose written by her about the process she had been through when the
lecturers were helping her to complete her essays and were in conflict about how to help her.
Ph read aloud on two occasions; the first when he read aloud his son’s story and the second
time he read aloud a paragraph from a text book he was studying – a demonstration of his
listening ability. The Health Group read aloud their writing about their learning and health
issues. While examples had different aims each time, they all became turning points in
developing our communications.

3.4.3.2.2 Hand microphone reading aloud.

This reading aloud technique is to enhance the focus to the right ear, making a clearer sound
pathway to the left hemisphere and the cognitive language centre. Madaule (1993) has also
conducted similar exercises using the hand as a microphone to focus the listening while
reading aloud (Section 6.3.4.2).

3.3.3.2.3 The skills of reflection and critical reflection.

All participants had practice in reflection as it was part of the way I ended each session,
whether as group or individuals: a reflection process to find out the learning for the meeting
and to set goals for work between sessions. Supa, for example, had an assignment about her
reflective observations following a short videoed counselling session as her agenda for our
meeting. I listened to the video and posed questions on what I had seen in the ten minute clip
(Section 6.3.7.1). The question posing meant she was able to come to a deeper understanding
of what and how to go about reflectively writing up the criteria she had to address. She
quickly learnt the elements to focus on and to critique it. In the work, she mirrored some of
the reflections and gained internal understanding of what was required. This was in keeping
with my aim of having co-researchers understand and use the Kolb learning cycle (1984b) to
develop their learning and analyse their learning style, if appropriate in a balanced way.

3.3.3.2.4 Writing exercises.

I used three different writing exercises in each of the data chapters. For example Gm wrote
her story about the process of her academic writing and the stress of ‘waiting, waiting,
waiting’ for the lecturers to respond and mark her work. The writing helped her work through
the bottled-up anger she was carrying as a result (Section 4.4.2.2). Another co-researcher had consistently not done any written reflections following our meetings. Then after a conversation about his lack of attendance, he fulfilled his reflection obligations by dialoguing in the form of an email (Section 5.3.10.2). I responded and his second response took him to a deeper level of understanding of the power of reflections and led to proactive work in the form of contacting his lecturers with his thoughts following our meeting. The Health Group were given a concept sheet stimulator which asked them write about their childhood health and learning issues (Appendix 7) prior to coming to the first meeting of the series of four meetings. The details of the Health Group’s writing and analysis are found in Chapter 6 (Section 1).

3.3.3.2.5 Technological programs.

The use of technology can be an important aid in helping students with dyslexia or other learning issues who may need extra time to get their work completed. I used two computer programs and a piece of technology to demonstrate and improve the sensory integration issue of auditory and visual functioning. All three technologies gave co-researchers a practical experience and demonstration of the main features of auditory processing issues. I used them with care in order to enhance awareness and dialogue about these issues.

3.3.3.2.6 Brain fitness: Gm.

This brain fitness program and the underlying improvement in auditory processing, has a growing presence in the research field (Merzinech, 2004), some universities are testing the memory exercises including Australia (LK, personal communication, 2007). Mahncke et al., (2006) undertook the first controlled research which had a research direction which broadened into a fuller understanding of brain plasticity and the role of auditory processing (Doidge, 2007). From this line of research, a paradigm shift cannot be overlooked which potentially will improve rehabilitation processes, therapeutic protocols, learning methods, remedial programs and age-related preventative health. A recent book interviewed the leading scientists behind a raft of computer lead brain programs (Fernandez & Goldberg, 2009).

The Posit Science programs (Merzinech, 2004) is the leading brain fitness application, has six exercises to enhance natural brain plasticity, and works on receptive listening to improve functioning by regularly using these computer exercises in a graduated practice: if too many errors are made, and the person has reached their threshold of confusion, an easier pattern played earlier is re-introduced. I discuss only the first two exercises in the program in the dialogue with Gm (Section 4.5.2.2); following her experiencing a half hour on the first two
exercises as they directly related to receptive listening (or sound discrimination). The other four exercises not discussed are designed to help working memory.

The first exercise utilises an auditory sweep of sound with two possibilities: the sound either goes upwards or goes downwards. In a series of experiences, the task is to decide which way the sound goes. When using this program on a regular daily practice, over days the time lag is shortened and the sound is subtly changed to be closer and closer together. This exercise stimulates the auditory cortex. The second exercise, ‘Tell Us Apart’, uses pairs of syllables (for example ‘doe’ and ‘boe’) and is designed to make sense of speech and to improve clarity and the ability to quickly interpret speech.

3.3.3.2.7 Voice recognition programs.

I did not work directly with any of my co-researchers on the voice recognition program, a speech to text program, but discussed with some co-researchers how it could be used. The technology is moving fast in this area with more programs available freely on the Internet.

3.3.3.2.8 Brain boy programs:-sound/visual discrimination.

I used one of the six exercises with Ph (Section 5.3.7) to demonstrate sound/visual discrimination in order to develop awareness of his auditory processing and to understand how he dealt with confusion. A headset is used to listen through both ears to pairs of sounds and at the same time lights flash in sync with the sound. The person has to choose which sound/light comes first in the pair and press that a button on that side, left or right. At the end of each game is scored. The idea is to improve your score over a number of trials. In my practice I usually do three trials using the light and sound combination and then a three further trials with just the sound, that is, no visual stimulation. The second trial is usually harder for most people and can be impossibly hard for those with poor auditory processing. It can give an understanding of how well auditory and visual perception are integrating, the dependence of visual perception, and may suggest a sound discrimination issue. On the psychological level the reaction to getting some answers wrong can be observed; whether the person after three trials of repetition has found a strategy to get around any confusion caused by the reliance on the visual perception. When there is no improvement, it may demonstrate the person has a short threshold of confusion, and/or has little Right Ear Advantage (REA), and I may find there as some aspects of learning and health being compromised.
3.3.4 The theories that underpin the learning strategies used in the AR cycles.

The following diagram, Figure 3.11 summarises the learning strategies utilised in the three AR cycles.

Figure 3.11 A summary of learning techniques across the three cycles.

3.3.4.1 The Listening Guide.

I initially used the Listening Guide to establish the difference and value of both tangible and intangible reflexivity processes. I wanted to establish and understand the co-researchers’ diverse learning needs and to provide a level of analysis to take place during the AR cycles. Qualitative data is generally visually represented; the guide was a change in direction in data collection methods bringing voice and listening into the analysis and becoming a form of empowering process.

The Listening Guide suggested four stages of listening: two to focus on tangible aspects: the beginning ‘Listening for the Plot’ and the final pulling it all together stage, which are standard discursive and standard qualitative methods. It is the two middle listening stages: the I-poem and the contrapuntal point (Gilligan, et al., 2006) identify the intangible reflexivity aspects. These are the underlying hidden message; or nuance of feelings that are behind cognitive discourses. I used these ‘intangible’ reflexivity aspects, in the following data chapters (4, 5 & 6) and to highlight my inner processes as researcher (Section 7.4.3.1). The aim was firstly to improve my reflective learning processes as I related to new concepts, and then in the data chapters to apply my knowledge of these methods from my experience.
3.3.4.2 My intended use.

Although I had not set out to understand and address the marginalising issue directly with my co-researchers, the research began to show me there were many levels to the experience of marginalisation. In the process of early listening to the co-researchers’ words, I searched and attempted to differentiate the individual voices from their cultural voices “that override what we know and feel and experience that tell us what we should see and feel and know” (Gilligan, 2003, p. 9). I have earlier articulated developing my understanding of the use of self in the learning environment, which became more coherent with the earlier change to a SSAR model. I could now perceive a way to explicitly and consistently attend to the ‘intangible’ content of the research which meant that layered data evolved rather than arose as distinct variable-like categories. Therefore, I needed to have a methodology which potentially would allow this level of analysis. The Listening Guide was chosen because it was suitable for cross-disciplinary research, in that the research is informed by the disciplines of science, health and education.

3.3.5 The contribution of Carol Gilligan.

Gilligan’s original research group continued to work together following her landmark book, In a Different Voice (1981). This was in a time when psychology was starting to explore narrative as a way of searching the Self. Their research emphasis gradually shifted from an observational empirical approach – the continual reading of transcripts in a linear fashion – to focusing more on listening and the relational aspects of their involvement in the research. What the researchers began to hear were the “threads of love and care intertwined with concerns about fairness and equity” (Sorsoli & Tolman, 2008, p. 496). The value of care and social justice became their focus “despite the notion that their narratives were supposed to only illustrate morality” (Sorsoli & Tolman, 2008, p. 496). This led to a broadening of the method, by listening a number of times to bring out the embodied telling of stories into a relational process — the central task of the researchers was to listen.

Then as their research focus shifted from reading — a more visual activity — to listening, and the voice was perceived as a metaphor for empowerment became a physical embodiment. The assumption that the voice is our primary way of communicating or communicates our inner thoughts and feelings, gave way for co-researchers to make sense and meaning of their experiences. The developing narratives brought essential information about the reality of experience which varied depending on the context and the level of depth of the relationship with the co-researcher. Sorsoli and Tolman (2008) found that, as the voice and the
relationships became perceived as intertwined, the analytical framework became characterised as voice-centred and relational. The name was changed to the Listening Guide and it has been developed as a qualitative method with psychodynamic, literary, clinical and feminist foundations. Its outstanding features are that it goes beyond the fixedness of the objective researcher and their linear clinical approach — a distancing process for the researcher — to a discovery relationship model where the relationship between researcher and participants was the important aspect in order to find an inner truth.

I used the background of the co-researchers as a story or a plot over time. In the story over time, the differences, nuances and conflicts and differing voices of self and place are placed within a cultural context. Gilligan’s research was an early forerunner of research which acknowledges the dynamic of a living experience, which up until this point had been somewhat voiceless. For example, Anderson (2001) and Ellis (2004) closely followed the ideas of Gilligan, and were both influenced by the dynamics of the relational processes, acknowledging the holistic and developmental nature of research (Bullough & Pinnegar, 2001).

Gilligan did not want her work to be considered a method; rather, she perceived it as a framework or scaffold on which to focus the affective domain in relation to the culture. This gave researchers following her freedom to develop their own structures to suit their unique situations. By bringing the silent marginalised voices into focus, the differences in gender, and the associated development of care and justice in girls, started a paradigm shift in beliefs about the way research was carried out. The understanding and experiencing of feeling states in the co-researchers was similarly important to signal a move from any unconscious positioning of the silent marginalised diverse learners.

**3.3.5.1 The importance of voice and listening.**

Below is a holistic definition of listening. Being heard is relational and being relational is to acknowledge the value of interaction and the development of knowledge.

To have a voice is to be human. To have something to say is to be a person. But speaking depends on listening and being heard, [and is] an intensely relational act. By voice I mean something like what people mean when they speak of the core of the self. Voice is natural and also cultural. It is composed of breath and sound, words, rhythm, and language. And voice is a powerful psychological instrument and channel, connecting inner and outer Worlds (Gilligan, 1981, p. 90).
The therapeutic process that Gilligan evolved in her research cannot be understood without knowing something of her own analytical research method. I knew she followed a Freudian analytical method; however, in her most recent book *Birth of Pleasure* (2002, p. 111), she provided a historical narrative of Freud’s development of psychoanalysis. Having studied Freud from a bodymind perspective, I had overlooked his stance on his therapeutic encounters. He was well aware of the ‘top down’ authority position his female client placed him in. He used a method — which would seem ridiculous — of tapping their head when he thought the client was surface talking and denying the deeper level of inner listening. I found that interesting that he was employing body tapping which in this era is part of a mode of body therapy – kinesiology. It seems to work directly with the neural pathways and the kinaesthetic movement. He was employing a different process to achieve the same result of getting to the inner level by shifting the focus from the speaker (the voice) to the researcher as the listener. Gilligan’s assumption was that the researcher had already developed sufficient relational contact with the subject. From my work in psychotherapy this is analogous to the edict of “Let it talk!” (Boyesen, 2001), which was the edict to encourage the client to speak from their internal ‘it’—the unspeakable or the core self. It is an important aspect a way to ‘switch’ from outer to the inner life (Gendlin, 1997). This is a critical concept for therapeutic and learning environments for when people are not self-regulating well, lack inner self-awareness, their learning can deteriorate.

3.3.5.2 *The voice as a dynamic interplay between connection and disconnection.*

Evelyn Keller (1985) argued for a change in the root metaphors of science and a move away from the emphasis on sight and vision as these could cause a temporary splitting between the subject/object, body and mind (cited in Gilligan, Brown, & Rogers, 1990). Typically this separation is shown as imagery of Self and Other denoting separation, individuation, concerns about autonomy and freedom as compatible with notions of individual rights and independence from others such as our formal education systems foster (1990). In such a framework femininity is either viewed as idealised or disturbing. In Gilligan’s research girls spoke of growing apart and wanting to lead their own lives and wanting the same for their mothers “I do not think we have become less close; it’s just that now I am beginning to see more, you know me myself, not me and mum and dad” (1990, p. 110). This seemed a typical response of teenagers when the parents are no longer idealised, and yet the same girl could see the similarities between herself and her mother. The thought that perhaps she would end up like her mother made that often-spoken comment, “I do not think anybody is self-sufficient, and no woman is an island” (1990, p. 111).
This awareness of a different metaphor of voice and hearing does not carry the implication of separation and control. Rather, it draws attention to human connection, the possibility of different languages and the potential for miscommunication. Rather than interpreting this as regressive from the standpoint of separation, Gilligan explored it to understand what development meant in the context of the development theorists’ language of stages, positions, levels, and the transitions between them. It is the transitions between voice and visual images that is significant as they point to dialectical tensions which may need to be explored.

The inclusion of women in the research changed the conversation and shifted the research paradigm to notice the limitations of previous moral frameworks, and, on the political level, exposed the tension between patriarchy and democracy. Essentially what had been unaccounted for were the values of care and social justice. Thus care can be both a care for (internal individual processing) and a care of the other (outer), which has potential to become a social justice issue. The lack of connection between women’s psychology and women’s history was confirmed by Anne Peterson, who was asked to write a chapter on female adolescent development and had difficulty finding enough literature to review in order to write such a chapter. Initially Gilligan attempted to understand the cultural understanding of women, concerning how they are supposed to think, feel and act, and the voices of women who speak spontaneously (Gilligan, 2003).

The turn towards relational research, to connect through voice and understanding the apparent disconnection processes of students is vitally important. Inclusive practices and equity mean that teaching and learning in tertiary education needs to understand how to include the elusive other, by developing more student-focused processes within curriculums.

3.3.5.3 Understandings of dissociation.

Gilligan, in a recent conversation came to the core of her method as having:

to do with association and the power of association to undo dissociation. You cannot argue yourself out of a paradigm, but the process of association can free you from its logic… It's a logical connection that runs under the cultural radar. And the challenge for research is to tap into this logic (Kiegelmann & Gilligan, 2009, p. 45).

The voice then becomes “an instrument of psychology and a bridge between the emotional and the thinking” (Kiegelmann & Gilligan, 2009, p. 45). When disconnection occurs on any level, it will affect the social world which depends on them being integrated to function.
effectively. Gilligan goes on to say that when dissociation is seen as “either an individual or social disconnection between two objects it brings an understanding and account for political resistance” (Kiegelmann & Gilligan, 2009, p. 45) An example of individual disconnection of the heart to head can be expressed as the emotional body and the thinking voice. On the social/political level, disconnection can sometimes mean a hyper-sensitive or a reactive stance towards reactions of others. She began to realise that feeling and thinking are not necessarily split and had “a bigger function than just as a marker of development”, which had been the common thought of psychologists in the 1980s (Kiegelmann & Gilligan, 2009, p. 59). Her study showed a distinction between the core sense of self, the emotional process in the body, which was ever shifting and dynamic and the autobiographical self, which was perceived more as a non-transient collection of characteristics. According to Damasio (2000), this autobiographical self was the self traditionally linked to the idea of identity, and represents a bodymind connection.

### 3.3.5.4 Gilligan’s approach to self.

The 1996 study (McLean-Taylor, Gilligan, & Sullivan, 1996) helped Gilligan find a missing link between the stories of women in her first book (Gilligan 1981) and the stories drawn from what the teenage girls presented. This study interviewed the teenagers yearly over a three year period and found the link when the researchers became aware of relational issues that developed between the researcher and the teenagers. Though perceiving the subtle changes in listening to the voice, she developed a way to identify the emotional processing in the body, the core self.

> I couldn’t discern the line connecting the voice of one eleven year old girl with the voices of the women who filled the pages of that book; it was as if the shift had occurred in the way of seeing and speaking about the human world but I had no way of explaining this shift (Kiegelmann & Gilligan, 2009, p. 6).

It was an eleven year old using a ‘false’ or dissociated voice which represented what society expected; this was nearly missed by the researchers, who found it difficult to perceive this false voice. They almost dismissed it as “like a lost time development” (Kiegelmann & Gilligan, 2009, p. 8). In one example, a teenager spoke of how knowledge had to be hidden. She felt she was “not to know what they knew” (2009, p. 8). It was her way of dealing with the resistance to her loss of voice and relationship. I experience many children who use the phrase ‘I don’t know’ which could be to withhold knowledge, or to cover their ignorance, or it could be something to alert to, that the false voice is present.
Although the dissociated voice felt honest and a familiar voice to the researchers, the paradox of this voice, the struggle between self and other, was difficult to understand, given the current understanding of psychological processes. At the same time, the girls seemed to know and resist moving to a place of psychological confusion. The self that girls and women tended to conceal was a muted voice, perhaps the identity they are conditioned to disregard. But strangely “this can be a vital, curious, pleasure-loving self that also has some adaptive value (Kiegelmann & Gilligan, 2009, p. 21). Her example “If I say what I feel…I’d be rejected” or another: “The voice that stands up for what I believe in has been buried deep inside me was perceived as stupid (p. 27).

**3.3.5.4.1 Examples of dissonant internal voices.**

The following example was the one recognised as a turning point in the study, the point when researchers understood the role and process of dissociation.

Example 1. The teenager's misperception of voice:

Iris: “If I said what I was feeling and thinking, no one would want to be with me, my voice would be too loud.” Then defiantly: “But you have to have relationships!”

Researcher: “If you are not saying what you are thinking and feeling, where are you in these relationships?” (Gilligan, 2002, p. 7).

It seemed that Iris also saw the paradox, that she had given up a relationship in order to have other relationships. This required silencing and concealing her voice and self in order to be with other people. When this happens, pleasure is compromised and takes on a different meaning. Here Gilligan refers to the bodily sensations that may be split from or stand in place of the pleasure of just being true to the self (2002, p. 10). According to Gilligan, then, dissociation can be “perceived as a brilliant way (although costly) of ensuring the core self’s (soul) survival” (2002, p. 11). If dissociation is a mechanism that allows for survival in patriarchy, then adaption to splitting in relationships between men and women will mean the soul in its affinity to life and to love will resist this adaption.

Example 2: Adult Relationship Separation

A woman is facing separation and thinks her husband does not feel the way she does. She says:
“I also think I can’t feel the way I feel without having somebody reciprocates it. I don’t think it's in my head and I don’t know” (Gilligan, 2002, p. 31).

Restructuring the text by removing most of the words, they developed what became known as an I-poem. The I-sentence becomes:

<table>
<thead>
<tr>
<th>I also think</th>
</tr>
</thead>
<tbody>
<tr>
<td>I can’t feel</td>
</tr>
<tr>
<td>I feel</td>
</tr>
<tr>
<td>I don’t think</td>
</tr>
<tr>
<td>I don’t know.</td>
</tr>
</tbody>
</table>

This I-poem became known as the “Ode to dissociation” (2002, p. 32).

An analysis of the I-poem:

If the woman thinks, she can’t feel; if she feels she doesn’t think. In this way, she has to take notice of the injunction ‘don’t’ that stands between the ‘I’ and the ‘know’. From these encounters, Gilligan’s work evolved to seek the nuances of the different voice and the dynamic nature of the interview — and the relationship of the researcher to the interviewee became the determining factor of what to say or not say.

3.3.5.5 The paradigm shift in qualitative research.

Gilligan’s work in effect produced a methodological challenge to the positivist paradigm in terms of subjectivity/objectivity, the essential feature and difference between qualitative and quantitative research. Nearly twenty years passed between the publishing of the first book In a Different Voice and establishing what was first called the Voice Technique and which later became known as the Listening Guide, reflecting the development of the research methodology. The research interviewing emerged where examining ‘care’ and ‘social justice’ value and, using reflective practices in the analysis helped to make the values of the researchers more transparent. The main questions asked were: Who is listening? and Who is speaking? This defined this relational approach, and effectively shifted the dynamic of the subjective/objective attitude of the researchers. Interviewers had to let go their fixed ideas on interview outcomes and became more relational to follow the dynamic of the interview and to perceive the different voices emerging. Thus the space between the voices and silence could be experienced, and could become a caring for the co-researchers, and a two-way narrative could be developed (McLean-Taylor, Gilligan & Sullivan, 1993, p. 14).
The valuing of objectivity in research was reduced and questions about the range of methods used by psychologists began to be asked. Another spin off was an acceleration of the development of narrative method, which used similar principles to Gilligan’s research. Narrative method came into auto-ethnography Ellis (2004), feminist methods Lather (1991), and combining cultural, feminism, and critical theory (hooks, 1994). On the therapy level, “making friends with the resistance” in a two-way interaction would loosen up the degree of suppression of the verbal and non-verbal expression and a likely change would occur in the fixed autobiographical self with a change in balance or a change in the homeostasis of the two brain hemispheres, which would improve awareness and consciousness.

3.3.5.6 Application in marginalised social situations.

The Listening Guide has been used, for example, to explore the subject of adolescent girls and sexuality. One study attempted to redress “the imbalance of their missing discourses on desire” (Sorsoli & Tolman, 2008, p. 500). Another example was a research on men as carers called “Can Men Mother? Care? Fathering Care and Domestic Responsibility” Doucet, A. (Ed.). (2007). In this research, an understanding of the “social location” of both parties became important in establishing the project, and when advocating for the co-researchers, the “care about” aspect of social justice became more abstract and harder to find. The researcher, realising she was working in an area she had no experience of, used several research assistants who could fill in in unfamiliar areas (Doucet, (Ed.), 2007). Another researcher used individual interviews with women who had been ‘involuntarily displaced’ from their corporate workplace. When she realised the importance of the relational aspects for her participants, she changed her research protocol to include a reflexive process (Balan, 2005).

In accordance with the psychodynamic theorists, for example self (Fairbairn, 1954; Jung, 1954; Winicott, 1965), the Listening Guide acknowledges that a “multiplicity [of voice] is an expected aspect of the psyche and that shifting from one ‘state of mind’ to another is a frequent psychological process” (as cited in Sorsoli & Tolman, 2008, p. 497).

3.3.5.7 An updated local example of dialectical tension.

The following example I received on an email newsletter shows that the self and social aspects as discussed above are still relevant in Australia.

I came to one of your presentations on adolescents the other night…[I’m emailing] to say that I really appreciate what you are doing. I was one of the kids who were dragged there that evening, but I am so glad that I went. A lot of it meant a lot to me especially the mask part, I haven’t quite figured out who I am yet, # I’m constantly changing and right now my friend who used to be my best friend is talking about me
behind my back. She tells me I am a fake. # I feel sad sometimes and my parents don't really understand too well. I think that they think I am just being moody, I try not to but sometimes I just feel a little down. ^ Sometimes I just like someone to talk to and I have a really special friend who I tell everything. …after listening to you, I told her how special she was and how much she meant to me. * I think that what I am experiencing is just normal because it's what you were talking about, it's just that sometimes it's hard to smile for everyone around me.”## (Extracted from an Internet Newsletter: Maggie Dent, December, 2010.)

An interpretation of the quotation follows:

The symbols *, #, ^ and ## and underlining are the points of dialectical tension. I have interpreted the symbols in the following way:

* Feeling of care to the ‘other’ and needing reciprocation,

# Who am I? Friends can betray for no reason,

^ Do they listen to me? The parent’s message is “do not have ‘down’ feelings”; I have to please them and not feel what I feel.

## Hard to keep up the ‘happy’ front for the sake of all relationships.

The underlined section is the beginning of awareness of her shifting identity and the inevitable separation from best friends and parents.

### 3.3.5.8 Summary and critique of Gilligan’s contribution.

The pivotal epistemological and ontological questions in Gilligan (1981) and Brown and Gilligan’s (1992) qualitative voice-centred research are twofold: “what can be known” about the story teller, as subject, and “how can subjects be known” in studies that explore narrated lives (Doucet, & Mauthner, 2008, pp. 399-400).

The early research of Gilligan (1982), which predominantly examined morality and gendered lives, was framed in the moral development hierarchy of Kohlberg (1981), who positioned those who spoke little as a silent category representing people who literally do not speak and were perceived as marginalised, such as the invisibility and silence of disability.

Her early work has been criticized as essentialist, as ignoring the subject position outside the narrative, as “lacking scientific rigour” and as dualistically constructing gender (Danoff-Burg, 1994, p.145). Heyes (1997), however, has suggested that later work (Gilligan, Brown and Rogers, 1990; Brown and Gilligan, 1992; Taylor, Gilligan and Sullivan 1996; Gilligan, 2002; Gilligan 2003; Gilligan, Spencer, Weinberg, Bertsch, 2006) provides epistemological and methodological approaches that deal more adequately with these criticisms.
Gilligan and others with whom she researched sought to access women’s knowledge that had been marginalized and subjugated (Beauboeuf-Lafontant, 2008) showing that the silent is not all that silent. The issue was more the tension between the message from society and the repression from their self as the example in section 3.3.5.7 above shows. Even when there was no link to the culture and the other, when the researchers were non-inclusive listeners, the space between silence and voice was still saying something. We can never not communicate: we listen on all levels.

These researchers have been major contributors to feminist theory and the contested debates between critical and post structural/postmodern feminists concerning subjectivity as constituted by, or situated in, various social contexts (Doucet, & Mauthner, 2008). The relational narrated subject is offered as an ontological alternative to the dualistic epistemological positions of the subject, as entirely constituted discursively in language or situated within socio-political contexts.

Ontologically, if the subject is considered as in-relation, then is it possible to know the narrated subject? That is, is there a subject outside the narrative? These questions raise another; is it actually possible to fully know the subject, regardless of the epistemological position? The epistemology of subject-in-relation posits the ontological position of the subject as knowing through experience (Beauboeuf- Lafontant, 2008), acting with “intentionality and agency” (Doucet & Mauthner, 2008, p. 408) relative to the larger cultural narratives.

The Listening Guide utilised by Brown and Gilligan (1992) encompassed the move from the original research of the development of a voice-centred interpretive method, (Gilligan,1982) to a listening-centred interpretive method. Now the interpretive method could reveal the subject within the methodology or narrated life: a listening-to-how the researchers related, allowing the researchers to listen to the space between voice and silence.

The Listening Guide has provided a process for accessing, interpreting and writing about different subjective stances (Doucet, A & Mauthner, N., 2008); Beauboeuf-Lafontant, 2008). “This approach assumes that there is a multiplicity in how people respond in different situations, as evidenced by the rising and falling of more than one voice – within and across narratives” (Dillon, 2010, p. 4-5). The method can be utilised across a range of methodologies that seek an alternative framing of research to that based within grand narratives or socio-cultural discourses. Dillon has argued that “narratives over extended time stand a better chance of capturing different voices in individuals… as well as states of flux that identities undergo … as part of the dynamics of self” (2010, p. 12).
I had begun to understand at a practical, social and human level what listening meant, perceiving culture and place in psychology and the role a focus on listening and voice has for changing the paradigm to one of inclusivity. In psychology alone Gilligan’s influence was initially felt in moral development, then in cognitive development and community psychology.

3.3.6 Using the Listening Guide stages as practice.

As suggested earlier four stages of the Listening Guide that can be used in analysis: listening for plot, the I-poems, contrapuntal voice, and summing up. It is the I-poem and the contrapuntal voice offer distinct forms of intangible reflexivity, and have the potential to reach a level of understanding which is unseen, abstract, feeling and inclusive. For example, a discourse on what is not easily observed or is non-verbal in nature, on music or on the quality of voice or feelings is an example which could be perceived as intangible. Many qualitative methods of analysis emphasise the use of language and story. The Listening Guide is no exception, but it also offers a relational and dynamic system of analysing data emphasising the hidden elements of reflexivity which make for a richer more transparent form of analysis.

3.4 Analytic Methods

During the AR cycles, the Listening Guide, in particular the creation of the I-poems and the other relevant learning techniques, enabled the identification of codes which were the co-researchers’ learning issues within higher education. Thematic analysis was conducted by a number of readings, and by listening to co-researchers’ tape recordings and then coding the transcripts.

3.4.1 Developing ‘codes’.

The practice of Freire’s (1970) early action research was to ensure that any learning materials they constructed were context appropriate for the participants and their situation. He wanted them to have a voice and be empowered. His learning materials were gleaned by first listening to people as they discussed their issues and their collective knowledge, which comes from group sharing of experiences and understanding the social implications that affect individual lives. The gathered ‘data’ on how they perceived their issues he called ‘codifications’ or ‘codes’ which for a single learners would reflect their day-to-day situation, or for the group would encourage group members to think locally by working their learning and actions to address issues in their communities. The development of codes can be succinctly perceived as
a five-step questioning strategy to quickly move a discussion from the personal to social analyses and on to social action (Freire, 1970).

- Describe what you see and feel
- As a group, define the many levels of the problem
- Share similar experiences from your lives
- Why does this problem exist?
- Develop action plans to address the problem

(Wallerstein & Bernstein, 1988, p. 383)

The third step is where similar experiences are shared and tested out from the analysis in the real world. The next step, ‘Why does this problem exist?’ invites participants to give a deeper cycle of reflection on the social level and to include the input from their new experiential base. This recurrent spiral of action-reflection-action enables people to learn from their collective attempts at change so they can become more deeply involved in “getting above” their cultural, social and historic barriers (Wallerstein & Bernstein, 1988).

An exemplary use of codes is from McDonagh (2006), a special needs teacher working with children with literacy issues. She firstly used commercial learning programs to show the children’s progression but she was unhappy that, although change was made, the children were still passive with little to no change in their writing and word usage. They were still disempowered. In her research she began to develop understanding, experiencing a dissonance between her values, her position and these commercial programs. She says:

I was disappointed that my teaching positioned me as one who facilitated information and skill transmission and my pupils as un-thinking, almost passive recipients. By basing the content of my teaching on the programs I show that I was constraining both my potential and that of my pupils. The content of each of these commercial programs presented a fragmented skills-based view of knowledge (McDonagh, 2006, p.73).

It was at this point she began to question how she could base her work on her own values. She stopped using programs, developed group learning strategies and focused on the code of spelling, as she had identified this as a common issue with her group of children – other than that they were all dyslexic. She posed the question to the pupils: How did you learn to spell? All of the pupils did not know. She continued to allow an open discussion and some months
later her students presented themselves as a group to other students, sharing how they learnt to
spell, articulating how they learnt from each other, and revealing what it meant to be dyslexic.
To change to this type of education, facilitating learning rather than teaching repetitive
spelling task required great creativity and courage.

3.4.1.1 Identifying co-researcher issues: The use of codes.

In my initial plan I used codes from to checklists: an auditory processing How can listening
be identified? and a Dyslexia Characteristics checklists (Appendix 1) in order to introduce
and develop perceptions of these ‘hidden’ issues in the group. By deepening the common
understanding of listening and using listening strategies, I created a holistic code to highlight
the perceptual issues which are part of the invisibility of dyslexia. For example, when
struggling to make sense of new concepts, co-researchers such as Gst, would intensely listen
and not talk; but after a while I would realise he was getting overwhelmed. During this time
we began to understand how listening could affect behaviour and health, and could be
perceived as both internal and an expressive mode. My second aim was to identify if there
were any common listening issues in the group which I had easily done on a previous group
work experience with a cohort of students with dyslexia, using the Listening Checklist and
finding in that case that it was their lack of voice and presence through listening.

As the individual needs and aims of the co-researchers changed, I used writing and I-poems to
identify codes. When codes were presented back to the group for discussion, emotional and
social responses were projected towards the ‘object’, and a focused discussion emerged. Then
in the Health Group, I used a text to give a different view of ‘disability’ that would potentially
develop a structure for problem-posing dialogues. Freirian pedagogy uses the concept of
problem-posing as “a logically prior task which allows all previous conceptualisations of a
problem to be treated as questionable” (Heaney, 1995, p. 7). It is a more open-ended,
developmental model than problem solving techniques, although I found when using ‘codes’
on issues that problems would be ‘solved’ as a result of problem-posing. As an example, in
the same group I asked co-researchers to write about ‘How do you learn?’ or ‘Reflect on your
childhood learning’, with the aim of identifying any generalised codes from childhood
experience or learning and relating it back to the Listening Checklist. This writing exercise
was done at home prior to the group meeting. Once I received their writing, I presented it
back to the co-researchers modified as an I-poem (Gilligan, et al., 2006). As the written
contributions were variable, I changed the use of the I-poems to become the code for
discussion. This was effective because co-researchers verbalised the part of their writing they
chose, and thus enabled all perceptions of their learning situations to be listened to in an open-
ended non-judgemental process, without anyone offering solutions. This activity left me thinking whether this type of facilitative approach using codes could develop critical thinking in adults as Roche’s research demonstrated in children (Roche, 2007). A diversity of codes in the form of the creative arts could be applied in any situation and in a variety of ways.

The second level of analysis occurred at the end of the three AR cycles and involved the identification of thematic commonalities and differences in the experience of learning and the impact on health. The synthesis of the themes and subthemes revealed the link between diverse learning and health and wellbeing in the context of higher education. In terms of self-study, turning points in self-learning were identified and synthesised within the framework of self-reflexivity and research reflexivity.

3.5 The Ethical Context of the Research

As well as my ontological values of deep respect, valuing the other and listening, the fundamental ethical consideration I adhered to when planning the research was to have informed consent from likely co-researchers, thus ensuring that privacy and confidentiality were kept and protection from harmful practice was in place. See Appendix 8 (ECN 05-147). The details of the ethical considerations above are now outlined.

3.5.1 A Call to participate in the three AR cycles.

For AR1, I sent out emails via the university network system and had over twenty replies. Where possible I spoke on the phone to participants and explained what the process would be. Those who definitely thought they could come to the meetings of SCU AR1 received the information package which included the Informed Consent, Plain Language statement; Listening Checklist and Dyslexia Characteristics Checklist (Appendix 1). The informed consent was signed and brought to the first meeting.

Following feedback from the first cycle, For AR2 cycle four months later I sent out an update on the project to all previous people who had registered interest and another email via the university network signalling the start of the AR2 cycle (Appendix 3). I expanded the project to meet people on three campuses of the university, following previous inquiries from external students and the other campuses. The topic was still dyslexia, with more flexible ways to meet potential co-researchers in a mix of individual and group opportunities. For example, I offered mentoring sessions, a ‘Listening Circle’, a chat group and a day workshop on the learning/health links.
For the AR3 cycle the following year (January 2008), I again used the university network and an additional information session at the Adult Education Centre (April 2008), which led to three people joining this cycle. The information session placed more of an emphasis on reflective action (Appendix 7), and showed the shift in my thinking towards SSAR and the personal change in direction – more my inner reflective process.

The groups of AR3 (Table 3.2) were formed through networking at conferences and follow up information sessions – with consent to use as data – either as a group as for the teachers, or individually for the Health Group. In one case I had three meetings prior to the group meeting and have used my reflections into the data from one meeting. I consider this to be the fuzzy stage, when questions and direction are developing (Dick, 2000) what Herr and Anderson (2005) call the “pilot stage of that group formation” (p. 7). It alerted me to the issues and a possible direction for the group.

In the updated ‘Call to participate’ I stated that:

The main thing I’ll do is listen and ask strategic questions to help you identify behaviours associated with poor listening and encourage you to try out ideas related to auditory processing/listening… I also explain how I will support your learning… supply notes, checklists, in order to develop ‘a map of understanding’ of our process together … as plans are acted on, you will keep notes on thoughts and reflections … to ‘make sense’ of the experience.

The tone of this update is more empathetic and clear in its direction, and from a distance it feels comfortable. On a practical level, there was little keeping on notes from the co-researchers, possibly because of my lack of follow up on that aspect. Co-researchers in this cycle received a plain language statement which was discussed in the first meeting before they signed the informed consent form (Appendix 4).

### 3.5.2 Information given to co-researchers on joining the three AR cycles.

The Southern Cross University Human Research Ethics Committee (HREC) approved the ethical aspects of the study in 2005 (ECN 05-147; see Appendix 8), and the following year an amendment was sought to change the title from “The Language of Dyslexia" to “Learning Diversity or Learning Differently, and for the consequent change of wording in the information which went to the potential participants. (Appendices 1, 2, 3 and 4 respectively)

Informed Consent form (AR1, 2 & 3)
Plain Language statement (AR1, 2 & 3)
Listening Checklist and Dyslexia Characteristics Checklist (AR1, 2 & 3)
Updated instructions for using the Listening Checklist (AR3)
These information sheets were sent after a phone call or a brief meeting during which the potential co-researcher had expressed interest in joining. They were asked to bring back their signed informed consent form to the first meeting.

3.5.2.1 Informed consent (Appendices 1 and 4).

By ‘informed’, I mean that potential co-researchers understood enough of what the project was about, and by ‘consent’, that they could make their minds up without force or persuasion on whether to participate. This form was signed by participants before or on the first official meeting in the research. As well, as sending out the informed consent and accompanying documents beforehand to potential co-researchers, as stated in the call to participate (Appendix 1), I wrote three project update sheets between December 2007 and April 2008 which were emailed to those who previously showed interest in participating (Appendix 3). The research was both personal and cognitive; working with the experiences of both me and the co-researchers, and trying out new ideas related to both learning and institutional issues — such as our thoughts, feelings, aspirations and personal learning histories. I was aware of the possibility that co-researchers perceived me as the one with the power and authority and I was vigilant to address any issues if they occurred. I developed my facilitation strategies to minimise this effect. For example, power was an issue in the initial interviews with some co-researchers, and in the first individual meeting/group meeting. I saw my role as ‘facilitating reflective practices to help personal and professional learning/teaching’ (See informed consent form in Appendix 1).

3.5.2.2 Plain language statements: AR1/2 (Appendices 1 & 3) and AR3 (Appendix 4).

There was a change in the plain language statements following AR2 in order to acknowledge the shift in focus from ‘dyslexia’ to AR learning diversity or learning differently. As well potential co-researchers were told what commitment was required that is, the expected minimum number of meetings needed to attend. Feedback from earlier cycles had indicated that commitment of time was a big issue. In AR3 I adopted flexibility and had two group meetings where I spelt out again what I envisaged the time commitment for a group working at distance would be for no more than four individual and one group meeting at the end. Follow up between individual meetings would be by phone calls and email.
3.5.2.3 Handout and its updated version — ‘Listening Checklist’, and the ‘Dyslexia Characteristics Checklist (Appendices 1, 3 & 5).

In AR1/2 the auditory processing handout and the Dyslexia Characteristics Checklist were used to start conversations with co-researchers. In AR3, the Listening Checklist was only used to stimulate thinking and action before coming to the first meeting. The idea was to choose a listening concept, write about it from their experience and then share this and possibly use it as a direction for our joint interactions. A handout called An Action Learning Model was sent out with the consent form as a preliminary exercise before either the first one-on-one meeting or group meeting (Appendix 5). The following descriptions of the measures I took to ensure that privacy, confidentiality and protection from harm are maintained.

3.5.3 Privacy and confidentiality.

In the informed consent form signed by co-researchers, the disclosure statements said:

Any information that is obtained in connection with this study that can be identified with me will remain confidential and will be disclosed only with my permission.

I have kept strictly to this by de-identifying as much as possible any features I thought may be traceable to the co-researchers. While one co-researcher verbally told me that I could use her real identity as she was proud to have been part of the research, I did not take this up. Her motivation was to acknowledge the support of the project, which she felt had been an exemplar of facilitated learning. She was a co-researcher with ‘double disability’, health and learning issues, during her studies.

Most of the data was in the form of individual or group interaction that was taped and transcribed, came from six main individual co-researchers, for whom the contact time varied between two hours and thirty hours. For example, one person whom I met with for two hours wanted to join the first AR group but could not for personal reasons: it was held at night; she was fatigued by her long study, and she had no transport. Her face-to-face interview was tape recorded and transcribed. She gave rich ‘insider’ information. She had been years getting her degree and could talk easily with great awareness and understanding of her dyslexia. I included her information hoping she could make some meetings, but she did not. I endeavoured to contact her towards the end of the project to get a closing interview, was unsuccessful and suspect she may have not completed her study.

Another person with dyslexia who initially inspired my search for understanding of dyslexia is Roland. We communicated by email, had an overseas meeting which was tape-recorded and transcribed. He is acknowledged in the first page of the research and extracts of his
writing from earlier correspondence are found in Section 5.2. His story of successfully negotiating his degree followed his Tomatis auditory processing intervention in the 1980s. His main contribution was his early reflections on his reading/writing processes which gave valuable insights. These reflections were sent fifteen years after our meetings in London in the late 1980s. During the research I met him in the Canada and discussed further his understandings of that work and his current issues (Personal communication 2009).

3.5.4 Protection from harm.

My purpose was to help make sense of the diverse learner’s situation and I quickly found that numbers were down because of the hours overworked which meant at least 4 potential co-researchers could not participate in the research. On the first night of the AR1, one co-researcher felt challenged when asked to give verbal feedback in this group of four went into a high anxiety state by reporting her bodily symptoms in the group. This told me there was sufficient trust built, as she could take my ‘grounding’ instructions to calm her, and once calmed, could analyse the trigger as being something from her past learning in school. This was a time in the study when it would have been easy to imagine a facilitator exacerbating this situation and risking doing harm. I felt the need to call on my practice wisdom to help her through her anxiety in a positive way as I knew; she had previously had a breakdown.

3.5.4.1 Storage of data.

My ethics application stated that “All data collected in the course of the research will be secured in a locked storage compartment for five years and the responsibility for the safety and security of it will reside with the researcher” (Ethics, ECN 05-147). All data and transcripts are stored in a lockable filing cabinet or on small hard drives in the same. The tape recorded data was transcribed by three different people over a period of three months in 2010. The transcriptions were carried out by an external company whose employees signed a confidentiality agreement as part of their employment. The ethics application also stated that:

Reflective materials generated by participants will remain their personal property and they will only be read or sighted by the researcher with the participant’s permission, who will ensure that privacy and confidentiality measures are instituted and maintained. Should stories be written or presented in other forms, for example in journals and shared in group meetings, they will not have any identifiable information such as institutions, other students, relatives and/or staff. Pseudonyms will be used and identifying material will be omitted or renamed to protect the identities of people should there be any written transcripts. Any reports and published material arising from the participants’ input to the group will only be used as interpretations according to the issues they raised and broader improvement envisaged as a result rather than to
identify specific people, places and situations. Should any member become emotionally upset beyond the ability of the group to support them, he or she will be offered professional counselling (see Free Counselling Services)….There are risks associated with emotional catharsis, so the group will offer support to its members, and the researcher/facilitator is an experienced psychotherapist with 25 years’ experience in group individual and group management and support (Ethics, ECN 05-147 05-147).

In the ethics application, the agenda was clearly set to enhance the possibility for the group to move towards individual empowerment. I stated that in the first two meetings I would direct the meeting so that I could ‘evolve’ the group rules. It continues:

The agenda relating to the research objectives will be formulated with all participants. The kind of reflective practices will depend to some extent on the diversity of the group, as part of the objective is to change the constraining nature of how dyslexia has impinged on the individual through political, cultural, social, historical elements almost certainly emancipatory reflective strategies will be the main emphasis (Ethics, ECN 05-147).

The agendas were formulated by co-researchers, and ranged from clear goals of receptive and emotional listening, Ph (Section 5.3), to an individualised goal, Ma (Section 6.3), that had all the elements discussed above impinging on her well-being. Hence our vague goal was of the order of waiting and finding ways to sustain her learning issues and identity in her course working, with the depth of her often constant exhaustion and ill-health. While I wished to move towards empowerment through the research, I had to acknowledge generalisations were not possible as each person moved at their own pace.

3.6 What Counts as Rigour in the Research?

Many AR models tend to focus mainly on the co-researchers’ iterations with the researcher, and depend on the type of AR and the issue being examined. Generally there is less attention given to iterations of the planning stage of the research. Using a self-study approach, which uses a problem-posing and critical consciousness approach, it is more likely that these iterations become researcher focused in the different stages of the research process. Initially my focus was not sufficiently internal, as it was when I had finished the first AR process and had reached a turning point where I needed to change something in the research. A deeper internal study of my processes would revitalise my continuing interest in my research processes, and this is what SSAR represented to me. When the turning points and mess times in the research process are missing, it signals that the two-way iterative processes of the researcher to researcher and/or researcher to co-researcher are unaccounted for. This leaves the clinical picture of the research process being perceived as “too clean”. With a ‘warts and all’ approach, the transparent nature of the whole process is revealed. As Schön (1983, p. 39)
described, these turning points as “being the lowlands, or the swamp that the researcher can sink into where chaos and confusion reigns” are often ignored.

Although rigour in qualitative research can be considered from many perspectives, some of which question the scientific bases of judging the quality of research, it is no less rigorous than quantitative research. As qualitative research is based on different epistemological assumptions, different words are used to demonstrate the ways to make explicit the overall processes and worthiness of a project. There is no one test of rigour which means that “researchers must use the most appropriate means of assessing rigour that reflect the methodological assumptions of the project” (Richardson-Trench, et al., 2011, p.159).

Qualitative research has been accused of lacking scientific rigour; this is particularly obvious when considering the concept of generalisability. My form of self-study shows it is impossible to generalise from such a small sample. The origins of SSAR in the context of educational research have been criticised for being too much about self and lacking “the context the research is taking place in; the social and political aspects”. Self-study emerged “as a convergence of at least four developments within educational research.” (Bullough & Pinnegar, 2001, p. 13).

The first development was the introduction of naturalistic and qualitative research into education which brought about a redefining of validity as trustworthiness or accuracy (Lincoln & Guba, 1985). The second development was the Reconceptualist Movement in curriculum studies, described by Pinar (1977), and aimed to get individual emancipation by the researcher being more deliberately conscious in looking at how the individual accepted their situation yet continued to be enslaved by it. The third influence was the growing involvement world-wide of researchers in teacher education who brought diversity, tapping the humanities rather than social science.

Winter (1989) posited six principles for the conduct of AR

“reflexive critique…dialectics…collaborative resource…risk…plural structure…theory, practice transformation …theory and practice need each other…as an activity which represents both a powerful [i.e., rigorous and valid] form of social inquiry” (pp. 43-64). (my emphasis)

On the other hand, Whitehead & McNiff (2006) draw on the Habermas’ notion of social validity, which they suggest includes an appropriate “comprehensible, truthful, sincere [account] … grounded in the ontological values such as freedom, respect and valuing the
other” (p. 109). Whitehead & McNiff (2006) further argue that these criteria “need to emerge as the epistemological standards whereby participants make judgements about their social practices. This element of critical self-reflection, transforms the process of establishing social validity into a process of establishing ethical validity” (p. 109).

Further to the debates on rigour, quality in SSAR was earlier severely critiqued for having no clear philosophical underpinning. The autobiographical nature of the work that Pinar (1977) developed was critiqued as “reducible to upper-middle class absorption with self” (p. 12). To answer this critique some researchers have taken on existentialism to answer why there has been a lack of success in changing and influencing educational structures. Existentialism is attractive because

“it takes into account the nature of human life and responsibilities. It places the responsibility to understand how changing teacher education practices require the involvement of the self, and claims back and values the teacher educator’s role and identity” (Feldman, 2003, p. 27).(my emphasis)

3.6.1 Other approaches to rigour.

In qualitative research, the criterion of rigour has been questioned, with validity considered to be the “main conceptual approach to judging the worth of research” (Davis, 1998, p.413). Davies and Dodd (2001) were critical of the term, as conventionally used and called for a redefinition of the term. They argue that qualitative researchers need to define the term ‘rigour’ as a cluster of terms related to any particular research context by using specific qualitative markers such as “sensitivity”, “honesty”, and “empathy” (Davies and Dodd, 2001, p. 288). In my research, a qualitative marker was the development of listening. By giving attention to the research practice, notions of rigour would then provide meaning in a qualitative research context.

On the other hand, Kitto, Chesters, & Grbich, (2008) prefer to use the term ‘rigour’ to describe the “thoroughness and appropriateness of the use of research methods” (p. 243). They delineate three types of rigour, evaluative, procedural and interpretive, which are defined below.

3.6.1.1 Evaluative rigour.

Kitto, et al. (2008, p. 4) refer to evaluative rigour in terms of the “ethical and political aspects of the research”. The criteria posited by these researchers included consultation with appropriate people, ethical protocols for approval and implementation, and in particular that
confidentiality was maintained. They considered that by reviewing the actions within the research process would ensure accuracy in the way the findings were collated.

3.6.1.2 Procedural rigour.
The main value of procedural rigour is transparency in the way the research was conducted. The details of the research, for example would include: how I gained access to participants, the initial information sent out, the length of time of co-researcher participation, how trust and rapport were built, the use of reflective practices to inform and generate knowledge, and the description of the way the research was conducted. In the ethics approval (Ethics, ECN 05-147). I outlined these aspects in order to give an understanding of my perceptions of the issues I considered important at the beginning of the research. I hoped to discuss these issues during the time of the research; they were:

The roles of researcher and co-researchers.
The Concept of Learning—the meaning of adult learning. How do your work/university studies teach you how to ‘learn’? How important is it to you to have control over your learning?

Whether, or to what extent, your learning needs are being met during your time in higher education?

Student Welfare /Policy What assistance have you accessed in relation to your dyslexia or associated issues. For example, have you accessed Counselling, the Disability Officer, Lecturers, and the Health Services? Satisfaction and thoughts in relation to these services.

How important is it for you to receive specific help with your dyslexic type symptoms/to feel settled in the professional/student community you are in? (Ethics, ECN 05-147)

Reflecting back on this first ethics statement, I notice that what comes across is an attempt to explore the habitus of the students. In Section (8.6.2) I discuss the results.

3.6.1.3 Interpretative rigour.
Kitto et al. (2008) define interpretive rigour as “a full as possible demonstration of the data/evidence” (p. 4). Barbour (2001) cautioned that reducing qualitative research to a list of technical procedures was overly prescriptive, and thinks rigour could to be strengthened when “embedded in a broad understanding of qualitative research design and data analysis” (p. 1117). Further to this, Kitto, et al. (2008) suggested that:

Interpretative rigour is enhanced by multiple methods of validation which included member checking, multiple data sources, methods of data collection
and theoretical frames. Identifying ‘negative’ or ‘deviant’ examples was also considered supportive of interpretative rigour (p. 4).

In other words, these researchers argue for the importance of triangulation of data collection methods and researcher interpretation. Further support is reiterated by Feldman (2003) who suggested criteria for SSAR should include what the researcher counts as data, the detail of how they were collected, the methods used in collection, how representations are constructed from the data and who noted that “extended triangulation… [can] include multiple ways to represent the same data” (Feldman, 2003, p. 27).

3.6.2 Credibility and rigour.

To consider something as credible means it can be trusted. In the research context credibility means describing the general outline and details of the research processes so that the reader can trust the research outcomes. Therefore the credibility of the research can be assessed by examining the ethical implication of our practice within the broader systems of society.

To look at the ethical implications, the logical starting point for me was to first look at the self as an individual researcher, and then to use a first-person AR approach which potentially could “reveal multiple identities of power and privilege” (Heron & Reason, 2008, p. 370) and influence interactions with others and the research practices. Become aware of my core values meant it “allows us to respond to unexpected ethical challenges or issues with a similar sense of being morally grounded and confident in our actions” (2008, p. 370). Only then could I confront myself and co-researchers in those moments when practice contradictions arose and disrupted our various ways of understanding the world. This is what Whitehead (1994) meant by a “living contradiction”, which he embodies as a ‘felt-sense’ or awareness within his action/reflection cycle of the relationship with self and his co-researchers. This sense of being centred through reflection can be encouraged through specific strategies such as verbal reflections and journaling, and can become a time to be open and honest about processes of self-questioning and assessment. With repetition a new balance, groundedness at a body level is found and new thinking emerges.

Brydon-Miller (2008) suggested this process could be seen as the metaphor of dance training, as our quest to find our centre represents both our core values and ‘balance’ point in the body. “Like dancing, practice is needed as ethical challenges cannot be assumed to not exist. To become mindful and open to the challenges in these new relationships…” (p. 205). In the final reflections in Chapter 8, I discuss the quality of the research and the extent to which this
research can be judged as worthy of consideration and to have met the criteria for rigorous research.

### 3.7 Chapter Conclusion

To construct this overview I answered two questions: What did I learn? and What were the important aspects to come out of the chapter?

My innovative practical application gave me insight into the critical framing of any AR process. I recognised that my action processes were situated in adult learning and humanism, and therefore what began as PAR needed to be more clearly informed by education theory. The reframing within SSAR was determined to be an appropriate development.

The chapter began with an overview of the major groupings of learning theories and I found that my values were firmly situated in adult learning and humanism, which have been the main influence on my values and actions for the last thirty years. The implementation of the reflective, reflexive process of SSAR was instrumental in my learning concerning the universality of reflexivity as a process of developing knowledge, understanding and a direction for action. My innovative practical application gave me insight into the critical framing of any AR process, which I will continue to develop into the future.

While the initial emphasis on dyslexia gave way following the realities of the first two cycles of action research, the codes of the co-researchers’ needs that I later developed were based on listening and self-regulation. I could not easily meet this agenda in the planned meeting times and group situation. I needed first to find a way to ease the co-researchers’ stress that kept them from attending the meetings of the first two cycles. With this thought in mind during AR2 I came to a period of transiting from the outsider perspective to the reality of the stress and hidden nature of dyslexia, and to an inside perspective of developing a profile of diverse learners.

The structure of face-to-face meetings, the tone of the methodological change to SSAR focused my learning. The methods used were less premeditated and were directly related to the individual (or group in the case of the Health Group). Awareness of both myself and my co-researchers was my goal. By then I understood through critical theory that empowerment starts with conscious awareness and must be applicable to the individual’s learning situation. Working directly with the intangible level of action and analysis, and guided by the structure of an individual action research/learning cycle (think-see-do-feel), provided insight into co-researchers, their experience and learning, myself as researcher and the readers of the thesis.
My understanding of SSAR was inspired particularly by the work of McNiff and Whitehead, discussed in two books (2006, 2009), because of the clear understandable structure that worked from a position of inner focus and a structure. I used their work as a guide because I recognised that it has become a template for many diverse research projects in different professional groups other than teacher practitioners. An example of a project supervised by McNiff was an exemplar of teaching practice by McDonough (2006), who was working with dyslexic children. McDonough’s research helped me understand how action from one person, when consistently applied reflexively in her teaching, could make change on all levels of the educational context.

I went on to explore the North American self-study teacher education led movement. I particularly found the diagrams depicting the researcher looking at others (Figure 3.5) useful to perceive another layer of self-analysis in my first two AR cycles. The view of self as researcher (Figure 3.6) showed the dynamic interplay between the self and self as researcher and aptly captured my change in methodology in the AR3 cycle to predominantly individual work with diverse learners. This emphasis honours both self-knowledge (subjectivist) and an objectivist perspective, and the process becomes an organic, dynamic, personal, dialogical yet inclusional approach.

The main theories underpinning the process and analysis of the learning stories were auditory processing and self-regulation. I used the Listening Guide, as a deeper structure to analyse and reflect on the stories from a relational perspective – both objective and subjective of the researcher and co-researchers. I could not fully use this structure to analyse the data as I was too far into the research to make that change. However, as suggested by Gilligan, this is a guide and the use I made of the I-poem and, to a lesser extent, the contrapuntal points allowed the invisible feeling to be made visible and give texture to the in-text analysis.

I explored the historical context behind Gilligan’s work, as it was a paradigm shift in how research was conducted and an early forerunner of research which acknowledges the dynamic of a ‘living’ experience which up until that point had been somewhat ‘voiceless’. I explored the role and process of dissociation as it was a valuable link to the learning concept of disorientation (Section 3.3.7.5). This concept of disorientation helped me to understand the struggle people can have in learning when the feeling and thinking functions of the bodymind are split. Further, such a concept justifies my work to improve the intangible knowledge (feeling) within the action research cycles with the co-researchers.

Laterality and self-regulation (Section 1) are part of my practice model and were highlighted as theoretical influences that informed my professional practice and personal journey.
My understanding of “habitus” is that the concept acknowledges the dynamics of the environment and its effect on self, a form of embodiment on the personal level (Bourdieu & Passeron, 1997). The practical application of habitus is to view it as a dynamic process of working with the inner and outer boundaries of self. I found the work of Pearce (2008) very useful, as it gave much needed credibility to my use of personal stories; could explain cultural differences in beliefs and learning; and how experiences continually shape and modify further experiences in new environments.

Critiquing by critical friends occurred at all stages of the process. I demonstrated the variety of uses I employed in this chapter with the actual application found in the data chapter, in particular Chapter 4. These are insightful reflections from a critical friend who agreed to be part of this process.

The research was approved by the institution’s human research ethics committee and I have explained the ethical aspects of the research. The degree to which the ethical aspects were met is discussed in Chapter 8. Finally, the theoretical aspects of what counts as rigour in SSAR is discussed; the degree to which this criterion has been met is also discussed in Chapter 8.

Figure 3.12 represents diagrammatically a summary of the theoretical influences, contexts, research design and actions to this point in the thesis, within the Kolb learning cycles.

The following chapter is the first of three chapters that explore the co-researchers learning stories. Chapter 4 explores the experience of dyslexia through the learning story of Gm a mature-age postgraduate higher education student.
Figure 3.12 Summary map of Chapters 1 to 3.

**Theoretical Influences**

**LISTENING**
- as a biological process of auditory processing
- as socio-cultural and relational (based on Gilligan)

**SELF-REGULATION**
- A homeostatic process that maintain mind/body balance

**EDUCATION THEORIES/PARADIGMS**
- Humanism
- Constructivism
- Critical education theory

**Context**
- Disability/Ability policy and legislation
- Education policy, practices and legislation
- Dyslexia
- Diverse learning
- Personal perspective and values

**Research Design**

**Research Learning Methods**
- Listening Checklist
- Dyslexia Checklist
- Writing exercises
- Reading aloud
- Technology programs
- Reflexive conversations
- I-poems
- Meta reflections

**Co-researcher learning outcomes**

**Kolb Cycle**
- Think
- Do
- Feel
- See

**AR**
- Group or individual

**SSAR**
- Self and Research Reflexivity
Chapter 4.
The Gm Dyslexia Study

“It need not be conceptualised as a fixed space or essential identity, but as a shifting location that marks the limits of a specific discourse to represent an individual’s social experience” (Beauboeuf, 2007, p. 2). (my emphasis)

This quotation is a metaphor for dyslexia; not as an ‘essential identity’, rather as an invisible identity in our society. My hope is that those diverse learners with dyslexia coming to higher education find a ‘shifting location’ that becomes a dynamic experience and that moves them to other places, experiences, in their development into creative citizens who reach their potential.

In this chapter I outline prevailing community myths, the lack of awareness of the issue of dyslexia in society, and the effects of these on one person studying for a higher degree. Further, I discuss the dangers of correcting left handedness, and have suggested strategies for improving receptive listening. I was able to help Gm develop a deeper understanding of dyslexia. As we worked with her stressors old and new, Gm recognised and expressed her accumulated negative feelings. She wrote about her feelings in a unique and creative way. They provide valuable and unusually clear insights into the experiences of a dyslexic person.

Gm has been placed as the first data chapter, as my original idea was to study dyslexia. Two of the co-researchers were acknowledged as persons with dyslexia. Gm’s story is explored from stress and learning perspective, whereas for the other co-researcher (Supa, section 6.3), our work with the learning effects of dyslexia was overlaid by the experience of PTSD.

My overall aim for Gm was to help to reduce her stress levels, reframe her perception of dyslexia, and help her develop new strategies for receptive listening, while from a self-study perspective observing my own listening process. For co-researchers entering the project, my usual process was to send the two checklists and a handout to assist them in developing their action plans ahead of any face-to-face meeting (Appendix 4). Gm’s circumstances were different, as she was directly referred from the learning assistance department at the university and needed help immediately. The learning support person (LSP) had been assisting Gm with her writing issues and recognised Gm’s deep distress. LSP thought was nearly to a point of breakdown, and felt that “she would have nothing to lose” by meeting with me, despite not really knowing what I was doing in my research.
Gm and I had six face-to-face conversations and one telephone call, between May and November 2008, and by then she was nearing completion of her essays and report writing. The essays had taken her twelve months to complete following the end of the course work. She was working under pressure and conflict while maintaining her fulltime work role.

4.1 The Background Story

Gm’s journey through dyslexia was revealed by her stories of early childhood and later life, particularly the impact that society’s lack of awareness and inability to appreciate her different learning style has had upon her. Her mother, a former teacher, changed her from being left handed to being right handed. As a child, teachers could not accept her intelligence and at one stage accused her of cheating. As an adult, friends cannot appreciate why she can be so engrossed in a TV program and how she can completely switch off her listening to the outside world. When I met her she was completing her Masters course and was deeply stressed with the continuously conflicting demands of lecturers involved in guiding her writing to complete her papers. In the face of all this adversity, she has revealed remarkable resilience and perseverance in an all-out effort to meet her goal of completing her Masters. Gm, who had been in science for 20 years in a technical capacity, was feeling she was getting nowhere and had become disenchanted with science. Her reason for change: “…their patriarchal male dominating world. I needed a change. What do I really want to do? I really did some soul searching... I’d like to do psychology and that sort of thing.” (Gm 3, 2008)

She did a social science course because she thought it was part of a psychology course, having misinterpreted the information. She is a ‘people’ person who enjoys networking, and she was motivated to know more about the way people’s minds work. Despite her disappointment in not learning more psychology, she completed her degree in two years while working full-time. She was offered a one-year Masters course in science, but took her a further twelve months to complete the writing tasks. She was confused right from the start about what the requirements in the course were.

Gm: They wanted an essay that’s what they told me. But they didn’t want essays they wanted scientific reports! … I gave them essays and they didn’t like me giving my own opinion. (Gm 3, 2008)

Having two lecturers continually ‘correcting’ her pieces of writing was humiliating. She described it as

Gm: going backwards and forwards, backwards and forwards …with them not happy with it and them not telling me what they actually want. (Gm 3, 2008)
Her frustration was building and she expressed it: “You feel like saying **!!! Then you write it then!”’ There seems to have been little communication with these lecturers. She finally got the idea of how to write scientifically, but the stress and confusion took a toll on her:

Gm: I completely lost all ability to string a sentence together [it’s about] the linking thing, it kind of all went as I was caught up in what they actually wanted. I think I’ve got it now! (Gm 3, 2008)

This story stands as a tale of confusion and conflict. Firstly, the conflict of coming from an undergraduate degree in social science, where writing with opinion was acceptable, to a science department, where opinion was unacceptable, had been a shock. She was also dealing with the difference in methods used to help her with the writing in her Masters. At one stage three lecturers were telling her different ways of doing the writing. I was alarmed by the level of disagreement between them. To keep going under these circumstances for such a length of time, while continuing to work full-time, shows a high level of perseverance and determination, and a high value in completing things.

Gm: I’m determined to finish it….I’ve still got two essays and two reports to finish. I’m still doing that. I’ve nearly finished the first one and I’m rewriting the second one again and it’s going to be a perfect rewrite and it will be exactly what they want with none of my diversions. (Gm 8 2008)

What cost does she pay for her determination and ‘stick ability? Is her resilience enough?

4.1.1 The first meeting.

At my first face-to-face meeting with Gm (Gm1 May 2008) I went through the starter papers; the call to participate and the informed consent form (Appendix 4). For the third AR cycle I had designed a handout to explain to co-researchers how an action learning cycle worked and to give instructions on how to prioritise five items from the Listening Checklist (Appendix 5) ready for the meeting. The idea was that once I had their written responses I could focus on developing ‘codes’ which would be the basis for the development of any action learning. As noted earlier, this material was usually both forwarded by email and replied to before the first meeting. Gm was clear that her priority was to improve her receptive listening. Later, as the conversation developed, I found that receptive listening had been her dominant issue right from early childhood.

4.1.1.1 Reflections on first meeting.

The initial meeting where the main direction of the work was set out was hampered by this change in protocol. I had to verbally develop a plan with her even though she had not seen the concepts prior to the meeting. Listening back to our conversation, I perceived myself making
many suggestions and tending to over talk, which possibly showed my anxiety. Nevertheless, we did not settle on any action to take after that meeting. She was very clear about her priority: to improve receptive listening. My manner of working with her was each time to listen carefully and to reflect back to her my suggestions for action, which generally she acted on.

4.1.1.2 Main features of the following meetings.

Gm completed the handout work at home, chose her five priorities from the Listening Checklist and returned them by email as short poetic scenarios. These written responses are distributed throughout the chapter, in boxes numbered from 1 to 5 in the following sections:

- Box 1: ‘What word is that?’ (Section 4.3.1);
- Box 2: ‘They made me right handed!’ (Section 4.3.2);
- Box 3: The “Vagueing” (Section 4.3.3);
- Box 4: ‘What is the time?’ (Section 4.3.3.1.2);
- Box 5: ‘What is he asking?’ (Section 4.4).

These responses represent the main issues she experiences in listening and dyslexia, and give a direction to her unfolding story. Wanting to go with her strength, we agreed on a plan for her to write again, in poetic scenarios called Masters 1 and Masters 2, about her protracted experience of the conflict with the disciplinary writing. (Gm 2 2008) These poetic scenarios are found in sections 4.2.1 and section 4.4.2.2.

By the last meeting seven months later she was revising her last paper and was in an awkward period of “waiting, waiting for feedback” on her other submitted papers. (Gm 9 November 2008)

4.2. Gm Learning Stories

4.2.1 Growing-up learning stories.

A critical friend, an educational consultant who works privately and lectures part-time in a tertiary setting, was asked to provide reflections on the Gm stories. I sent all Gm’s educational stories by email in late 2010 and his reflections were returned in January 2011.
4.2.1.1 ‘You taught me better that day!’

Gm: I’m about 16-17 (Y10) and I didn’t get on with the Maths teacher. He thought I was trouble coming in the door and he was teaching us all about um statistics. We’d done statistics no, surveying, the month before, and I’d got a really good pass mark because I’d asked the why questions. I thought it was useful. I actually got a really good mark in the test and he stood out the front and started accusing me of cheating. Before that happened we were doing Pythagoras theorem and I was asking lots of why questions and he said you did really well in that test you must have cheated…I turned around and said: “No, you taught me better that day!”’ His reply: “Ok out you go!”’ (Gm 5 2008)

Gm was motivated to work hard to get a good mark in surveying because she considered it a useful subject, recognising it had practical application. Does it say something of her learning style? The teacher was frustrated because he may have already answered some of her questions. To accuse her of cheating in front of the class without any justification is reprehensible.

I asked Gm what she learnt from that experience.

Gm: Um, not very [laugh] much after that because he banned me from the class for a month. I was reading out of text books and stuff like that. I had to because he kicked me out, the upshot of answering back to the teacher. And [his accusation] of you ‘cheated’ I’ve always got that whenever I did well in a test. (Gm 5 2008)

The written reflections of a critical friend Z follow.

Z: a power play between the teacher and the student where too many questions is seen to threaten the teacher. As someone from a Jewish background, I can resonate with that experience. In Jewish culture one is encouraged to ask questions and to enter into debate, but not in Anglo culture. I’ve often felt that this [is] a real threat to the teacher, who is supposed to be in charge and in control. Such questions can make these teachers quite insecure because it gives power to the student. (Email reply January 8 2011)

The next story is an example of being wrongly accused of cheating.

4.2.1.2 ‘The Periodic Tables Test’.

Gm: I told you how I knew all the elements in the periodic tables before I was four years old because my mother was a science teacher and she used to quiz me on them.

There was a big test where they assess you for what class you’re going into and how smart they are and I got something like 99% on that test that I did. I was put in with my girlfriend we were in a kind of F class a very low class … it was a big school 2000 students basically and in that year… They came around in front of my class and accused me of cheating in the exam because there was no possible way I could have got such a mark.

I was only in Y7. It was very embarrassing and like to my credit I stood up and said retest me again you’re doing it on the elements and I know them! So they pulled me out and made me sit another test outside the classroom which was even more embarrassing. I could hear my classmates saying things like ‘She’s in trouble now!’ I passed that test and they had to stick me in the top class, saying well maybe she’s bored…I’ve never cheated. (Gm 5 2008)

4.2.1.2.1 Reflections from Z on the accusation of cheating.

Z made the following comments on this story:
This same pattern... she was here penalised for knowing things that she couldn't possibly know, according to the judgement of the teacher. Again, if the teacher hasn't taught this material to the student, then how can she know it? She must have cheated! This is a story of power and control. Many teachers dislike creative drama for similar reasons, because it gives the control back to the student. The embarrassment and humiliation that the student experienced by being accused of cheating once again placed the control and power back to the teacher. This perception of power is something that can be lost if students are knowledgeable in ways that don't involve the teacher as the source of all knowledge and wisdom. So what I detect here is a need for teachers to be in control, but also for the students to fit into the agenda of the teacher and not ask too many questions and not know too much. These are power issues that reflect on the ego of teachers, which can be highly inflated at times because in the school or university setting they are the 'stars'. There's also the power of the institution that expects the student to pay money and pass courses but not be too much of a bother to the institution, as someone with dyslexia may be perceived to be. After all the tertiary learning world is dominated by text based and literacy based learning. There's an implied message here: 'If you can't read, what are you doing here? (Email reply January 8 2011)

I was reminded of a practice story of a mother of a young dyslexic child who was failing in the system. She was agonising over whether to have him repeat his first year and decided to because he was a small child. Gm interrupted me to give important information.

Gm: I had to repeat Y2 and you lose all your friends and doing the same stuff again and you feel so stupid. Bored and get into trouble when you’re bored.

Kay: When I first met him he was doing a phonics program and when I showed him the letter ‘A’ and asked for the name of the letter, and what sound it made, he didn’t know. He was confused between the two systems of learning to read [whole word versus phonics]. For me it seemed ridiculous to work in this way with a dyslexic child [He could not discriminate sound so how could he do phonics at that stage].

Gm: Of course if you make people feel stupid!

This triggered her back to her Y2 experience, which may have been her first awareness of socially feeling stupid and humiliated.

4.2.1.3 ‘Spot has a ball’: Stopping reading in Year 2.

Gm: I couldn’t read for a long time because of the experience I had with reading. I know I was slow, it must have been in the first or second class when they made me read ‘Spot has a ball’... Quite frankly I didn’t start reading again until I was in Y7 because of that.

Kay: Can you remember what it was like? Did you get a funny feeling in your head?

Gm: I did, it was kind of like everyone is looking at me and everyone thinks I’m dumb or incompetent or... and everyone is looking at me and then you have to sound out the words and everybody is looking at me. Oh my god, not only do I have to read a boring book about Spot, nobody has to read if I was forced at gun point. Like your mind is going somewhere like being ripped off you. I still get that feeling every now and again it’s kind of like a shiver up your spine a few painful memories of Spot the dog. (Gm 5 2008)

And the rebellion started from there and she did not read again until she was in year 5.

4.2.1.3.1 Reflections from Z on stopping reading.

Once again Z commented about this story.
Z:  [It] seems to be a theme of ‘trap and escape’ here. Also ‘innocent victim’ and ‘almost, but...’ and ‘against all odds’ and similar – but not much celebration of what appears to have been a number of successes along the way … I’m not sure what questions stimulated the reflections/comments, but the speaker does seem to be more focused on ‘what went wrong … rather than what went right. This may be an inevitable outcome of the earlier experiences of ‘cheating’. A very tough challenge for a young person and handled well it seems, but probably leaving a sense of betrayal by adults and a ‘waiting to be in the wrong again’ mode of ‘deep thinking’ [unconscious assumptions]. (Email reply January 8 2011)

4.2.2 As an Adult: A learning story: First time at university.

Gm:  You’re giving me more power, you’re helping me to overcome some of my strange little oddities and reflect more on myself. I love our sessions, it’s empowering. (Gm 3 2008)

The following story of her early HE experience was orally told in the fourth meeting (Gm 4 2008); in a later section (4.4.2.2.), the story and dilemma of writing her Masters is presented as prose.

Gm:  I did it by correspondence at X University. Everything was set up against me. What I applied to do was all first year easy [science] subjects which I thought would be nice and easy to ease me in. Then they moved me into second year subjects until I got down there for my residential … I was 6-8 weeks behind everyone before I started. [she did not get the subjects she had chosen, rather] … They put me into genetics and statistics! (Gm 4 2008)

Next are the written reflections from Z on the above part of the story:

Z:  reveals a lack of awareness of the needs of the student and a sense of let’s get them through as quickly as we can without any real concern for what the student was asking for. Contemporary western forms of education seemed to lack any sense of processing time or integration time. For students with dyslexia, or any other learning challenges, this would just add to the challenge. What interests me here is that the student is studying science subjects, where one would think that the depth of understanding would be the focus rather than the ability to manipulate text. Especially given that the language of mathematics and formulae are used in many science subjects to communicate ideas. (Email January 8 2011)

The story continues.

Kay:  Are you saying you didn’t get the choice that you actually asked for? You were doing that in order to get a feel for what university would be like?

Gm:  I was only 20-22 year old they based their assessment of me on what I’d done before and my time in science already … without consultation. So that was a shock that they didn’t send me anything, they didn’t give me anything like the external students here they give you everything. They may sometimes be a week or two late but you can deal with that but …it was my first residential I went down getting me things … I got a letter the week before telling me when the residential was on and that was it. [laugh] I stuck it out for the full 6 months until half semester but I didn’t do … Because I went away on holiday in between time and I missed a full residential as well which meant automatic fail. I tried to make up the time I just couldn’t do it. (Gm 4 2008)

Kay:  And so in terms of study habits was there instruction on how to work?

Gm:  This will take 140 hours, 300 hours or whatever but they didn’t… and they sent me tapes, which was fine for some of the subjects. Oh, but for statistics it was painful, a monotone voice without inflection and it was talking about the worst subject you could possibly think of statistics maths! I do like maths but I couldn’t handle that voice, it would literally put me to
sleep. Oh, I hope it goes in while sleeping because I’ve finished the tape and I’ve been asleep the last half hour [laugh]. (Gm 4 2008)

Kay: So you had six months, you didn’t do the workshop and that was enough?
Gm: I actually did the exams hoping to make up the time from the residential [which she had not attended]. I went to lectures and stuff like that but ended up failing everything.

4.2.2.1 A reflection from Z: First time at university.

Z: Hardly an example of effective teaching strategies on the part of the university! Often this is a problem I’ve heard discussed around the delivery of lectures and tutorials at university, where the teachers don’t have training in teaching strategies. They are there because of their research interests and the teaching is seen to be a distraction from their ‘real’ purpose. It would seem this student was a victim of these limitations of universities in general, as much as her own lack of confidence because of her experience of education and her dyslexia. (Email reply January 8 2011)

Gm loves science; when she was dismissed from a class in statistics in Y11 (Section 4.2.1.2), she was sufficiently motivated to learn maths on her own. Yet as an adult in her first university attempt, as an external student, learning statistics through audio recordings, she fell asleep because of the flat monotonous voice of the instructor. This can be explained by the theories of the voice-ear-brain connection, as described by the work of Dr Tomatis (1996). In this response, there is a dual connection between a flat voice and the available auditory frequency range in the ear of listener. The listener may not grasp a flat sound, one with little resonance, and so may experience this as a lack of stimulation through the ears, consequently falling asleep.

4.2.3 Present study: Being ‘Let down’ and waiting. Is supervision a relationship?

In the Gm 4 meeting 2008 she identified an on-going difficulty with one lecturer, who ignored her requests to provide feedback on the writing she had sent in months earlier.

Gm: I knew she was going on holidays. That was fine and [when] I saw her around… knew she was back, I sent email after email and it dragged on weeks and then months. She was supposed to have read what I sent her and gives me some feedback.
Kay: Did the lack of feedback put you into a black hole?
Gm: Exactly, even a little response like ‘I’ll see you later’ I even went and saw her and she kind of brushed me off with ‘Oh I’ll see you later’ and then never bothered you know.
Kay: What I hear, I’ll just run this past you, is the expectation of a relationship.
Gm: Well yes well you know you expect…Even some acknowledgement – months and months… I still don’t think it’s finished, it’s dragged on all this year. It’s painful! I’m just waiting for one subject now.
Kay: Waiting for them to give you the result? You can’t move on?
Gm: No I’m trapped.
4.2.3.1 Reflections.

Did this lecturer intentionally avoid Gm? If this was just one incident, then I would not be concerned, but the other co-researchers had similar experiences, not quite as extreme, of lecturers avoiding giving feedback (Section 6.2). Does it suggest poor human relations, a lack of experience and knowledge of diverse learning styles or was their insufficient department infrastructure in place? If the lecturer was struggling, could student support be involved earlier?

Z: Reflects a feeling that the staff are not interested. Not giving feedback, not being willing to meet – perhaps it's a case that unless the student is an ace performer, why should we bother with them? Of course this is a phenomenon that pervades much of education, not just universities. Teachers like students who perform well because it reflects on their teaching abilities. This is further exacerbated by the 'My School' website idea, where schools are judged on their level of performance, which makes education more a process of jumping through hoops than real learning. (Email reply January 8 2011)

4.3 Identifying Gm’s ‘Symptoms’ of Dyslexia

I start this section with two divergent quotations on dyslexia which have a common theme of self and consciousness.

Dyslexia is a product of thought and a special way of reacting to the feeling of confusion (Davis, 1994, p.8).

Self-image and self-mastery…the dyslexic is a child who is not well-balanced or harmonised in terms of bodily efficiency with the functional structure of this organisation (Tomatis, 1978, p.59).(my emphasis)

Tomatis’ quotation powerfully speaks of a ‘balance model’ involving a whole body efficiency which includes the vestibular processing through the voice-ear-brain.

4.3.1 A problem with words.

Below is Box 1, the first of the five written priorities Gm chose from reading the Listening Checklist. She returned them as short poetic scenarios.

**Box 1**

What word is that?
I see the blackboard in front of me.
I feel confused, the words seem un-comprehensible.
I think about only one word
What is it?
I know! I know this word!
I feel silly but urgent.
I ask my friend to tell me
The word dyslexia comes from the Greek words ‘dys’, meaning difficult, and ‘lexia’, meaning speech ("dyslexia," 1984). Another deeper meaning from Tomatis (1978):

the Latin word for ‘to read’ (‘legere’, as in lecture), goes back to the ancient meaning ‘to harvest or gather through the ear’. Similar to the Greek ‘lexis’ with the variant of ‘duslectos’ which evokes with even great clarity a speaking disability (p. 59).

A definition of dyslexia then is about the inconsistency of the auditory and visual perception of certain words and letters. For example, dyslexic children may see and write b and d inconsistently for years, each time feeling unsure and doubtful and is explained as an internal sign of disturbance and a strategy is needed to get around the problem. An example of a strategy to decide which is the left and right side orientation is to hold up both hands and focus on the thumbs and first fingers to see which looks like an ‘L’ is then this must be the left orientation (Richards, 2008). Such strategies are a temporary gimmick and must be continued indefinitely as the issue behind the gimmick, laterality, has not been mastered resulting in continuing slower perceptual processing.

Reading aloud in front of people is very painful for most people who come to my private practice, particularly the three hundred people with dyslexia I’ve intensively tutored (Personal communications between 1997 and 2012). Usually, the focus on each single word may start an obsessive, intensive process. In Gm’s this was a disorientation process which she called “the spotlight”. Such intensity means that the person may never develop flowing reading, runs the risk of losing the context of the reading, and develops a habit of needing to continually reread. The latter happens particularly when Gm reads scientific texts or, as expressed below through her prose, when she experiences the humiliation and frustration of not recognising a usually known word.
4.3.2 Brain Laterality.

4.3.2.1 Handedness and forced change.

Below is Box 2, the second of the five written priorities Gm chose from reading the Listening Checklist.

**Box 2**

<table>
<thead>
<tr>
<th>They made me right handed</th>
</tr>
</thead>
<tbody>
<tr>
<td>I see my pen removed from</td>
</tr>
<tr>
<td>My left hand to my right hand.</td>
</tr>
<tr>
<td>I feel angry for the disturbance to my writing,</td>
</tr>
<tr>
<td>I feel frustrated and uncomfortable.</td>
</tr>
<tr>
<td>I think about continuing writing,</td>
</tr>
<tr>
<td>I think my mother looks happy to see me writing with the right hand.</td>
</tr>
<tr>
<td>I write with my right hand</td>
</tr>
</tbody>
</table>

Gm May 2008

“If you’re left handed you are… associated with the devil!” (Anything Lefthanded, 2010, 1).

Ancient images showed the devil as left handed. In the Christian tradition the Bible was biased towards right handedness. For example, the right hand is used for blessings and the sign of the cross. Looking in detail at the Bible revealed 100 favourable comments for right handedness as opposed to 25 unfavourable comments for left handedness. There is a similar emphasis in Judaism and Islam. Islam associates the left with the unclean. It is thought that this stems from the Middle Eastern custom of using the left-hand and water instead of toilet paper – the origin of the term ‘cack-handed’ (Anything Lefthanded, 2010).

Unlike other quantitative research on handedness, such as Knecht et al., (2000), who did not take individual differences into account, Cherbuin (2006) focuses on the internal individual processes of his participants. For example, he attended to sex, age, handedness, functional lateralisation, attention, and hemispheric activation. By measuring inter-hemispheric transfer time and hemispheric interactions, Cherbuin found, surprisingly, that people with dyslexia have an abnormally fast inter-hemispheric transfer but at the same have time attention deficits, thought to be because of the inefficiency in hemispheric interactions. Further Cherbuin (2006) believes that hemispheric activation will become important for neuropsychological research, and has suggested a simple tool to measure the sounds coming from each ear, which could be used by practitioners for cognitive experiments (p. 113). This
research is breaking new ground, for example why it may not be a good thing to change handedness, and could potentially shift our perception on handedness and eventually shift our practices. It also gives more credibility to technological programs which are working on the neuro-plasticity of the brain. For example programs using modified music and sound through air and bone conduction (Madaule, 1993) and using modified speech (Merzenich, 2004).

Gm spoke of being left handed as a child. She said:

Gm: What it means I’m sort of ambidextrous but can’t write with my left hand. It was frustrating; my mother was the one that did it to me as she was a teacher. I can occasionally stutter and I used to write letters back to front, it wasn’t intentional.

These symptoms – “sort of ambidextrous, occasionally stutter, write back to front unintentionally” – suggest that the hemispheric dominance, or laterality – the word used usually for functional asymmetry – may not be well established in either the left or right hemisphere. When under stress, the shift will go right brain (no right ear advantage), the affect side and is typical for people with dyslexia. Either of these two options may mean less efficient functioning, such as immaturity, poor executive function, vulnerability to mental imbalances and stress (Tomatis, 1978). The research of Cherbuin demonstrated “that both faster inter hemispheric transfer and more extreme left-handedness are associated with greater efficiency of hemispheric interaction” (2006, p. 11), and that people with dyslexia will have an “…abnormally fast transfer but also an attention deficit due probably to decreased efficiency in hemisphere interactions” (2006, p. 11). A forced change in handedness such as Gm endured as a child may have been exacerbated her laterality. Some history and understanding of hemisphere dominance and how it is connected to handedness are now given to further explain the importance of not changing the handedness of the person.

4.3.2.2. Hemisphere dominance theory.

Early research focussed on a more structural model of an asymmetrical brain. The early work of French physician Pierre Broca (1824–1880) discovered an area involved in speech production situated on the inferior frontal gyrus of the brain and went on to demonstrate that stroke victims with lesions on the left hemisphere lost the ability to speak.

Recent functional research has confirmed the relationship of the Broca area to language development by showing the location and the timing of the firing of the neural pathways by a thought of a single word, changed its tense (for verbs) or number (for nouns), and articulated the word silently. For these three stages, [researchers] detected activity at 200, 320, and 450 milliseconds…. [the] data fit neatly within the
roughly 600 milliseconds required for the onset of speech and map the distinct neural computations (Hagoort & Levelt, 2009, p. 372).

During the 1960s the functional experiments with epilepsy patients of Sperry, Gazzaniga, and Bogen (1969) were ground breaking because they showed how the two hemispheres, despite being disconnected from each other, were still functional. Sperry (1981) showed this effect by placing a barrier to restrict the subjects’ visual field so that they could not see objects on one side. When asked to feel for the objects through the barrier, they could touch the ones they reported not seeing (Sperry, 1981). This explains some of the perceptual confusion that can be present when non right ear advantaged (non REA) people are not utilising their Broca area, particularly when under extreme stress. With the advent of functional magnetic resonance imaging (fMRI) and other similar technologies, researchers can now see events in real time. The paradigm has shifted to include and pay attention to both structural and functional aspects. For example, Springer and Deutsch (1981) showed that the right hemisphere is more specialised for the processing of spatial relations, while further research by Springer and Deutsch (1993) talks about the right hemisphere having an emotional connection. This means that when there is no REA, as research has suggested with dyslexia (Aylward, 1984), the person is likely not to have their strength in this area and is likely to have some form of language deficits (Hugdahl, 2009; Molfese et al., 2006).

With the shift to functional aspects of the brain, researchers have observed an increasing incidence of right-hemispheric language in left-handed individuals (Knecht, et al., 2000). To clarify the relationship between handedness and language dominance in healthy subjects, researchers measured the functional aspects of brain asymmetry (lateralisation) of 326 healthy subjects by using a word recognition exercise and mapping it on a sonagraph. They found that the incidence of being right hemisphere language dominant increased linearly: 4% for strongly right handed people, 15%; for ambidextrous individuals, and 29% for strongly left handed people. Most importantly, the research demonstrated that the relationship between handedness and language dominance is a natural phenomenon and not pathological (Knecht, et al., 2000, p. 2516). This supports the notion of not changing the handedness of a person. Gm was forced to change her handwriting.

A Scandinavian research laboratory takes a view of dyslexia as a biological deficit, caused by both structural and functional brain abnormalities (Hugdahl et al., 1998). By structural brain, they refer to the early research work which posited the idea of fixed split brain mirror symmetry. For example, the hands are close to a perfect mirror image but they are
asymmetrical in function: 90% of the population prefers the right hand for manual activities, fine motor skills and motor strength (Hugdahl, et al., p. 119).

The Scandinavian review focused on central auditory processing in dyslexia, and the possibility that impairments in the auditory features of the phonological code may be at the heart of the differences seen in dyslexia. If handedness is changed then the person could increase their functional differences. Their research used three different methodological approaches to investigate the central auditory processing deficits. The most commonly used approach involves dichotic listening to consonant-vowel syllables. This technique seeks the functional status of the phonological processing areas in the superior temporal gyrus. The left hemisphere is particularly targeted in order to find if there is a right ear advantage (REA). The second approach traced and measured any anatomical abnormalities in the same brain region using MRI. Event-related potentials revealed if there were any cortical dysfunctions in sensory processing and memory related to basic acoustic events.

The research showed differences in dyslexic children compared to the control group. The dichotic listening test is used to assess the function status of laterality. It can be most easily demonstrated by a subject listening through a headset to a word or a sentence broadcast to both ears at the same time, the task being to decide which word comes to which ear first. In this study subjects were instructed to force their attention to listen to one ear and then the other. This forced listening resulted in no change to right ear advantage (REA), despite the enforced shift of attention (Hugdahl, et al., 1998). This goes some way towards explaining the natural tendency for laterality of the dyslexic individual: to be either left ear advantage or to not have a strong preference for either ear when under stress (Knecht, et al., 2000). This is a most important reason for diverse learners to be working on their stress levels in new challenging environments in order to minimise disruption to those functions normally carried out by having a REA namely language and cognitive abilities.

4.3.2.2.1 An example of non-right ear advantage.

What did Gm think about the idea of right ear advantage?

Gm: If I’m really tired I don’t read. Sometimes I get stuck on small words. It’s frustrating. Words like; ‘and’ ‘form’ or and ‘from’ [what one?] I get it all the time.

Sight words are given much attention in early learning and yet they are the most inconsistently recognised words for people with dyslexia. Part of the issue is that, when under stress and poor lateralising, the visual mode cannot give a mental picture for sight words because the words are generally abstract concepts (Davis, 1994, p. 65). Sperry (1981) showed
a similar spatial disorientation with visual perception. When the person does not perceive the small words, they cannot use language effectively and have less cognitive understanding.

The dual coding theory (Pavio, 1990) was the first to develop the idea of two main types of cognitive learning styles from the functional aspects of the left right brain (Springer & Deutsch, 1993). The two main types of thinkers suggested were the verbal conceptualisers (with REA), who process language through the left brain, and the non-verbal conceptualisers (have no REA), whose processing of information goes via the right brain functioning.

Thus people with dyslexia are more likely to be non-verbal conceptualisers, to have less language spatial attributes and to be more likely to ‘see the movie in the mind’ (Section 6.1.2.2), which Silverman (2000) classified as a typical visual/spatial dyslexic phenomenon. Another example: when a sight word is seen in a text and not pictured, the non-verbal conceptualisers processing would halt, leaving inconsistent understanding (Davis, 1994).

Regarding what Gm said above, it sounds as if when stressed and tired, she may get more ‘bogged down’ (disorientated) on sight words as the hemispheres lose connection and process more slowly. The following section goes into the detail of Gm’s perceptual distortions.

4.3.3 Understanding perceptual distortion.

Gm used the term “Vagueing” as a way of explaining the gap she experiences when two sound sources collide in her brain; her ears are unable to focus on both and so she cuts off one source.

Below is Box 3, the third of the five written priorities Gm chose from reading the Listening Checklist.

**Box 3**

<table>
<thead>
<tr>
<th>The Vagueing</th>
</tr>
</thead>
<tbody>
<tr>
<td>I see the TV.</td>
</tr>
<tr>
<td>I seem to enter the program.</td>
</tr>
<tr>
<td>I hear my friend’s voice raised.</td>
</tr>
<tr>
<td>I struggle to understand the angry words of hurt.</td>
</tr>
<tr>
<td>I feel confused by the issue.</td>
</tr>
<tr>
<td>I seek clarification of the issue, I find</td>
</tr>
<tr>
<td>I didn’t acknowledge a request.</td>
</tr>
<tr>
<td>I think how</td>
</tr>
<tr>
<td>I have behaved is neglectful and selfish.</td>
</tr>
<tr>
<td>I feel embarrassed and sorry.</td>
</tr>
</tbody>
</table>
I act to try to not become so engrossed in what I’m viewing, and to try to listen to my friend. Gm May 2008

Results from dichotic listening testing (Bellis, 2002) show that when two competing sounds are presented, some people will be unable to comprehend both sounds at the same time. This is part of the issue, but also there is often a time lag between the people focussing their ears to receive the sound from another person. This slowness is in making an auditory perceptual shift to another channel. The Vagueing expresses the experience of merging with a sound/visual source – to become ‘one with the TV program’, as if it is the only reality. When another sound – the partner’s request – comes in, she could not understand it even though it is in conversational language.

Gm said in her written work (Box 3) that she had behaved in a neglectful and selfish way and felt embarrassed and sorry when this happened. I wondered which voice was speaking. Was this the “critical parent” (Berne, 1968) part of her personality? My ‘felt-sense’ when she said this was that it seemed a little harsh and judgemental of herself. To broaden her understanding, I described my interpretation of Vagueing through a snapshot picture of my experience as a child:

I am five years old, the little sister with a BIG brother who sits ears glued to the radio listening to Biggles, a story about flying. I learnt quickly not to talk or attract his attention in any way when he was listening to his serial. I would not know what would happen. He was likely to explode and hit me! It was like walking on egg shells when he was immersed in the Biggles world. His transition back to this world was often violent. (Kay, July 2008)

Was he selfish and self-centred? I think not; this was his one channel auditory processing modality. Why is it that many people with dyslexia do not like to or will not read aloud? Is it because of early experiences like Gm recalled of being forced in year 2 to read aloud? She learned to read through graded readers but blames this incident for being stilted as an adult as she reads aloud. However, the underlying issue that leads people to be confronted by text and maybe stumble or go blank, panic and get stressed, can be because their auditory/visual perceptions are unreliable and can unknowingly distort, partly because of a lack of hemispheric interaction. Seeing is as a visual issue; the early work of Helen Irlen named this phenomenon Scotopic Sensitivity Syndrome (SSS). Once the brain has programmed these distortions in, it will continue to cause the person to distort every time they see those particular letters or combinations of letters. Irlen’s way of intervening in the process was to
test and find the colour that gave the person the least amount of distortion, and then have them wear glasses made with that particular colour in the lens. Although it is possible that visual stress happens in varying degrees, to many people with dyslexia, the effects may be made worse because of slow reading or lack of automaticity in reading text, forcing people with dyslexia to adopt strategies which involve more intense visual scrutiny. What I have described above seemed to be similar to what happened to Gm when we did the reading aloud exercise (Section 4.3.3.1).

Visual reading stress is non-regulated and it can go from high stress with no effect to the likelihood of migraine-like headaches or epilepsy-type symptoms and to photosensitivity. This can result from the build-up of continually trying to get the distorted perception under control in the reading process. A neurological explanation of visual stress is that it is a “cortical hyper-excitability” caused by pattern glare (Wilkins, 2003).

One dyslexic mature student (AD) who attempted to come to the AR1 group was struggling with fatigue from her study. She was earlier in her study officially diagnosed as dyslexic. The staff in the disability unit recommended she attend a consultation regarding her visual stress, which she did. At that meeting they discussed the use of colour lenses, however, she left not understanding how the coloured lenses could help her. As a creative artist, she was curious to find out how her sense of depth perception was different from that of the practitioner.

[the practitioner] pointed something out and I said: ‘Can’t you see that? Is there something wrong with you that you can’t see the 3D of that?’ And even looking at something in the room I saw much more depth than she did. (AD November 2006)

Typically people with dyslexia can have holistic visual states which for them are second nature. This is what was happening here: that others may have different perceptions to her was a completely new idea.

Figure 4.1 is a representation of how visual perception can change over time, depending on the level of the visual stress, and can point to health issue that may ensue. adapted from Singleton (2007, p. 38)
Figure 4.1 A suggested Threshold of Vulnerability to Visual Stress.

A recent study by Singleton and Trotter (2005) suggested that visual stress is 2 to 3 times more likely with children and adults with dyslexia. However, improvement in identifying visual stress using a computerised visual search task makes for a more objective and valid method of identifying children and adults who are susceptible to it (Singleton, 2007, p. 40).

When first introduced, the social aspect of wearing coloured lenses in class meant many children did not want to wear them. They just want to fit in; they already know they are different. Standing out as different wearing colour glasses may bring attention and even bullying.

### 4.3.3.1 The importance of reading aloud.

Initiated by Gm, she asked if others see the text highlighted behind the letters. We explore this by reading aloud so I could listen to her, and then I follow up by introducing another reading technique. This is a good example of how my knowledge of the reading process can help adults. I start with her reflection after the experience, which was profound.

Gm: When I read I get the spotlight. What we did, the reading aloud exercises [See below] it was helpful because I discovered that I was actually missing words when I read. By using another method, covering the words and running my finger along as I read aloud, I actually found I was missing words and full stops! I didn’t know I was doing that before and not really reading the word correctly I was either missing the ‘s’ off the end or?? … I lost the spotlight – because I am slowing myself down and I don’t need the spotlight to focus. (Gm 6 2008)

What she described as the spotlight was an old solution—her way of getting herself visually focused—but it evidently was not working well for her any longer. I wanted to see if we could work out an alternative option. The process I used was to get her to re-read the same piece but to cover the words with her finger and reveal them one at a time as she read aloud. My assumption was that if her intense visual focus caused the symptom of the spotlight, it was like an overheating of the visual pathways. By using her finger to hold the visual focus while reading aloud, the auditory pathways could be activated and the possibility of new integrating
pathways develops. She then said that she does cover the words sometimes too, as the other words distract her; then if she does not do this, the spotlight happens.

This is what Davis (2003) describes as the start of the disorientation process, as the other words distract her and lead on to more and more intense focussing, which itself brings more distortion of the spotlight. It was possible to discern the difference in Gm’s voice: the hesitant first voice – when the spotlight appeared she said: “… as soon as I got to the second one [line], that’s kind of blurriest, kind of weird.” (Gm 6 2008) The second time she did this exercise, when she used her right hand to deflect the sound to the right ear and tracked with her finger, there was more flow as she read. I stopped her and asked her what was different, now the spotlight had gone, and I asked her about comprehension as her speech had slowed considerably as she read aloud. She explained comprehension as simply losing the sight words.

Gm: Reading has always been difficult for me and some words like ‘and’ ‘but’, that I don’t know what it means in these times. (Gm 6 2008)

She had picked up that it was the sight words ‘and’ and ‘but’, which cannot be pictured in the brain, which are not mastered or integrated into her system. The confusion which follows such non-integration leads to a loss of comprehension. I suggested that when she gets to one of these sight words where she loses focus, to say the word extra clearly and loudly. My rationale was that it may be possible for the auditory function to switch on, particularly when the word is spoken loudly, to focus the visual system and avoid losing comprehension.

At one stage I stopped her when she went past a full stop. Using the finger to track the eyes is a helpful strategy because as soon as something is missed, like that full stop, your comprehension is likely to decrease if the person goes on. I asked her a reflective question at this point: What is the main point or what is something that strikes you from what you heard?

Notice that this question appeals to both kinaesthetic and auditory systems, because the reading aloud would have activated and moved towards a more balanced system of the auditory and kinaesthetic areas of the brain (Bandler & Grinder, 1983).

She got to the point of the reading but then wanted to revert to rereading the text. I did not allow this, by asking her to get an internal question activated rather than rereading. I think the reread often represents a compulsive old solution, reverting back to visual mode, away from auditory that gets triggered when the person feels they are not understanding. It possibly is the point when her spotlight has been activated. Usually, it is those little words she mentioned (and, but, etc. – the sight words) which cannot be made visual and which cause a triggered reaction to ‘reread’ or ‘concentrate’ more. What can happen is less concentration, which is the
start of a deeper, downward cycle of more and more confusion and less understanding. In the next section I reflect on what took place.

4.3.3.1.1 Reflection and analysis of the reading aloud.

I asked Gm to return to the place in the text where the disorientation started, because it was possibility the place where the main concept is located. If so, then it will become easier to recognise and comprehend the text as the reading aloud now would act as an integrating factor. I hoped that this suggestion may help Gm to become a more active inquirer and researcher into her own reading process. By developing an active inner dialogue she would become more of a ‘listening reader’ combining visual and auditory, rather than simply a visual reader. Using the voice in reading aloud will almost certainly diminish the act of repeat reading. It may still be necessary when doing a visual read of, say, a novel for learning purposes, which is an image making process; for people with dyslexia it is natural to have “the movie in your head” (Section 6.1.2.2). I think the reading aloud keeps the brain stimulated and focused, and lessens stress in the long run. In the selection below, Gm shows how she can enjoy reading without pressure, and enjoys comprehension as she recognises the integration issue with academic work.

Gm: I read a book the other day it was full of short stories [laughs]
Kay: Yes a short story gives you the whole picture straight away and a great escape into the ‘movie in your head’ world happens. You don’t have to do anything and that is great which is in contrast to academic reading… I’ve learnt in my study to start questioning the text I’m reading in order to focus my mind into auditory mode quickly…(Gm 6 2008)

Gm’s last words were: “Thanks for showing me that … it’s given me a lot more confidence”.

4.3.3.1.2 Time perception.

People with dyslexia can have another common perceptual distortion, that of problems with reading timing and being on time (Muneaux, Zeigler, Truc, Thomson, & Goswami, 2004)., It may as a child have seemed impossible, because the multi-dimensional aspect of time can be complicated for most children. Using digital clocks means losing the ‘perspective’ that one gains from an analogue clock or watch. Seeing the movement of the hands of the clock gives a sense of the length and breadth of time as it moves slowly to the next minute (Frank, 2004). I have noticed that children, when in the presence of the chime of my grandmother clock, can look and hear, usually improving their concept of time without doing any ‘work’ to make it happen. They figure it out themselves as they integrate visual, space and sound. But for Gm the issue is not resolved and old solutions are impeding her:
Gm: Still have trouble with clock. I mix the time up and get panics. I sometimes miss appointments even when I’ve written it down. I’m now doing them on my computer. Before I got out of High school I couldn’t read a clock. (Gm 6 2008)

How could using a computer help develop a sense of time?

Below is Box 4, the fourth of the five written priorities Gm chose from reading the Listening Checklist.

Box 4

What is the time?
I see the station clocks above the train schedule.
I feel worried
I might miss my train.
I think about what the clock is trying to tell me,
I wonder if it’s 10.15.
I only have three minutes.
I feel silly.
I ask the lady with a nice face if she could decipher the time for me.
She complies and gives me a quizzical look.
I feel embarrassed as I thank her and leave for the platform.
I decide to get a watch that isn’t digital and LEARN TIME!

Gm May 2008

My experience of working with dyslexic people in particular is that there are often obsessive behaviours associated with time: with people who are either always later or very early, this can be a pointer to such obsession. I have had people coming an hour early out of fear of being late.

4.4 Listening as Communication

Gm wanted to improve her receptive listening, as discussed in the Vagueing prose, as her communication in relationships can be fraught. She feels endangered if she does not change or modify her behaviour. The following examples show the contrast between when she is in a state of internalised non-focussed listening and when she is consciously focussing.

Gm: I have to doodle it keeps my hands occupied busy so I can focus, they think I’m not listening. My partner says I don’t listen. It’s very true he asks me when I’m watching TV… I’m somewhere else.
Her saying she kept her hands busy meant to me that she was using this as a way of keeping focussed and listening. This is a common behaviour with children and adults with attention deficit disorder (ADD), and it can become ritualised. For example, a person has to tap a pencil to remain in focus. In the second example, Gm has in a way entered the story of what is on TV. I have heard this type of reaction many times from parents of the children I work with.

Below is the ‘What is he asking?’ box, Box 5, the final of the five written priorities Gm chose from reading the Listening Checklist. Gm was self-aware; she can analyse what she has heard, and act on it; she is present, not “somewhere else”.

**Box 5**

<table>
<thead>
<tr>
<th>What is he asking?</th>
</tr>
</thead>
<tbody>
<tr>
<td>I see a male colleague…</td>
</tr>
<tr>
<td>I listen to his voice chatting.</td>
</tr>
<tr>
<td>I feel confused with the topic of conversation.</td>
</tr>
<tr>
<td>I wonder what he’s asking me.</td>
</tr>
<tr>
<td>I act and ask for clarification</td>
</tr>
<tr>
<td>Does he require my assistance?</td>
</tr>
<tr>
<td>Reflecting on his words</td>
</tr>
<tr>
<td>He only needed a sounding board.</td>
</tr>
</tbody>
</table>

Gm May 2008

Here Gm creatively managed the confusion by turning it into expressively listening as she asks for clarification. This prose is challenging, both difficult and creative, as she moves from confusion to expressively listening; from feeling connected to feeling powerful. This was action without any compromise of her receptive listening.

**4.4.1 Understanding compromised receptive listening.**

**4.4.1.1 Revealing listening issues through the use of I-poems.**

“One’s speech is multilayered in that it includes the presence of discourses and voices” …and is able to “…reflect as well as resist the hegemony of various available and ideological points of view, approaches, directions, and values”

(Brown, cited in Beauboeuf, 2007, p. 21) (my emphasis)

Gm’s writing was done in two parts, with a gap of two months between. After receiving the first part of The Masters 1 prose (Section 4.4.2.1), I again noticed and admired her writing clarity. She had already sent me the prose seen in Boxes 1 to 5, and I recognised the talent and
potential strength she had in doing creative writing. I hoped it would show more clearly the
sensate nature of her written work. As a reflection on the first section of her writing, I reduced
it down to an I-poem. My aim was to help her to reflexively see and hear the feeling tone of
the piece, in order to gain insight through developing a deeper conversation and to use the
work as a ‘code’. The Masters 1 I-poem is followed by her insights.

**4.4.2 Understanding conflicted emotions.**

**4.4.2.1. The Masters 1 I-poem: Encounters and experiences.**

This is the first written work on Gm’s experiences of writing in her Masters program.

**The Masters 1**

<table>
<thead>
<tr>
<th>Encounters and experiences</th>
</tr>
</thead>
<tbody>
<tr>
<td>I finished feeling a great sense of achievement</td>
</tr>
<tr>
<td>I began</td>
</tr>
<tr>
<td>I want to …?</td>
</tr>
<tr>
<td>I thought</td>
</tr>
<tr>
<td>I apply.</td>
</tr>
<tr>
<td>I receive</td>
</tr>
<tr>
<td>I feel delighted</td>
</tr>
<tr>
<td>I feel determined to complete</td>
</tr>
<tr>
<td>I choose</td>
</tr>
<tr>
<td>I already have gained …</td>
</tr>
<tr>
<td>I pick three</td>
</tr>
<tr>
<td>I feel nervous</td>
</tr>
<tr>
<td>I organise</td>
</tr>
<tr>
<td>I skip ahead to see …</td>
</tr>
<tr>
<td>I feel apprehensive</td>
</tr>
<tr>
<td>I’m on top of it</td>
</tr>
<tr>
<td>I reassure myself</td>
</tr>
<tr>
<td>I get the flu shoot</td>
</tr>
<tr>
<td>I won’t get sick</td>
</tr>
<tr>
<td>I get extremely sick!</td>
</tr>
<tr>
<td>I struggle</td>
</tr>
<tr>
<td>I feel overwhelmed</td>
</tr>
<tr>
<td>I expected (?)</td>
</tr>
<tr>
<td>I thought A is…</td>
</tr>
<tr>
<td>I talked to her</td>
</tr>
<tr>
<td>I was allowed a day off…</td>
</tr>
</tbody>
</table>

Gm 2008

**4.4.2.1.1 Identifying three voices in the Masters1 I-poem.**

Gm’s analysis of the Masters 1 I-poem was that she heard a “freaked out voice, the little
happiness voice and anger too.” Of the voices, she chose to explore the angry voice and as she
spoke she gradually felt the anger. But as she began to retell some of the details of the encounters with lecturers, she felt uncomfortable and withdrew.

Gm: I’m finding this a bit difficult actually…I did have a huge outburst, continually feeling I was crazy, I did feel really relieved when … I’m still feeling angry about it. (Gm 6 2008)

Respecting her feelings, I changed direction by suggesting she could work on the angry issue at home by, for example, talking into a tape recorder. The moment passed and we continued by discussing how she could apply strategies to improve listening with the important players in her story. We did this because she acknowledged that, although she thought she had finished processing the issue, those feelings kept wanting to surface under the guise of more analysis. She was in conflict, as it was important in her work role that she maintains relationships with the same lecturers.

Following this meeting, I sent back the above constructed I-poem by email, suggesting that she share it with her partner before our next meeting. The reason I suggested his involvement was because I wanted to get an insight into his support during this period, and to help them develop distance from the stress they were both suffering during this drawn-out process. Her comment on receiving the I-poem was:

Gm: I didn’t realise I had written so many ‘I’s. I am not an I, I, I, person, I try not to be that way but it was good to see, as it was a reflection of exactly what I was thinking. (Gm 6 2008)

This started me reflecting on what she felt. That doing this exercise of ‘I’s was being selfish and self-centred, perhaps? At our next meeting (Gm 7 2008) I read back the I-poem and she felt it helped her own her feelings, and that it was a way forward. We also worked on the feedback from her partner, which is discussed in the next section.

4.4.2.1.1 Exploring words: ostracised, overwhelmed, disorientation and dissociations.

The text in this section is from meeting Gm 6 2008.

Her partner critiqued the first part of her I-poem by focusing on two powerful words: “ostracised” and “overwhelm”. The first word, “ostracised”, means “banish, exclude from society, and refuse to associate with” (“dyslexia,” 1984). Gm used “ostracised” to communicate that she felt she had excluded her partner during this struggle to complete her Masters. It felt like her way of apologising, but he did not think this was a correct interpretation. He seemed unable to perceive how she was using the word; their listening to each other was compromised.

With the second word, “overwhelmed”, he thought she had changed the meaning of how she usually used this word, and questioned her usage because he knew she hated the word. He
claimed she used this word in the context of work and people being “overwhelmed by their job when they shouldn’t be”! But her meaning was personalised.

Gm: a sense of feeling of being overwhelmed when probably in reality I was, even though I felt bound into a ball and feel all freaked out.

I asked if she perceived “overwhelm” as a body experience.

Gm: As well, everything is over on top of me that is the way I’m using it. For me this certainly sounded like the correct usage of the word, which she placed into kinaesthetic language. I wondered how she used the word in the work context, and if she saw colleagues as having feelings like she experienced? Could the different usage simply be different contexts; a social and an individual perspective?

Gm: There really wasn’t another word for it I was trying to think of another word that sums it up but there isn’t one.

I agreed that in my practice ‘grossly overwhelmed’ can still be called ‘disorientation’.

According to Davis (1994), disorientation means “to lose one’s position or direction in relation to the true facts and conditions in the environment; to lose touch with reality to some degree” (2003, p. 346)

Gm: I never let it get that far though…To me it means like you are totally losing it. I’ve had that feeling too.

We further discussed disorientation as still having some control; an example is the day dreamer in the class, who may at first be without control but who gradually gets into control and can turn it on or off depending on the situation. There sometimes may be a point when there is little control over it, and the potential is for it to become a huge disorientation. I think a huge disorientation may be similar to dissociation as described by Gilligan (Section 3.4.5.3). However, the question for me is, How much self-control does she have? If a person regularly loses their self-control for increasingly longer periods, I would tend to think of this as moving more towards the medical definition of disassociation. Gm replied, “It does physically manifest”. She is acknowledging that it is out of her mind, and that at those points it is a physical symptom, but she does not go further with this idea.

4.4.2.1.2 Summing up and reflections on the Masters1 I-poem dialogue.

Her words, “It does physically manifest”, followed my long explanation, and I thought she may have understood there were some difference between being overwhelmed, disorientation and dissociation. I believe I questioned too early, not giving her enough time to take in the new information and comprehend the new ideas. I asked if she could describe what a large disorientation was but she took it as disassociation. In her mind they were still one and the
same. I had not yet sorted out the difference with her. My aim was to reframe it for her to see it as disorientation, not disassociation, which is the medical term indicating psychosis.

My learning point was to explore what I considered to be a perceived difference in self-control and timing between the notions of disorientation, applied more to learning, and disassociation, usually thought of as medical diagnosis. I had expanded on the notion of overwhelm to define disorientation because I wanted to later describe and apply strategies to improve orientation and the effects of disorientation on reading.

4.4.2.2 The Masters 2 I-poem: Encounters and experiences.

It took Gm two months to complete the second part of her writing conflict experience. It was even more emotional for her than the first one. She sent both the detailed writing as well as a reduced I-poem version, which is cited below. She read it out loud at the beginning of session and we reflected on what meaning it had for her.

The Masters 2

| I work                           |
| I was let down …                |
| I felt depressed               |
| I was confused for             |
| I pushed myself                |
| reading,                       |
| reading, and reading           |
| I struggled                    |
| I relearned maths              |
| I was under pressure           |
| Things backfired                |
| Only assured myself            |
| Ethical view points            |
| Others reassured me            |
| I was let down                 |
| The residential was a blur     |
| I felt relief … exams over …   |
| I was ignored                  |
| I felt angry                   |
| I expressed anger              |
| I waited:                      |
| Feeling confused and annoyed  |
| And waited:                    |
| Feeling despair                |
| Big relief…                    |
| And then again despair         |
| I STILL WAIT!                 |

Gm 2008
4.4.2.2.1 Reflections on the meaning of Masters 2 I-poem.

The text in this section is from meeting Gm 9 2008.

It was clear at this point that Gm had not discussed with the learning support person the depth of her writing dilemma, which she perceived to be the difference in genre between her social science degree and her Masters of science degree.

The following conversation started with Gm saying that

Gm: [They] didn’t like what I’d done in social science… they didn’t like any of my language. When you’re reading a paper and emotions and opinion…It can be someone else’s opinion who has done research you can’t have an idea in your head.

LSP: Any student has to negotiate it.

For me this sounded as though the LSP had not listened sufficiently or did not have the information about the depth of the conflict with the department that Gm had experienced, and Gm wanting to convey the feelings of the issue.

Gm: I understand that but it was quite a big shock for me really. Poor, really poor crushing comments and confusion too… I had a meeting with X and Y [two lecturers] … they couldn’t agree to disagree! They were both telling me two different things they couldn’t agree.

Here Gm revealed for the first time how difficult the conflict in the department was – the crushing part and the horror of the betrayal by the person ‘in charge’. My aim in the meeting with LSP was to develop more understanding of how they work with such conflicts, and the strategies needed to successfully negotiate between department, learning support and student.

The attitude of staff would need to be proactive and be inclusive of Gm and could achieve a successful outcome by acknowledging the struggle both parties were having. They needed to ask a question such as ‘How can we work through this together?’ instead, the divisive experience that Gm had would potentially transform the conflict in some way.

4.4.3. The epistemological divide.

4.4.3.1 The language of disciplines.

Gm perceived the crossover from social science to science as being inter-related:

Gm you can’t prove anything with statistics, it’s unrealistic. For them to say that statistics it is a black and white thing... It is more subjective than anything, and I can never get my head around … why most people believe statistics. And the general public think that is what science is… it’s ironic, it’s not facing reality. It’s not like reading an instrument, and that’s what it is. (Gm 6 2008)
Following her comment, I gave a counter-balancing story which complimented, supported and added to her concept of the public’s false belief about statistics (not included in the thesis).

What is presented is the experience of another mature-age student with dyslexia who was part of AR1, but who came only to an introductory meeting with me. She also struggled with being in a cross-disciplinary study in humanities and the arts and how the departments expressed their denial of her dyslexia and the disability label.

AD: From the beginning they were happy to support whatever I wanted to do. They didn’t believe I was dyslexic. The biggest problem I have with being dyslexic is um, my verbal ability it actually... um yesterday when I was interviewed for the disability pension the first comment within 5 minutes was: ‘You are very articulate when you are speaking’. I think here we go because people think if verbalise yourself you must be perfect in other areas. (AD September, 2006)

Two aspects stand out here. The non-belief in dyslexia means that the staff do not have to take any responsibility, by just letting her get on with it, and secondly, that a strong conceptual verbaliser cannot have anything ‘wrong’ with them in other areas. She did get on with it, taking eight years to get to the point of having only two more subjects to go. She had put off doing these subjects, as they called for literacy skills she knew she did not have and felt she had no place to get the help she would need for them. I lost contact with her the following year and believe she left without completing.

4.5 Integrating Auditory Processing into Learning

One approach to integrating auditory processing into learning is to make a distinction between people’s thought processes. One system is to categorise thoughts as either verbal conceptualisations – thinking with the sounds of words, linearly in time; or the non-verbal conceptualisations – thinking in mental pictures out of time and space (Davis, 1994). Reading requires the fluid use of both conceptualisations of the brain to integrate. Another way is for the researcher to seek to observe the person’s sensory preferences in speech and actions and learn and help them to adjust themselves to find a way to extend their least preferred sense.

4.5.1 Recognising “old solutions” and moving to new solutions.

The text in this section is from meeting Gm 5 2008.

Dyslexia demands that the person find a way around their reading issues by using a form of compensatory practices which can be called “old solutions”, which could be behaviours, habits, and mental tricks adopted to resolve the mistakes and frustration when confused (Davis, 1994). “Many of these old solutions can take time, slow down processing, and can in
some cases become compulsive behaviours, and may be overlooked in the school system” (ibid, p. 67).

In discussion with Gm, I shared with her one of my old solutions on directions. When given verbally a direction to a place, and the instruction uses the words east, north, west and south, I orientate myself to a known mental map of Victoria as I know Gippsland as east and west is the Western district of Victoria—I lived in both these locations as a child. Gm’s commented “The sun rises in the East” and laughed following my example. I thought it was an interesting reply was this her old solution, an auditory mantra, ‘The sun rises in the East’, learned in childhood? If so it would explain the laugh which I felt gave a me a sense of agreement. It may have been of value to clarify further whether it was an old solution.

When I worked with people with dyslexia in private practice, with literacy issues they can have many old solutions in place, which are a hidden burden and add to the stress in any new learning situation. A common one has to do many repeat reads when reading on a new subject. When people with dyslexia learn to focus their listening and acknowledge their strength of having a high visual preference, it is very important to get them talking in a focussed way. I do this by initiating reflective talking and questions. At first the person may feel more stress, and struggle to articulate their comprehension and it can be initially easier talking to one person than being in a group. I asked Gm a reflective question about her thoughts on the conversation about old solutions.

Gm: Distractions. I have the personality “The Wild Child”. [My strategy is] ‘explain it to me I don’t understand!’ I guess that’s my way of compensating for those things I don’t understand or hear correctly.

The way she learns is similar to Gst who we meet in the next chapter: interactive, upfront, asking heaps of questions. She says this is partly her compensation that she could not ‘hear correctly’, meaning not listen accurately as she has receptive listening issues. It is gratifying that she recognised and had an active response to the issues from an early age: on some level she understood how auditory processing affected her learning, and actively sought clarification through questioning in learning situations. I think her mother as a teacher gave her great guidance and was a positive influence. Many children in this situation respond to auditory processing issues by simply sitting passively and letting the incidents go over their head. However, her interactive preference in the learning environment, her overall behaviour, could have been perceived by some as being a nuisance, which she acknowledged was the case.

Kay: If you don’t take it in and have to repeat the question that’s when you get the barrier put up in front of you. We have talked about this before – that barrier. … You want people to get over
that for you it’s important, and somehow or other, we have to communicate that to the other person that it is important.

Gm: I do this and I do know this is irritating and I know it’s annoying at times.

Kay: I think you have done that quite successfully.

Gm: Well, as an adult now if I am in that same situation, instead of being so abrupt and questioning the why, I always go to the person and say ‘I need to pester you for a bit’ and then I ask the why questions.

Kay: But somewhere along the line some give up?

Gm: It’s embarrassing, and if you get fingered for the why questions, tried this out in a number of classes and stuff like that the nuisance.

She has learned to modify her inquiring as an adult, so there will still be many occasions when her distractibility causes her to receive misinformation. My preference in learning is to use my practice theories as the model for much of my interactions and to add examples of my own experiences as stories. When I studied Economics, I had a working knowledge of the concepts related to the economic models, which were all diagrams showing what happened when something changed. I would write essays as if I was talking to the models. I used a similar process when working with Gm. I used my clinical understandings of dyslexia, which are being integrated in our experience together. The main concepts discussed so far are old solutions, disorientation, and their link to a self-regulation or balance model. To integrate these aspects of auditory processing into the ‘help’ for those struggling with diverse learning preferences will bring a self-regulatory dynamic to the person.

4.5.2 The “vigilant look”: When auditory processing is slow.

In this section the data is from meeting Gm 7 2008.

Gm: I always thought with my auditory skills that I was slightly deaf as if people weren’t facing me and I didn’t have a visual or their lips reading I didn’t hear them, I need the visual as well.

Kay: That was a strong statement. If I put my hand in front of my mouth would you be disturbed? When I do auditory testing I can spot that type of person, their visual perception [stress] can be so high that they have become vigilant.

Gm and the [other] person will get uncomfortable. I’ve got into a lot of trouble for staring at them. I had not felt at all uncomfortable with her eye contact. It doesn’t match what I would call the vigilant look that I quite often experience in the clinical setting. People who are very high visual learners rely on visual cues to listen; to achieve balance there needs to be more attention paid to auditory and kinaesthetic modes of learning. My practice work is to stimulate and focus the brain, for learning and reading, by addressing the auditory processing issue, one aspect of which is the efficacy of laterality when there is a right ear advantage. (Section 4.3.2.2)
4.5.2.1 Auditory ‘fill-ins’ as another ‘old solution’?

When reading aloud, many people with dyslexia will unconsciously fill in a word with another non-existing word. When this happens the reaction is to re-read the word to be consistent, otherwise meaning may be lost. An example from Gm follows.

Kay: When you are reading a text do the lines or words kind of jump out at you?
Gm: all the lines … kind of stand out like they have got a light behind it or something?
Kay: Is that how it happens for you? That’s pretty unique! Some people will see the words going together, all squashed up, and not able to see the separation between the words at all. Is that the way you have trained your eyes?
Gm: like a spotlight…all around the edges like a lens if you don’t get the right spot…
Imagine how stressful this would be. My understanding is that it is the result of high concentration, such as needed for pulling the left and right hemispheres together.

4.5.2.2 The Brain Fitness program.

The goal of the brain fitness program is to improve focused attention and auditory processing and to reach one’s personal best. The incremental way the exercises are designed is unique, as it takes the player to their learning threshold and gradually moves them through and beyond their previous thresholds. When I used this program, I found one exercise very frustrating, as I went into a tight loop of getting to my learning threshold, baulking, sliding back, approaching again and moving back again. It took time to break through that threshold. The advantage I gained from using the program was that I learned to be patient with myself.

The exercises demonstrated the importance of remembered sequencing, and I realised that this may be one of the biggest issues I have in my essay writing. A read-out built into the program gave daily scores and an accumulated summary at the end. For theoretical details see Merzenich (2004).

4.5.2.2.1 Using the brain fitness demonstration trial program.

In the brain fitness demonstration the person is given four minutes per game, whereas on the program one plays four games each day for fifteen minutes for forty days. I hoped that this trial could help Gm understand and be aware of the skills and the elements of auditory processing in a fun way. A growing number of research papers from diverse groups have shown successful outcomes using the principles of brain plasticity. This research is easily understood through reading the outstanding popular book by Doidge (2007).

The six auditory processing and language exercises are designed to give experience of the elements of auditory processing: auditory discrimination, phonemic awareness of open and
closed syllables, sentences and stories (Posit Science, 2005). I was surprised how quickly Gm gained awareness of her reading process.

Gm: I found that program so useful. I am concentrating harder on listening to the vowels or the slighter sounds. I got a good one wrong yesterday; I got ‘fish’ when the word was ‘dead’. How did I get dead to fish? That’s a bit like how people learn to read. “…I wasn’t looking at him, oh that explains it!” With reading as you go through you will be filling in some of the words...

This computer program could become a very useful research tool within higher education, used the way I used it with Gm, to bring awareness of how auditory processing impacts on her learning and can enhance cognitive skills. It seems to be an action research project that could be taken up by or within learning assistance services to enhance diverse learners’ skills and to generally improve their literacy skills.

Gm: I could have put a lot more into it; how the cognitive learning part was very painful [but] the repetition was good, It’s that cognitive learning thing. I can see how it could help a lot of people. I didn’t realise before I’ve done that that I had any problems. I knew I kind of misheard people or maybe I’m a bit deaf but I didn’t…

She refers to the repetition as good, which at first sight seems strange, as dyslexic children often hate anything like times tables that have to be repeated in a rote manner to remember them. An intensity to get things right develops, as does the frustration that accompanies not getting it right. In the trial, it is very finely tuned into incremental steps, so when an error occurs one continues to be self-challenged. I know: for myself, I learned tolerance and patience doing it.

4.5.2.2.2 Reflections with Gm on the use of brain fitness.

I saw how the program has potential as a useful empowering tool for all learners. As with any innovation, how it is presented to people can make a difference. For adults in a tertiary context, I would like to see it presented as something a person can ‘develop with’ rather than something to help them. If it is just seen as a compensatory strategy and not given support, it may not have the benefits it could have. Gm joined the conversation.

Gm: The term ‘I’m going to help you’ has been the cliché catch phrase (laugh) …I don’t look on it as being bad anymore. I probably used to when I was a lot younger as it gets insulting after a while. Now I think it’s a way people are trying to help you develop… that’s how they phrase it in their own mind. I don’t actually think they are trying to be too insulting but…Yes, even it [the program] made me aware… I am now aware of some of those faux pas, I’m not hearing those verb sounds correctly, and it’s actually made me more aware, so I’m thinking about it more.

Her progress from being constantly irritated by patronising ‘helping’ attitudes to accepting help graciously is refreshing, considering her current situation. She again comments on the
listening fitness program and her developing awareness and thought processes; I think action will follow, particularly in relation to her partner and their communication.

### 4.6 Using University Resources: Help for Disability

The text in this section is from the last meeting, Gm 9 November 2008.

When we had completed our work together, we met with the LSP who had referred Gm to me. The aim was to share with her what our work had meant to Gm.

Gm: It built up the confidence in myself and has been helpful it allowed me to focus. I have trouble with the hearing side of things and I was crushing into a little ball;…more to confront those feelings and acknowledgement.

Kay: What had made it happen … was it doing the I-poem that made a difference?

Gm: [Yes] It made me acknowledge a lot of my pent up frustration and perhaps I should have shown that in my anger a lot more to some of the lecturers. If I could have explained to them how they were making me feel and how they weren’t helping me …this process would have been shortened rather than extended.

We then met up with the LSP, as I wanted to hear her perspective and her view of Gm’s situation. The meeting developed into a lively conversation.

#### 4.6.1 Exploring the other side: What are the lecturers’ needs?

The LSP spoke from the lecturers’ point of view.

LSP: they don’t know what they want. They know implicitly what they want when they see it. They know but if you ask them to articulate what it is they want because I have done this, [laugh] and they cannot. They can’t because they don’t have the language …You need someone like a learning assistant person to say this is what is happening here.

Kay: I think it is the difference between the learning process and mastery. The lecturers have mastered writing scientific papers, a mastery which for some can make it difficult to realise and articulate the process to beginners.

LSP: It’s like the student, if you already knew how to write an essay all my instructions that I have written down would make perfect sense [laugh] on how to write an essay. Yes, I can see that, but for someone who doesn’t know how to write an essay it is almost useless. You almost need to have a go at writing it or have something to model and I think that is what I did with you too I’d say perhaps you could write something like this and I would …

Gm: The last lecturer he still didn’t like my last essay how I changed it for him in the first place, I’m getting angry….

This last comment was Gm clearly expressing her feelings; she began to own her feelings following the I-poem part of the process, which helped her regain confidence. This was the first time she had directly acknowledged her anger towards this particular lecturer. This was in response to the LSP discussing her way of understanding as the need for a model or example writings from the lecturers. I think Gm is saying she feels that this lecturer gave her neither a model nor an example essay. She told me such a strategy was common practice she
experienced in her undergraduate social science degree in the late 1980s. This time, her experience was the lecturer asked her to change the essay and when re-presented, the lecturer still did not like it. She still has feelings of anger and helplessness, and she felt ‘let down’ by one of the lecturers particularly who she felt had little idea how to help her, as he contradicted himself on her later redrafts and gave no explanation.

4.6.2 How a learning support person helps students.

Learning support sections work with students having difficulties with their essay writing. Although Gm was present during this conversation, she did not take part in the discussion.

LSP: What you want to tell is what you want to understand at the end of it. Once that is in your head it will flow better. People start writing before they have worked out writing can clear and can’t think of that as the essay rather that is what I’m trying to say.

I had trouble understanding the line of thinking and wondered if Gm was following it. I understand that when there are learning difficulties, and in particular a dyslexic learning style, it means almost certainly an imbalance or non-integration of the sensory modes: kinaesthetic/experiential learners, visual and auditory. I think it is important to highlight this understanding, because it is the start of developing awareness of the value of auditory processing as a learning preference that has to be developed in most students, but particularly in students with neuro-diverse learning styles. Whilst the discussion was becoming more complex, I wanted to question the concepts behind the writing support undertaken with students and to focus on the possibility that, by having a working knowledge of learning style, any visual learner, for example, will first grasp the big picture.

Drawing on the work of West (1991), I said:

Kay: For visual learners they must know the concepts behind the subject – the big picture. The big picture is the structure, the foundation terms on which the knowledge of a subject is built. An example from practice was I had a dyslexic student who was doing a massage course. He had a manual to study as part of his exam preparation. Even with my four year training in massage and having taught massage like he was learning, I could not quickly find my way around the manual to understand sufficiently to prepare him for his exam. The foundation is the definition and the glossary in any technical book, of which his manual had neither. Despite my having the techniques embodied, the communication of that knowledge was impossible in such an unstructured manual.

This got me thinking about how the students are being taught. When lecturers stay with the old model of ‘chalk and talk’, diverse learners can very easily get lost because their style is non-auditory. Both teachers and students need at least a working knowledge of a model of learning styles in order to work more specifically to meet the needs of these sensory issues.

LSP: Is this way of working assuming a strong auditory view? If so how can we strengthen the way the person auditory processes?
A good question—signifying we had come full circle back to the importance of reflective active listening.

4.6.3 Is writing really the problem for diverse learners?

The word ‘assessment’ is often spoken from different points of view. In the context of disability, assessment is done to find out how the person is different from the normal and what can be done to help. In learning contexts, assessment is how we judge learned knowledge by the standards of the particular subject or discipline. To clarify the assessment tasks for this second purpose, it is important to take into account the whole person, including their culture, rather than assuming that everyone does things the same way.

The LSP explained that many of the students she sees come in thinking that their writing is the problem. Rather, she finds that their writing flows when their thinking is clarified. Her example was a girl wanting to do a literature review without knowing what the purpose of it was and not knowing what referencing was. Her strategy was to get the student to understand why she was doing it. This student left with a method of doing a literature review for a funding proposal and an explanation of how the literature review fits in. The LSP described herself:

LSP: My bent is verbal. I understand that people need the other. When we talked that then I would write it and then I would…

The sentence is confused and does not show she is strongly verbal.

4.6.3.1 Meta-reflection.

The LSP’s understanding of learning styles seemed limited to verbal training, so I wanted to give a stronger sensory angle. Work on learning preferences is relevant for diverse learners, as are those systems that specialise in the integration of the senses, such as multiple intelligence (Gardner, 1983), the visual/auditory/synthesis (Markova, 1992), the visual/spatial learner (Sword, 2000), the voice/ear/brain connection (Tomatis, 1996) and a most popular an assessment tool for teachers which includes visual, auditory, kinaesthetic and writing (Fleming & Mills, 1992).

To work effectively work with people requires both verbal and listening skills, the importance of active listening cannot be over-emphasised. Developing summarising and reflective skills as part of listening improves resilience in both cognitive thinking and emotional functioning. If the person passively listens without questioning, learning opportunities are lost.
4.6.4 A reader writer as a compensatory strategy.

AD is mentioned earlier (Section 4.3.3.). She wanted to join AR1 but could only attend the initial interview (AD September, 2006). She is included to give access to her salient perspective as a student labelled dyslexic during her time at university. She was six years into her undergraduate degree. The quotations below are from the interview and reflect a level of the difficulties she faced in the institution. In particular she described the conflict of not being able to use a reader effectively to maximise her learning outcomes. I have broken up the quotations into chunks and added my reflections in between.

AD: it took two further terms to discover I could select my own reader. … it is supportive to have a reader but it is harder to read yourself because you have to focus so much, listening just listening you’ve got to be really focused. You can’t be tired can’t be fatigued. Have to keep yourself still so it’s good having a reader on one hand and on the other it’s also more of a backup.

Either she was not told she could select her own reader or she did not understand the information. She was unable to take advantage of having a reader who could have become a valuable partner in learning. She described the inner conflict she felt of pushing herself to focus her reading and the pull of having a reader. Focussing her reading required much effort and to her was “an extraordinary act” which she cannot do if she’s tired or exhausted.

AD: To do everything yourself is like on a hot day diving into a pool like someone handing you a glass of water you don’t get to the depths. I did one exam with support of the lecturers…. I can’t do it so we agreed on a verbal one as you have to have a massive amount of information, I passed and the lecturer is great … I have to go over and over it.

She had one exam with special assistance during her University degree. She was given a verbal exam and passed it despite the large amount of repeat reading she had to do.

AD: I had some one doing the notes and I suggested that we go to the assistive technology unit and read me the notes straight off [audio into writing] so I can put in my own words. This was going in the journal and was to be marked and they couldn’t get their head around it. They said no it would be giving me an advantage over other students. You’re handling the notes they couldn’t do it straight off.

The irony is that her making a suggestion on how to use the reader to suit her learning preference was refused on the grounds that she would gain an advantage over other students. My understanding is she simply wanted to have the reader read the notes into a voice recognition machine. I question whether she would be advantaged. Would she be on a more level playing field? It is open to interpretation. She wanted to then read and listen to the notes and then construct her reflections for the journal. How was that an advantage? She worked out that it was a funding issue.

AD: I found it had to do with funding. I wish they could be honest and say we can offer this [only] to you, we can’t offer any more because of funding. It would have meant much more rather than coming back to me and saying it would give you an advantage which was dishonest.
So what it now says to me is that the use of the voice recognition software may not have been in the budget for a reader to do this? Why not? The point of the whole extract is about the lack of information and communication concerning what is offered and how it can be accessed, which had not been clear to AD despite her being in her seventh year of study for her undergraduate degree.

4.6.5 Using a voice recognition program.

The text in this section is a continuation of the last meeting Gm 9 November 2008 with the learning support person (LSP). I wondered if Gm had used Dragon Speak, a voice recognition program which is usually available for those with a disability and which is often suggested for dyslexic students. I had my doubts about how easy it would be to incorporate for people with dyslexia without guided support, because of the visual/auditory imbalance mode seen, particularly when reading aloud. Gm makes a statement that sounded rebellious.

Gm: You have to tell me why it is good for me as I hate rereading my words.
LSP: By saying it, it’s not just thinking about it, it’s the same old thing though, word and action you know think-say-do those three things that’s how you make things happen. Thinking about it is not enough you actually have to make a commitment to it and then do it!

I found this communication difficult to quickly understand as I wanted to explore Gm’s comment further.

Kay: Yes, but you have to listen, saying is not enough, I have to take the responsibility of listening to myself. I’m talking about listening as an active process not hearing which is passive. Every one doesn’t act on what they hear. Listening to and then speaking becomes the action.

I was disappointed that this communication is so scattered and the original intention to listen to understand what was behind Gm ‘hating to reread her words’ was lost. The distraction for me of LSP’s think/say/do model felt confusing. My way of dealing with it was to jump to my framework and realise it was only half of the action learning cycle: missing are the “feeling” and the “seeing/observing” aspects (Figure 3.3). I address the latter aspect as I respond to LSP, rather than returning to Gm’s comment with a reflective question, which could have been a more useful way forward.

4.6.6.1 Meta-reflection.

The theory behind my discussion on Dragon Speak usage with Gm was not answered. Knowing she hates rereading, I wanted to see if my theory, that she was reading visually without sub-vocalising was correct. As many students with dyslexia have experienced humiliation and shame as a child when forced to read aloud, it is important to work with adults with diverse learning styles to maximise their successful use of voice recognition.
programs. It can be used as a way to integrate the sensory imbalances. Because most learning difficulties can imply strong disconnection to auditory processing, such learners would have to muster extra focussing to keep on listening to any voice (Tomatis, 2005). Another issue is to do with the type of voice training needed to get accurate voice recognition. It can be a problem because a person with a non-integrated voice lacks harmonics, tires easily and, as an underlying factor, finds their own voice boring and unlikeable. As a result, the input for the computer program to recognise would be inconsistent. *Dragon Speak* is unforgiving and can produce more than the usually inflexible results.

### 4.7 Chapter Conclusion

Gm used some poignant phrases to describe how she perceived herself as a female and as a dyslexic. Some examples are:

Gm: “their patriarchal male dominating world”, “they didn’t like me giving my own opinion”, “and frustration was building”, “Sometimes I get stuck on small words”, “you cheated; I’ve always got that whenever I did well in a test.”, “No, I’m trapped…”, “I always thought with my auditory skills that I was slightly deaf”, “what happens I get the spotlight happening”, “… poor, really poor crushing comments and confusion too”

Strongly expressed was undeniable courage: “I’m determined to finish”. These quotations give some idea of the changes in feelings that were generated as she expressed the perceived limitations of her diverse learning style and her pertinent strengths. With determination and courage she coped; her willingness to be a co-researcher has added a depth of understanding that was unreached during other interactions.

My three aims whilst working with Gm were first, to help with a reduction in her stress; second, to assist a rethink of her perception of dyslexia; and third, for her to develop new strategies for receptive listening. The reduction of stress was achieved mainly by helping her to recognise her feelings. This enabled a giving of voice to emotions and an enhancement of her ability to communicate her issues. Rethinking the perceptions of her learning issue was not an easy task. I worked to clarify the concepts of being overwhelmed, disorientated and dissociated. Once there was an understanding, Gm was in a better position to consider the application of the various strategies that I was suggesting to improve her reading and writing skills. I concluded by reaffirming my current belief that gaining knowledge is a dynamic step-by-step process and co-researching provides an opportunity to progress. It was important to reaffirm the strengths that dyslexia had given her. She was able to recognise that her strengths, in being able to see three-dimensionally (for example to sew well without using patterns), her good memory and vocabulary, and her ability to think with scientific logic, came as a result of her dyslexia.
Together we looked at the background perceptions that she applied when feeling overwhelmed, for example in reading or listening situations. She saw how some of her old solutions could become obsessive and unhelpful. I introduced her to the brain fitness program and by using it she gained insight and awareness of the auditory issue that was problematic. We looked at the importance of reading aloud and using finger tracking to avoid spotlighting; her name for visual disorientation. We also discussed the pros and cons of using the *Dragon Speak* program. It was important to look at Gm’s dyslexia in the context of community myths and how society’s misperceptions have impacted upon her. The forced changing of her handedness was of significance, and then also her experience during her higher education, where there was a lack of understanding and care by staff who probably had less commitment to quality teaching because of a higher priority for research. The learning assistance departments performed a vital role, but this seemed too little in the face of the shortfalls in funding and human resources. Resolving Gm’s issues is a work in progress. Knowledge is dynamic and with her new-found tools she has the confidence that her goals can be reached. Figure 4.2 below is a mind map summarising the value Gm gained in her learning and dyslexia through the co-researching process.
Figure 4.2 Solutions found in the Gm story

In chapter 5, I explore further the theme of overwhelming feelings and experiences rooted in childhood stories: these reveal the extent to which the health of two participants from AR1 cycle is impacted. The story of a third co-researcher from AR3 with no visible health issue reveals a vulnerability to stress. The common theme is an exploration of the health learning link.
Chapter 5.

The Health-Learning Link: The Core of Affect and Self-regulation

This chapter explores the early learning stories of three co-researchers, their related learning and cognitive preferences and their health/learning link. The first two, Jas and Gst, were involved in the first AR1 cycle, while Ph joined the AR3 cycle for individual sessions following an Adult Community Education (ACE) meeting (April 2008).

These co-researchers were all mature-age meaning each was over 40 years old. Each person demonstrated tendencies towards a kinaesthetic learning style, which means according to Pheloung (2006) a person who needs to move to learn. In a more advanced form this could be a learner who is restless, inattentive, who lacked focus as a child and who as an adult can have poor self-regulation and be prone to health issues (De Jean, 2008). Jas and Gst have chronic ill health; the third co-researcher, Ph, an athlete has no known health issues. Jas worked in the higher education environment as a part-time teacher and professional staff member, Gst worked as a part-time tutor while completing post-graduate studies, and Ph was an undergraduate student throughout the research time. Each co-researcher demonstrated different kinaesthetic learner aspects and its meaning in regard to their sensory integration and self-regulation.

I pondered the order of the chapter and settled on length of time of illness. Jas has had ill health issues for most of her adult life, has struggled with persistent memory and fatigue issues and manages full-time work. The early childhood stories of Gst give a glimpse of a gifted, restless competitive child who was managing chronic ill-health, study, family, sporting life and part-time work. Ph, a single father, with no current health issues, showed a vulnerability to stress.

5.1 Jas: A Kinaesthetic Learner with Fatigue and Memory Recall

5.1.1 Summary of Meetings.

Jas was attracted to join the first AR1 group by the notion of dyslexia. She was curious, as her partner had struggled in school, and she wanted to understand dyslexia. Four people were present at the first meeting (AR1 August 2006), two were students with dyslexia, and one
who acknowledged visual stress, and Jas. It was a revelation for Jas to meet people with dyslexia and finding there were health effects.

At the second meeting (AR1/2 Sept 2006) Jas was the only co-researcher present. It meant my prepared structure developed from the first meeting was put aside. I had designed group exercises to highlight the features of the AR cycle using the material from the Listening Checklist. My agenda at this meeting was to clarify the structure of an action learning model from the first meeting and to look at early childhood learning stories. I started where we had left off and shared feedback on what she had learned and took the opportunity to discuss her health issues of ongoing fatigue and short-term memory issues.

What was revealed for/about Jas was a poor sense of balance, and from my practice perspective, indicated that her stress difficulties may have stemmed from auditory processing issues involving the vestibular system (De Jean, 2008). I knew from my observations during the first meeting that she tended to listen more than talk, and thought she may have felt on the outside—not a student and not a person with dyslexia— which distanced her emotionally. However, she made interesting astute reflective observations of the other co-researchers.

Two days before the third meeting (AR1 September 2006) she had a spontaneous emotional release, which was for her an unusual event. I wondered if it may have been triggered by the depth of work she had done during the previous meeting, when we had touched on the link of the bodymind connection to her childhood stories. The third meeting gave her an opportunity to reflect on her self-management of that event and how we could strengthen her capacity to self-regulate. She chose to look for examples from her work place to develop cognitive understanding of how she can work smarter to alleviate her fatigue issues. As a professional staff member in the university, she does some class teaching, and has opportunities to meet with students individually.

My goal became to help her connect to her inner strength, develop her capacity through awareness and learn how to take more preventative action by understanding her pattern of self-regulation in the work context. My background ‘balance’ model of self-regulation assisted her to focus on changing the sensory balance, in her case, to improve health and well-being.

The background theory of the AR cycle was first on the agenda item. I wanted to find out which part of the AR cycle was least used or was confused with what would help to improve self-regulation. We worked with the Simple Kolb Learning cycle, Think-Feel-See-Do (Figure 3.3), and I saw that she tended not to acknowledge her feelings. I was reminded of the
difference between an ‘I feel’ statement, which gives an inner focus, and a self-reflective statement, which is more likely to be outward looking, observing the social environment; both make up the critical processes of the AR cycle.

Viewing this simple cycle further as a dynamic model, one can involve the left and right hemispheres of the brain and ultimately improve listening and self-regulation on a body level. These are the background notions we explored. I did this by introducing a holistic concept of listening, the Listening Checklist (Appendix 1), which she had received as information prior to our meeting. This Listening Checklist shows both inwards and outward expressions of language-cognitive, feeling and bodily signs, which are all signs of dis-regulation. To be conscious of when there is a lack of balance, I have learned to listen with this simple AR cycle in mind. I work to activate the less used or missed part through the communication, as this will more quickly restore equilibrium and self-regulation.

With Jas I first asked a look/see question to get a generalised response. I would then adjust my response by changing to feeling language, asking about her feelings when she left after the first meeting. She started her answer with an ‘I thought’ statement, which suggested she may have felt a bit alienated or was feeling different from the others. I pointed out that the other three people had a common life experience; they either had dyslexia or had fatigue issues, the latter which directly linked to her health experience. She had forgotten that. Her gain from that first meeting was the thought of a connection between dyslexia, the senses and health issues (De Jean, 2008). This first understanding of the importance of perception was a lead into later in-depth discussion on the self-regulation aspect of auditory, visual and kinaesthetic modes. The conversation was flowing and I gave a reflective observation directed at the simple AR model presented.

Kay: I asked you a feeling question and you gave some very good comments. Then when I asked a thinking [conceptual] question I think you went blank at (?) and then said: ‘I don’t remember.’

Jas: May be, as you have already suggested that’s why I said ‘I get from the feeling I can suss the energy’

The conceptual question which relies on auditory memory was not answered; rather she gave a sensory feeling answer: ‘I can suss the energy’. This suggested to me that a better access question may have been a feeling memory. So I asked a feeling question. She replied with an ‘I think’ statement; a further analytical question and she came back with ‘I’d forgotten that’. I experienced this as an incomplete learning cycle, which means some of the elements of the cycle, in this case the “I feel”, was not answered.
5.1.2 A sensory integration discussion and early schooling experiences.

Continuing from her insight into the possibility of a learning-health link, she began to explore the connection to the senses.

Jas: Not being touched may have implications for learning in later life. It’s a surprise to me how I hadn’t thought about the education process [in relation to body]… All the stuff about learning development and body knowledge and image, [was] aware about not comfortable with it. Physical activity bat and ball I was really like??

K: What don’t you like to do with the body?

Jas: Oh things that involved coordination of all the limbs, riding a bike. Coordination …If you had a bike where we lived… (very hilly). Still can’t do it!

K: you were surprised about touch and now we’re talking about body balance. Do you have a bigger picture of it?

I’m probing to see what her beliefs are and I am seeing whether she takes up the visual cue.

Jas: I think there is a lot of fear comes around and for me when something is injured (?) it’s… hard to learn Don’t go into ….. happy… when things are difficult to achieve…especially say like gymnastic, making fun of you for three years. I don’t know, pick<ing> up rubbish better than doing gymnastics. I didn’t like that very much. I could do backward rolls but not forward I could never take my weight on my shoulders or go further.

Her experience of gymnastics and being taunted for not being good enough meant social isolation and an alternative activity of picking up papers was punitive. She endured this for three years. These issues were significant when placed in the three primary dimensions of brain function, in a model of focusing (front/back), centring (top/bottom), and laterality (left/right). To be able to do backward rolls and not forward rolls indicated focus imbalance between the body and brain (top/bottom). The inability to master bat and ball is a hand/eye laterality issue (left/right). To ride a bicycle requires all three dimensions of focusing, centring and laterality (Dennison & Dennison, 1989).

I had intended to do a segment on written early childhood memories of learning and trauma with the group. Having one person, I decided it was more appropriate to have her talk her childhood memories of school.

The function of the vestibular is to position our bodies in space, based on the information received from all the senses, including the muscles, joints, vision, and the tactile sense or touch/pressure (Nelson, 1999). Within that system, the proprioceptive processes signal awareness of movement and the body position, which is relayed to the brain and integrated from the vestibular neurons (Kranowitz, 1998).

While I knew Jas had allergies, which can indicate sensory issues, I wanted to further check if there were any present-day movement symptoms. I asked Jas what happens when she drove a
car backwards, as I had a previous adult client with vestibular issue who improved this ‘symptom’ by sound stimulation (JC, personal communication, 2002).

Jas: Ok, but on a one way street (uh!) I don’t get it right it feels weird and usually I’m quite inaccurate. I can’t park on the right side I never get it to happen right.

This is an adult ‘remnant’ of the earlier uncorrected sensory imbalances. I wondered then how and what those imbalances from childhood might be?

5.1.2.1 Her story.

Jas lived in the country as a child and was the youngest of five children. Her mother was not one to do much hugging and touching, and Jas saw her cry only once. Early in her school life she found she was physically limited in activities involving running and gymnastics, and these issues led to Jas finding solace in reading and in her imagination to find her ‘balance’. She was distanced from her peers because of the lack of sporting prowess and became of the ‘brains’. I endeavoured to help her to new perceptions and connections to her body, and how these may link to memory and fatigue. She has been an academically successful learner who adapted well; found a place and space in life. However, the underside is an inner world racked by self-doubt and negative thoughts. From my frame of reference, her affect regulation and sensory issues from childhood are the basis of the somatic issues she faces today.

Fatigue and allergy suggest the immune system is in an ongoing compromised situation. For example, one theory is that Moro reflex, thought to be only unlearned fear in the human newborn (Goddard, 1996), is our earliest form of ‘fight or flight’, is naturally triggered after birth by loud sounds; sudden movements start this compromising situation. An example: taking off the blanket of a tiny baby can cause an instant throwing of arms and legs. This reflex should be inhibited by three months after birth but can be present in the long term as somatic issues of hypersensitivity, hyposensitivity and lack of focus (Goddard, 1996). It is as if some people get stuck on the level of early survival. Goddard considers that this reflex affects the emotional profile of the child. This alone could be the reason for a lifetime of emotional stress reactions, if the Moro reflex has not ever been inhibited, and can be one explanation for Jas having both sensory and emotional issues (Schore, 1994).

The conversation below takes place in the third meeting (AR1 September 2006). Jas again being the only participant that night, the meeting became an exploration of her perceptual issues from childhood, and their relevance to her issues of allergy, fatigue and memory retention. It became easier to understand how the bodymind was in conflict.
5.1.2.2 Self-regulation and laterality.

In order to understand Jas, my next step was to link in the functioning of the ears and how this can lead to methods and actions to improve self-regulation. I asked questions that sought to find out if she had any awareness of or any difference between how she perceives sound through either the left or the right ear. She acknowledged that she has lots of issues to do with left/right and body image. This was a pivotal statement about laterality and how her issues were signalling poor functioning of the vestibular in the inner ear and her subsequent issues with integration of the balance functions and self-regulation.

Reflections to understand the dynamic of this emotional release: I was curious to know what the after effects were and what was different from her usual experience. A change in her behaviour could signal more self-directed activity, which means to plan, to guide and to flexibly monitor her own behaviour when situations change (Cantu, 2002).

Jas: I feel good that um it’s [the interaction in meetings] opened new understanding what might be guiding the way I am why the lack of concentration.

I wondered then if she was beginning to understand that concentration could be involved with the vestibular functioning and laterality.

Jas: The crying … was just the other day. I felt like sh**. I felt really liverish and cranky and that was the day B was coming back.

Kay: This is an important day. What else does it mean?

Jas: I though it’s something had upset me, my system, but I couldn’t think of anything that could – I could see the pain in my face. I saw myself it wasn’t pretty. I wasn’t judging myself. ‘That’s not a happy chappy. I need to be nice to myself and have a sit’. I started crying…then I had to drive to pick up B

Awareness and acknowledgement that her physical symptoms were not from an external trigger, that such symptoms could be emotional, seemed to be where it was heading. I asked if the crying felt like a release to her. “Yes it felt like from a deep place. Yes um yes and … a bit of diarrhoea my emotions have been very unhappy at the time”. This could have been the anticipation, a reality check towards the future; she had to get to the airport to pick up her partner, who was arriving back after a long journey abroad.

Jas: I really had to take deep breaths minute by minute on the way up there/I don’t trust myself no more. I was feeling typically rotten and having the big cry and I felt vulnerable…Have to look after myself and on the other hand I had to pay attention to the traffic. By the time I got there it was a lot better; I had a couple of stops on the way.

Here the competent person takes responsibility for the situation and moves with her inner conflicts. It sounded to me that this may be a different stress release cycle to her usual pattern – in this case, partner away and her attending the meetings with me. A shift in perception from ‘tired’ exhausted to the feeling of relaxation and calmness is hard to achieve when in
chronic stress, yet I think there was a change in self-regulation; she was able to control her thoughts, responses and actions.

I asked if she had been keeping notes for reflections, which the group had agreed to do and whether it had been the catalyst.

Jas: I think so. I wanted to write some things: What I’m not allowed to do. I felt it was releasing … I thing I’ve always felt … B says I choke off my crying. He thinks I don’t get it all out … I don’t [not] willing to let it go.

Kay: You felt you did let go on this occasion?
Jas: I had to stop it somewhere and get on with life.

There was an opportunity to go further but this other ‘voice’ of reason came in. What is the belief? Was it that she perceived the crying as indulgent? It is a voice of realism. I wondered whether this was the ‘mother’s’ voice. Jas had only ever witnessed her mother crying once when a relation died and her mother was ‘stoic’, so I asked how she brings her stoic voice through.

Jas: Painful choked up painful to me breathing.

My questioning was to establish/judge how she felt after having such a body response, to the open deep crying she described. A crying episode can be either contractive, a tight contracted crying which can be painful, or expansive, which feels releasing and afterwards brings the feeling of clarity and energy. She said: “I felt – definitely felt it then I had been working very hard.” I think then this may have been a releasing crying.

5.1.3. Kinaesthetic memory.

The next two quotations are describing the memory loss that is becoming part of her daily existence.

Jas: if I tried to recall the feeling it’s easier to do. My mind is forgetting what I’ve seen or heard. It’s becoming an issue in recent years. Any reason? I don’t know why there is no rational explanation.

I think this is a clear statement of the kinaesthetic (feeling) being her primary or dominant memory functioning. Jas continues to attempt to clarify and begins to become incomprehensive.

Jas: That was about … I can’t remember what … I tried to record feeling it was easier to do. My mind is easier…. I realise it’s an issue just forgetting things… it begins to show, it’s a way of being. [cannot remember and forgetting things] The ‘show’ person can make the learning more pleasant and … is going to be accessed easier if you can change before you are told what to do.

Here she described her process of anticipating or being vigilant to what is expected in the communication. Does this indicate a high level of stress?
On our last meeting together (AR1/August 2006), Gst was present and he dominated most of the conversation. Eventually, I turned my attention to Jas and made a space for her to give some feedback from the previous meeting.

Jas: Going back a bit we talked about the hearing thing and the sidedness, the left side being a lot weaker than the right side. I’m noticing a lot more of the hearing thing favouring this side. She pointed to the left ear which is the emotional side and is the longer pathway to the left brain where language resides. When the emotional regulation is not efficient, the work is to help the person process more sound information through the right ear. I drew a simple diagram to explain this.

Jas: So it’s (sound travels) quicker from the right ear (to the language centre) has got more hearing and the left ear side has poorer hearing?

Kay: Yes, it (the left ear) should not be used as much as it is less efficient for self-regulation.

Jas: I’m sorry you’ve lost me on the diagram. While she could comprehend verbally the visual map I drew, she spatially confused the map for the second time, and indicating she was more situated in the right brain – that is functioning more through the left ear, the inefficient neural pathways for self-regulation.

Research by Schore (2009) indicates that “the survival functions of the right hemisphere, the locus of the emotional brain, are dominant in relational contexts at all stage of the lifespan …(p. 114) and … to work with affect facilitation is a powerful predictor of treatment success … (p.113)”. This gives one example of validity to the idea of critiquing the simple AR cycle as a brain map, and facilitating co-researchers to begin to acknowledge the emotional side by using ‘I feel’ communication.

Jas expressed her struggle to find the connection between the right and left brain.

Jas: I’m feeling a bit challenged to round up my thoughts and a lot of that is the chronic fatigue stuff. Having to get through a big day and sometimes I run out of juice. I have a sore throat, generally low today.

Her trouble ‘rounding up her thoughts’ confirms her struggle with not accessing her cognitive side, making a case for the need for more affect regulation work in the process of communication.

5.1.3.1 Utilising the learning in the workplace.

This section covers/illustrates how the learning from the previous meeting was used in the workplace. Jas adapted a diagram similar to the one I had introduced to her and she had a good result with it. She said: “the diagrams were messy … I need to have things neat visually
so that I can feel confident I will know where things are.” She has learned from the experience that she needed visual order to trigger her visual memory.

Part of a training course she attended was a section on learning styles in the form of ‘Show before telling’. This was an exercise to help students who do not connect to activities, when it has been assumed they have not listened well enough to know what they were supposed to be doing. She learned from that experience to differentiate between teaching and learning styles. For example, if she knew her students’ learning style was mainly visual, then in her teaching role it would be helpful if she would do something visual before giving a verbal explanation. It would then be more likely the student would become proactive and ask further questions from their experience and known context. If on the other hand the information overwhelmed them, listening and developing new concepts would be limited. This latter pattern would continually move them from information to new information without integrating it. From that experience Jas learned something about student’s needs.

Jas both – instructions on paper and the things we discussed in class. There were just two questions. I’d spoken to them [about] what they were expected to do and yet they still [messed up]. They had one set of instructions, two verbal instructions and they still asked questions! [They did] a diagram and it still turned into rubbish!

She sounds a bit annoyed that it did not work – or perhaps she simply doesn’t understand the diagram the person did? I commented that the person she described above was probably a kinaesthetic learner, meaning they learn from experience. She sighed and asked in a plaintiff voice:

Jas: How do you cope with that type of person?
Kay: That is the challenge of all teachers. The easy way is to start by using a diagram. Learning styles is about inclusive teaching. I think one endeavours to use as many of the styles as you can in any lesson.
Jas: The mapping was crap…

This comment indicated her non-preference for visual learning, and I think she also prefers to learn from experience ahead of visual and auditory (KAV).

As a solution for a lack of listening, I suggest that one way of reflecting on what the person knows would be to make them talk and focus on something. A brain storm mind map can give you a way to cluster the information they know and show you where the gaps in knowledge are. Her reply was interesting.

Jas: System diagrams: have lots of arrows going around and round they drive me insane.

I took this as the confirmation of visual not being her primary mode. I had missed her earlier point, when she said “mapping is crap”. I was not sure if it was a narrow understanding of mind maps, or if it was on a personal level that she had issues with spatial orientation, and so
was more comfortable to have a sequential ordered way for information to flow. This thought prompted me to ask her if she had issues with Esher’s pictures – which are three dimensional pictures which seem endless.

Jas: No, no that’s great! … [Its] constructed meanings, I don’t get them. Systems and models, how systems work. Is that a learning style issue? I think it is. I had someone the other day who wanted to use various methods. I use the diagrams with me.

An enthusiastic visual response: could it be her issue is more that her auditory thinking brain is under functioning? Is she preferring to use her left ear and therefore under using the right ear?

5.1.3.2 Her understanding of the lateral issues comes through an experience.

The following example explores the left/right sidedness.

Jas: A person came in with a problem... I end up it took 1 1/2 hours. I was really stuffed and also there were problems to solve; a mess… but also a lot of talking involved. I found it …I came to the real blocks about it. The boundaries of my fixing up I was going way beyond. I got to the point when nothing would come in [to my head].

Kay: That’s when you STOP and disengage. If you don’t, you will create more confusion as your processing stops.

Jas: I did work it out what was wrong by a chance question or realisation. I had no conceptions and then when I had an epiphany so I had the same issue! So what am I going to do about it? This seemed to be a major self-discovery. I then asked where the person was sitting when she had this ‘melt down’ and she said they were on her left. I was not convinced that she had the person on the left as she had earlier confused the left and right.

5.1.4 Self-regulation, laterality and health.

An explanation of ear laterality from the theory underpinning my professional practice is that Jas was challenging her ability to listen and respond through her right side voice-ear brain, which links up to the Broca’s area. When Jas works with students, to maximise her listening efficiency she needs to place the student on her right side, even taking the initiative to move them if they do not sit there, especially if she thinks it will be a long session. If when speaking and using left ear circuits, the person will naturally quickly get drained. The art of developing laterality awareness is to know the signs of weariness. When conversations go on too long, there can be the beginning of an uncomfortable timeless feeling. A good example is that surfing the Internet can easily become timeless and distinctly obsessive. I call this ‘The dog has a bone’ syndrome. We have to learn how to ‘drop the bone’, which means to stop appropriately, before our energy is drained (Ph 5.3. the Drop the bone! story). This is really quite important: it is about knowing your self-regulatory patterns. It is most common that
people go on for too long without a short break, which will get the focus shifted back to self, will break the intense dynamic and will change the pattern.

Self-regulation and affect regulation can mean the need to recognise and change something immediately, in a situation which in turn changes our focus and perception. For example, when I see people yawning, I suggest moving around to break the pattern. It becomes important to actively understand the full implications of learning style from a regulatory perspective.

5.1.5 Summing up.
As these dialogues were mainly from one-on-one sessions, I could carefully follow Jas’s emerging themes. I found that her priority learning style is kinaesthetic, with visual spatial disorientation and auditory perception the most underdeveloped, which could be part of the memory loss issue. Her learning style preference order is kinaesthetic, then visual and auditory – KVA (Markova, 1992). Knowing this preference means that, when interacting with students, she needs to be vigilant not to talk too long and to keep focused by being conscious of using and encouraging a right ear advantage.
I heard how as a child her vestibular functioning was not robust, and she found ways around the issues. She experienced a family environment which lacked feelings and touch, which for her must have been difficult. One reaction was to withdraw alone, reading, which gave her satisfactory stimulation to the imagination and visual systems and which led to a life of reading, books and becoming an aspiring writer.

An outcome of the early sensory functioning, including the left/right issue, is related to her difficulties in monitoring her stress, setting up a chronic pattern of dis-regulation. The spontaneous emotional release showed some ability to let go and possibly signals flexibility and plasticity in the neural pathways (Doidge, 2007). Could awareness and learning how to monitor her stress through affect regulation improve her whole wellbeing?
The aspects of Jas’s diverse learning story are summarised in Figure 5.1.

*Figure 5.1 Health issues, actions and outcomes in Jas’s story*
5.2 Gst: Chronic Stress, Learning while Seeking Justice and Fairness

I like being appreciated but competent. If I had [to choose between] someone liking me and getting it right, it would be getting it right! (Gst May 2011)

This is a story of a gifted creative child who had underlying learning issues that have never been addressed. He became the perpetual student, having two undergraduate degrees and a Masters before taking on a PhD. His health started to falter in his second degree and by the Masters he was diagnosed with a hidden disability, chronic fatigue syndrome (CFS). Memory and fatigue issues made his study unpredictable and at times he can do no work for weeks. He worked part-time, has family commitments, was active in sport and helped others with similar issues to himself on the legal aspects. This busy schedule means there was little time for the self-repair work needed for this condition. A measure of his distress is how he managed time. Time perception meant he would often be late or miss meetings and deadlines.

Gst came to the first meeting of AR1 dyslexic group (August 2006), held in the evening, and the one other night meeting (September 2007) of the scheduled ten meetings. He was keen to talk about fatigue and seemed surprised when others in that group talked of similar issues.

While he did not acknowledge dyslexia, he talked of having Irlen Lenses to help his reading focus, which was one of the few treatments available in the late 1990s, commonly recommended for dyslexia (Irlen, 1991). Two years later, he participated in all four of the AR3 Health Group meetings (discussed in section 6.1).

Here in this section, I am using his written work from the Health Group, particularly his prose about early childhood and health issues, to set his life context.

5.2.1 Gst: Study issues and chronic fatigue.

A person with CFS can have invisible symptoms on a bodily level which they have to adjust to, such as that of intermittent exhaustion. The illusive nature of the illness means it can cause difficulties in communicating to others about the illness, often causing added social stress.

The history of Gst’s experience of the illness while studying, and his considered unfair treatment, compelled him to externalise his conflict into both his social and academic worlds. His life was one of endeavouring to get a right functional balance between looking after the ongoing demands of the illness and its effects, and the demands of family and university.

Gst’s issues are revealed in the following poem.
### 5.2.1.1 Prose ‘I was angry’ encapsulating the social issues.

<table>
<thead>
<tr>
<th>I was Angry</th>
</tr>
</thead>
<tbody>
<tr>
<td>I was angry at having an illness in the first place</td>
</tr>
<tr>
<td>I was angry I could not prove that it existed</td>
</tr>
<tr>
<td>I was angry that it was affecting me the way it was</td>
</tr>
<tr>
<td>I was angry regarded as a liar to friends, family, people I worked with and the people at the university.</td>
</tr>
<tr>
<td>I was angry at having to deal with an insurance company for my income</td>
</tr>
<tr>
<td>I was angry to endure their intrusion into my life, their abuse and treatment of me as a liar, I worked for them tirelessly for years and was regarded and trusted.</td>
</tr>
<tr>
<td>I was angry at the treatment within the university, the interactions</td>
</tr>
<tr>
<td>I was angry with my doctor, and the whole experience.</td>
</tr>
<tr>
<td>I gained an appreciation of discrimination the vindictiveness of people in power.</td>
</tr>
<tr>
<td>I gained insight into the true nature of business the hypocrisy of people in positions of power the deficiencies of the medical institution.</td>
</tr>
<tr>
<td>I could see this problem extended well beyond that me.</td>
</tr>
<tr>
<td>I could see there was no safety net for people with ME/CFS especially in relation to legal issues.</td>
</tr>
</tbody>
</table>

This led me to a PhD.  
Gst 2008
5.2.1.2 Analysis of the “I was angry” prose.

I asked a critical friend, Sm, to read the prose and reflect on what it meant for her from the perspective of intangible feelings. Sm went into great detail on some of the aspects; about the first line, “I couldn’t prove that it existed”, she said:

he needs to have the proof of the theory otherwise if [he] can’t prove it, then how do I know I can believe it? He might own it... in terms of his own area of competence. If I was to tell you that I have an illness and you were to say: ‘What is the evidence?’ then it beats me up because I can’t demonstrate competence around what I can know about the illness …I have to learn everything I can about this illness so that I can control it. It is not about his body it’s about his mind there is no necessary connection to the body. (Sm, 2011)

The line ‘…regarded as a liar…’ she said:

because he couldn’t prove it because he didn’t have the competence …If I have the knowledge then I have to be able to express it to tell people about it… Whether they thought of him as a liar or whether he’s carrying around an internal conversation that he is a liar we don’t know” (Sm 2011).

When in the grip of such a roller-coaster of emotions, his behaviour appears as near obsessive, which can exacerbate the situation and lead to alienation. On the other hand, he has an exceptional talent for logical thinking and, by inference, research. This is his dilemma.

5.2.2 Regulation: Health and wellbeing.

5.2.2.1 About Chronic Fatigue Syndrome (CFS).

5.2.2.1.1 The historical context.

Thirty-forty years ago it was thought that myalgic encephalitis (ME) and chronic fatigue syndrome (CFS) had little medical justification. Further, as recently as 2010, research by Wojcik, Armstrong and Kanaan identified that 84% of British neurologists do not view CFS as a neurological condition, although it is classified in the International Classification of Disease-10 (ICD-10) as a disease of the nervous system.

Historically CFS/ME became known as a disease of fashion, something akin to the ‘hysteria’ of the early 1990s, because the nature of the symptoms could not be generalised (Shorter, 1992). To have an ‘epidemic hysteria’ there needed to be two phases: a genuine organic disease which is difficult to detect as a template, and a second phase to broadcast this template by support groups, the medical fraternity and the media. CFS dominated the last two decades of the 20th Century, reaching epidemic status, with one million carrying this label and perhaps five million who were considered ill without being diagnosed in the USA (Shorter, 1992).
More recently Jiricka (2005) and Wojcik, Armstrong, and Kanaan (2011) suggested that CFS is an “orphan illness sitting on the border between medicine and psychiatry”. Etiological factors are difficult to identify (Jiricka, 2005; Pariante, 1988). However, theories include involvement of an infective process with such organisms as the Epstein-Barr virus, human herpes virus, entrovirus, human retrovirus infection being implicated (Jiricka, 2005). Physiological changes implicate a malfunctioning immune system associated with yeast intolerance and food allergies; autonomic nervous system disruption; and problems with the hypothalamic-pituitary-adrenal axis (Jiricka, 2005). Other theories of a psychological nature include early childhood psychological trauma (Wojcik, et al., 2011; Jiricka, 2005) and anxiety and depression. However, while there is a strong association between fatigue, CFS and psychological conditions, the exact relationship is unknown and causation remains questionable.

There are a variety of factors that may influence a person’s conception of self and of the illness, once given a diagnosis of a chronic condition such as CFS. If the general practitioner treats the presenting symptoms with a non-accepting attitude, the person may develop what became known as a fixed circle of belief about their chances of recovery (Shorter, 1992). This could be interpreted as its being all in the head and nothing can be done about it. This may be reinforced by a combination of symptoms which can extend to severe fatigue, weakness, malaise and mental changes such as a decrease in memory function.

Contrary to the above, research by Whitehead (2005) who conducted a narrative study of 17 British people with CFS/ME, found that, while perceptions of chronic illness such as CFS can undermine self-identity, decrease certainty, and stigmatise, transformation is possible. Whitehead (2005) utilised Frank’s narrative typology to uncover a narrative trajectory moving from restitution to chaos, back to restitution, and then on to the question narrative. Transformation within the narrative trajectory included “positive changes in identity linked to new insights into their previous lifestyle” (p. 2243).

What is encouraging is that positive stories of recovery are now appearing on a bigger scale with the advent of social communication on the Internet. For example, recent Netherland-based research used a randomly controlled study to show that a program of behavioural therapy delivered through the internet had helped teenagers return to school quicker than the control group returned (Nijhof, Bleijenberg, Uiterwaal, Kimpen, & van de Putte, 2012).

Another internet-based support group sharing stories of success, and an increase in research emphasising an integral approach, have begun to change the landscape of this illness. Alex Howard at the age of twenty-two started a health clinic and support after recovering from ME,
which had debilitated him for seven years. It seems like an extraordinary group which works eclectically (Howard, 2012).

These gains from social networking are beginning to affect attitudes about different chronic illnesses. A Google search found sites and research which have convinced me that the power of the fixed belief system of CFS is at last being eroded. For example, a new book, compiled by an ex-CFS sufferer and natural health practitioner, has stories from fifty people who have recovered from CFS. The fifth example of a success story on her website was from a medical doctor who had been bedridden with CFS. Barton (2011) wrote:

she felt she was "living in a glass cage". Clare had to look beyond her conventional medical training for her cure, which came gradually as she learned to listen to her body and trust in her faith. Clare edited two reports from the National Task Force on CFS/ME and contributed to the Action for M.E. rehabilitation… courses…returned to general practice… (Barton, 2011, para. 12).

While there still is no one right way to affect a chronic condition, Barton’s work shows recovery needs to be holistic: that is, treating both the physical and the psycho-spiritual dimensions of the illness. There was no one sure way: the author suggests that the book needs to be read proactively and that the reader needs to be prepared to be empowered.

5.2.2.1.2 Higher education research.

CFS comes under the Australian Disability Discrimination Act (DDA) (1992) and, as explained in chapter 2, is classified for statistical purposes as the category “Other” marginalised and hidden groups. Since the Australian Vice Chancellors Guidelines (AVCC) on student disability was released, most university have recognised the disability status, and CFS is mentioned in some disability guidelines (Southern Queensland University, Bond University, and Southern Cross University). A landmark grant for CFS went to Bond University (2011) to advance already existing research towards “identifying the cause and developing a treatment for the debilitating condition which affects a conservative estimate of 250,000 Australians” (Alker, 2011, p. 1).

However, Morris (2003), who analysed ‘the lived experience’ of forty Australian students in tertiary institutions, found that for these individuals the university disability policy guidelines often “contain inaccurate information, trivialise the condition, by not addressing for example the neuro-cognitive dysfunctions which are relied upon for diagnosis, [and/but] rather focuses on one common but sometimes minor symptom of fatigue…” (p. xii). The students in the
study reported that “their difficulties are not caused just by the illness itself, but by the failure of the tertiary institutions to understand the effects of this illness on them, the student, especially within the areas of accommodations and assessments” (p. xii).

The issue that students face in these circumstances is to manage their own recovery in an often hostile external environment. There is little understanding and few detailed guidelines to explain the condition. Therefore tertiary institutions will by default fail to meet the needs of any students with fluctuating medical conditions. This fixed ‘circle of belief’ about any chronic condition, such as severe asthma, multiple sclerosis (MS) and post-traumatic stress disorder (PTSD), is difficult to shift. Morris (2003) points out that “…because of the inadequacies of these guidelines it encourages and promotes infringement of the DDA and makes educating the educators an area of great concern and fraught with difficulties” (p. xii).

5.2.2.1.3 Gst’s earliest memories of stress and growing up.

The boxed written prose examples below from Gst were part of the work from the Health Group. I had sent co-researchers a Concept stimulator sheet on early childhood memories and health (Appendix 7). Further data from this source are dated in text as ‘(Gst, August 2008)’, which was the date when the writing was returned to me.

I can remember experiencing stress from experiences at school where I came into conflict and bullying from year 1 students when I was in Kindergarten. I was picked on for various aspects of my appearance or how I did things and I didn’t want to go to school.

Gst, August 2008

Miller (2005) suggested that early trauma and abuse in the family can play havoc with non-regulation of stress, mental health and social isolation. Gst hinted at these issues in another prose. Family trauma often means the child may have to ‘grow up quickly’, become more internalised and self-reliant (Miller, 2005). This is true for Gst. Rather, what is needed in parent support to develop the child to their full potential is respect for the child and their rights, tolerance for their feelings, and a willingness to learn together, which can create well balanced, creative individuals (Miller, 1988). In Gst’s early learning stories there were early indicators of creativity, for example doing creative story writing and visual stress, not wanting to read being the biggest one.
5.2.2.2 Sensory learning issues.

Gst was diagnosed with Scotopia, a form of visual stress, in his early university studies in 1999. At that time he saw an Irlen specialist and has continued to wear the prescribed tinted glasses. He believes they help him by reducing glare, the number of headaches he gets and some increased understanding when reading. It is understood that further improvements could happen if the tints are changed periodically, yet he has had no further visits to the specialist.

5.2.2.2.1 What is visual stress?

Irlen (1991) was one of the first researchers to focus on the distortion of visual perception as the likely factor in reading issues; the common notion was that dyslexia was a visual issue. In Australia in the 1970s, it was one of the few specialised treatments available particularly for dyslexia. A shift in research from reading has occurred mainly in this century because of the proliferation of brain research that has provided understanding of the underlying processes of reading. Reading became a mainly phonological issue and led to research acknowledging the body and environment (Frith & Frith, 2007). Researching multiple perceptual issues in reading, White et al. (2006) compared and assessed 23 dyslexic children with 22 control children who were matched for age and nonverbal IQ on the parameters of literacy, visual, auditory and motor abilities (VAK), and phonological abilities. This study demonstrated an overlap between dyslexia and other classifications. The most common of these classifications were phonological (52%) and visual stress (35%). For the first time a variation in literacy skills could be isolated and independent of sensorimotor factors. While visual stress accounted for 35% (8/23) of the total group, 37.5% (3/8) had no phonological deficit and another 22% (5/23) appeared to have no issues with either of these sensory systems (White et al., 2006, p. 248). This latter group, who seem unattached to sensory modes, could represent students who have variable literacy skills coming from an environment where literacy is undervalued, such as those of low Socio-Economic status (LSES) people.

The research concluded stating:

two broad classes of impairments that can lead to specific reading disability: visual and phonological…. [some]…cases, dyslexia explained by visual impairment, [but… the majority of people with dyslexia, … seems to be directly and exclusively because of a specifically linguistic phonological deficit…there is an undeniable association between phonological dyslexia and a sensorimotor syndrome including auditory, visual and motor disorders (White, et al., 2006, p. 253).
The complete map suggests phonology 52% (12/23), auditory 26% (6/23), motor 22% (5/23), literacy only 22% (5/23), visual stress 35% (8/23), magnocellular (2/23).

The following adapted map (White, et al., 2006) encompasses this information in a visual way as represented in Figure 5.2.

![Figure 5.2 A multidimensional view of sensory stress](image)

This research suggests that a high percentage of university students may develop signs of visual stress and may need help, particularly because of the high usage of computers (FH, personal communication, 2012). It could be a possible study issue. For example, in the 1980s in London, Roland, an ex-client of mine, displayed an extreme form of visual stress and struggled with academic reading. His prose below has great awareness and insight into how visual stress manifested when he attempted to do academic reading.
I had to read, I wanted to read!

But I couldn’t.
I would decide to read then.
a ritual. … coffee … biscuits…
look out the window…sit back, and
eat the biscuits and drink coffee.
Kind of nice…
The hard part.
Open the book and start…
a few sentences would flow past
I have to realise that
what I had read was not in my mind.
The reading matter had gone through
one ear and out the other.
My brain was thinking about other
things.
A lot of other things… everything
going on in my brain
and when I wanted to read,
even more brain activity
…materialise[s].
It was like–
wanting to watch the nature program
on TV but the instant it was on,
another program would scream into
my face from all directions.
Just appear out of nowhere…
there was nothing I could do to get
back to the nature program.
I wouldn’t even desire to …watch at
all anymore.
I would read the book
word for word
to get to grips with
what was being said,
word for word, but
by the second word,
zap, my mind was [on]
other things nothing to do with the
book.
RV(2006)

In this extract, RV was reporting virtually no control (or self-regulation) of his visual ‘picture movies’, which rendered him powerless to focus and took him beyond his conscious willpower. Reading requires all the multi-sensory systems to be integrated and working together. His description of needing to have a ritual before starting to read, of using comfort food showed his preferred kinaesthetic mode; however, there was little evidence in his description of using his auditory mode. As a child he would have had similar difficulties of
not being able to access his preferred strength mode – kinaesthetic. Classroom activities are mainly auditory based; for example, an early learning example mentioned by Gst was his major trouble with reading aloud; while Ph (5.3) perceived rote learning as boring.

Both Gst and Ph use sport as a training and Gst said it helped with his illness. It is interesting that many elite sports people have rituals to enhance their focus. For example, in sport they are often used to herald the start of a new activity: the rituals of bowling in cricket; and bouncing the ball a certain number of times before serving in tennis. Is it simply that these rituals mean that many may have been kinaesthetic learners as children? Sports psychologists too teach techniques to improve focusing (Bleak & Frederick, 1998).

5.2.3 Developing understanding of learning style.

5.2.3.1 An early learning story.

All quotations from Gst in this section are written quotations received in August 2008.

| I don’t really recall my first day (at school). |
| I do recall the bullying from older kids |
| I do believe |
| I looked forward to playing and stories. |
| I remember lots of arts, craft and plasticine … |
| I had fun. |
| I do remember bits and pieces, not wanting to go at times |
| I didn’t always get along with some Year 1 kids |
| I can remember in Y4 |
| I couldn’t hear, I ask for repeating of words in a spelling exam |
| I ended up getting into trouble sent out of the room, frustrated and angry. home life |
| I can picture fragments throughout my school life. |
| There are good and bad periods. |
| I think …this incident followed a bad period | Gst August 2008 |

Gst’s story tells of his childhood fears – of being bullied, of not being understood and of being rejected from class. The latter may have been simply because he asked his neighbour in class to repeat the spelling words, as he had already shown early that he was not fully
processing the sounds. The frustration of being innocent and yet punished when he was obviously interested and participating would be difficult. A teacher report suggested he “Could do better if he settled down”, and I suggest the volatile nature of his family’s dynamics was partly responsible for his restlessness. In Year 3, he was hospitalised with mumps, and used the time honing his maths. He was already showing ability in solving maths problems. He was never a big book reader, had problems reading aloud and “had to work on it” By year 8 he had “a breakdown in science”, in that there was a clash of his learning style with the science teacher’s teaching. It felt like this intelligent child was finding ways to learn despite a strong dislike of reading.

His learning style involved several features. That he “doesn’t settle down” suggests kinaesthetic/feeling mode is dominant (Markova, 1992). His need to have teachers who understood his learning style and believed in him because interaction and feelings are important also suggests kinaesthetic dominance. As a child he had issues reading aloud and had a period of non-hearing, which points to a possible auditory processing issue and indicates a visual spatial preference over auditory (Silverman, 2000). His desire to be competent drove him to find a way to compensate for his inconsistent reading ability. When hospitalised he spent a lot of his time doing maths problems using pattern recognition skills, which honed his stronger visual mode.

**5.2.3.2 Learning to do free writing in Year 7.**

In year 7 he had a change in learning with a new teacher:

Gst: [the teacher was] encouraging – was basically flexible in what you wanted to do. We worked together I did a lot of fifty page short stories and they wanted to print them”. He had quality time with this creative teacher and it freed up and developed his writing style. I asked him if he had awareness of the style of the teaching. He said “…It was mostly oral I can …still the written word doesn’t stay. The oral is better if I sit down and experience it. Experience is the important one – first experience first! (Gst 2 2006)

The comment “the written word doesn’t stay” means that when processing reading he uses more visual ways with his intermittent auditory processing. If this is correct, then this would explain his deficit in auditory memory. An early strategy he developed when there was reading involved was that he would set his own exam through old exams and test himself. This was the level of his early independent learning. This strategy of learning by doing the old exams to get the concepts to ‘sink in’ is the kinaesthetic mode, rather than his relying on auditory memory.
5.2.3.3 Meta-reflection.

The transition to secondary school with an encouraging teacher prepared to give him undivided attention helped him develop his creativity (right brain) through free writing. The one-on-one discussion model (auditory) helped develop the visual/spatial integration as there was little concern to structure as is needed for formal essay writing. To have such teaching at year 7 would have helped to develop a learning style where he was not inhibited to ask questions to get the information he needed. When he encountered an inflexible teaching style, or he could not become competent in a subject, he would stop doing it. For example, as an independent learner in Year 11 when he was doing Biology by correspondence, he had access to teachers and assistance to do the interpretative work. He did exceptionally well in the research work for the weekly assignments, where he could absorb material, in the exams he said: “I did atrociously because I couldn’t remember the details exactly enough and ended up giving that subject away”. (Gst 2 2006)

He named his learning preferences or strengths as “interactive learning-by-doing” and creative writing. He found a constructive way to get around the auditory memory issues at that age, but in the adult academic world this style can become an issue and may indicate a swinging between Visual-Auditory-Kinaesthetic (VAK) and Visual-Kinaesthetic-Auditory (VKA) preference, which will be explained in the analysis of the next section.

5.2.3.4 Current writing processes.

Gst describes his strategies as follows:

Gst: One of the ways [is] writing it freehand in what I understand so that when I get into things I can then access what I’ve got. I need to take a certain approach. Only when I have the complete picture can I bring it back to a thesis. I have to go through; I have to get the big picture before you can boil it into a thesis. It’s not something to get clear in my mind. I started to write it then you can use your analytical skills. When I’ve got the big picture it can take numerous drafts I don’t have a problem with chucking stuff out. (AR1 2008)

His insistence on having to have the big picture showed that his primary way of processing information was visual, followed by kinaesthetic – ‘I started to write’ – and finally the auditory mode through his analytical skills. From the quotation above, the order of his learning style mode is primarily visual, kinaesthetic and auditory (VKA). In communication with a person with a VKA learning style, the other person may have trouble understanding “…since they may spiral with their words: jump from topic to topic repeatedly, making connections in their speaking which may not be understandable to the listener who may never seem to get the point” (Markova, 1992, p. 116).

This is how I often experienced early
conversations with Gst, in particular the following example, when I asked Gst if he could clarify if he had a preferred mode of memory recall. To answer this question the following monologue ensued:

Gst: if you made me think about something … not necessarily sequential…. I can jump I have a good sense of spatial memory both memory I know when I see. I have a fairly accurate a good long term memory…I’ll give you a perfect example:

My girlfriend stresses about getting things done and … I’ve learned if I have to get it in if I don’t with an extension. When I need to do exams I’m ready … I know I don’t need to stress. I need to know if I worry. [see further section 5.2.5.4.1]

Then if you have enough time have you ever not got there and you have never not got there doing the things that you’ve done before but some people have to do this know what you're doing it. (AR1 2008)

I had difficulty following the logic so I interrupted three times in an attempt to refocus his communication. He continued without a break. After each interruption, there does not seem to be any association with the previous train of thought; we clearly were not connecting.

With respect to learning style, the first part of his monologue was similar to what Markova (1992) expects of a person with visual, kinaesthetic and auditory (VKA) learning preferences. That monologue has the elements of ‘spiralling’ the words (including raising his voice and repeating himself), ‘jumping’ topics and becoming incomprehensible to the listener. Furthermore it was as if he went even more ‘out of sync’ following my interruption to his thought processes. The whole experience was similar to the disorientation process described in the previous chapter (section 4.4.2.1.2).

Yet his written stories are expressive, cohesive and have a different clarity: the learning style when writing follows a different order: visual, auditory and kinaesthetic (VAK) preference. Markova (1992) suggests the person with this preference is:

generally not skilled at things to do with eye/hand coordination, middle auditory channel is critical in learning to do something with their hands or their bodies- they need to talk themselves through these kinds of activities (p144). ... need to discuss before and during new experimentations, [learning] … writing should emphasise meaning over spelling and grammar … will have difficulties with long reading and writing assignments under time pressure ... written material is absorbed more slowly, they should be given more time … written exams also difficult … more effective to have them write from their own experience (pp.123–128).

It is possible to see some of the issues from a functional perspective. For example, the difference in learning style, whether it is a writing or oral issue, explains the time pressure
issue with written assignments, because he cannot absorb with ease through the auditory sensory system. This suggests a divide between the visual auditory and a lack of integration. He can start only when the whole picture is in place.

5.2.4 The impact of health issues on study progress.

The combination of the health effects of CFS and his carrying into adulthood perceptual learning issues from childhood means he was under constant ongoing stress. He accumulates stress, despite taking the best care of his health and illness through doing regular exercise and by taking care of nutritional food needs. He continues to have little sense of time, which can compromise him in some social situations and with university personnel, causing annoyance, aggression and withdrawal from those he’s let down.

The following story was during his second degree near to the beginning of his CFS diagnosis. As we established earlier, his learning preference seemed to point to learning-by-doing. In this context it means he needs to interact with lecturers to find out what he does wrong. He did this but was not satisfied; he began to suspect he was being treated unfairly, which led to his eventual withdrawal from that university:

Gst: they weren’t interested in me as a human being. I already had done another degree and was professionally working. Every subject that had those people involved, I didn’t know. So for example, I couldn’t be bothered liaising with [that] person... you shouldn’t be complaining about not getting an extension but he put it in writing um. The other subjects - people involved in that subject I ended up with a lower mark. I could have used a more interactive style of learning. (Gst May 2011)

At first I thought he had not answered my question and it sounded confused. Then on my third reading, I felt the underlying anger as he acknowledged his reluctance to engage with the ‘inhuman’ department. Getting extensions for an essay, despite having CFS, was difficult. He cited examples of the lack of interaction, and where not liaising with one lecturer led him to believe other subject staff gave him lower marks. It seemed positive that at least one lecturer gave him a written extension despite thinking he was complaining. He continued to feel he was not being treated fairly and he set out to ‘prove’ he was getting lower grades than others.

5.2.4.1 Gst solution for unfair treatment in earlier studies.

This incident was significant for Gst – he mentioned it a few times how he felt estranged with the staff in that department, whom he felt did not take his needs into account. When I first looked at the quotation above, I could not understand fully why he would go to such lengths to prove that he had been marked unfairly. After my first reading of this data I found some
parts were missing; I subsequently met with him to clarify and question him on the details.

The second version was spoken and made more sense:

Gst: I didn’t pass in on time an options paper. … I asked could I put it in and eventually they agreed because I had gone to the lecturer and had obtained papers from him. The lecturer was no longer there so the Assistant Dean appointed herself to mark the paper. The former lecturer was bemused as he considered it to be beyond the Assistant Dean’s scope: she had never taught the subject therefore had never been experienced in marking those particular papers.

…I believed in 1999 I was being deliberately marked down across the board by approximately 10%. When it came back I got a different mark from the original lecturer (80% to 72%) which was what I predicted.

They [The university] had no answer – their answer was no answer… harsh words were spoken and they said it was a reaction to me… my response to them was ‘that’s interesting; you’re blaming me for their overreaction’. If that was the case, they are still responsible for their over-reaction and the words they say, however, my reactions were a reaction to their reactions. Chicken and egg and unfortunately they lay the egg. (Gst May 2011)

Gst felt undermined by lecturers who appeared to doubt his difficulties and this exacerbated his inability to stay within the time requirements. He perceived this university department as ‘inhumane’ because of limited access to lecturers, which meant that his preferred interactive learning style had limited use, which could have added to him feeling alienated. He suspected he was being given lower marks than others and independently sought to address the situation. He was told by the original lecturer, who had left the university, that the marker, the Assistant Dean, “had expectations that were not required and this would influence and make the marking different”. His competence as a student was threatened; however, nothing was resolved and it became a fight for social justice in relation to his illness.

5.2.5. Attitudes to learning and learning style.

5.2.5.1 The first degree at university: “It was a one stop draft”. (Gst August 2008)

Gst: I’ve a fairly accurate long term memory…I didn’t have access to a computer so everything I wrote was a ‘one stop’ and that’s the way I learn. I still wasn’t a big reader in my first university.

Kay: Does that mean you wait for the pressure to build and then bang it all comes out?

Gst: Yes. I was probably do[ing] last minute but I was not a big reader and I was a 95% attendance rate. I would learn from the tutorial and the lecture and very rarely I’d open a book I still had a very good research rate. Micro was the only thing I ever failed. Not the topic, I failed an essay. I went back and redid it. I don’t understand the topic and I’m not walking away from the topic that you will possibly fail me. I sat down and went through it with the lecturer that’s how I got through the subject. She pointed out to me what was actually correct. Her tutorial fell on a day when prayer practice was on and I was on a 2.30 bus so they would be half way through the tutorials.

He had missed a lot of information because of his partial attendance at tutorials, and as he learns by interaction this was of major importance to him. For example, he showed a history
of going to teachers and tutors after failing their work so he could learn why he failed. This was his strength as an independent learner but sometimes teachers did not reciprocate.

5.2.5.2 What would you see as the difficulties with your learning style?

The message is clear and repeated a few times in our talks. When Gst has face-to-face experience with the teacher on what is required, he can take it in and does very well. But exams mean focusing difficulties, as he has poor auditory memory that can let him down. Yet despite a preference for interactive learning, he persevered with distance education because he felt he had no choice. When he was doing two units for a graduate certificate he was challenged with new requirements to read and was not keeping up. He would have to get an extension of time. He reported that it was easier to read than during his first University degree and believed this was because he used the coloured lenses which had lessened the “shimmering of the pages.”

He chose another course for the graduate certificate by correspondence, again a course which did not play into his strength: interactive learning. He puts his health to the side in order to prove he is competent as a teacher/tutor. At one stage he said how he’s “unaware of how these things happen”, that is, when he is likely to have CFS symptoms which debilitate him. My reflection was when he has the “foggy brain”, or when a migraine is coming, he is unable to access his receptive listening, a part of his learning need for interactive learning.

Gst demonstrates what Gilligan (2006) describes as dissociation, or what Davis (1994) calls disorientation, when caught in an extremely stressful awareness. If he does not work with his strength, interactive learning, in the long run his motivation would be undermined, which would consequently increase stress.

5.2.5.3 An example of disorientation.

An example of what I consider to be confused disorientated talk follows.

Gst: my girlfriend stresses about getting things done and … I’ve learned if I have to get it [an essay deadline] in if I don’t with an extension. When I need to do exams I’m ready … I know I don’t need to stress ... I need to know if I worry. Then if you have enough time have you ever not got there and you have never not got there doing the things that you’ve done before but some people have to do this know what you’re doing it.

5.2.5.4 An I-poem of the example of disorientation.

From the text above, all the words except the ‘I’ with the verb are taken out.
5.2.5.5 The analyses of the I-poem.

The rhythm of the poem feels like he is getting something (‘I have’), which is negated or snatched away by the time the ‘I don’t’ is revealed. His needs and confidence move towards some future confrontation, depicted as ‘I’m ready!’ The second cycle gives attention to the object, ‘I know’, and is negated by the edict, ‘I don’t need to stress’. Yet his needs are revealed and immediately create the need to distance from the ‘worry’ self-awareness. Further distancing is achieved by using the third person voice. The object of ‘you have’ is followed by a double negation of that something: ever, never. The reality of the present culminates in the punctured accusatory, ‘you’re doing it!’ This example revealed a metaphor for how a voice can have quality peaks and valleys: undetectable through listening to the voice, it was only revealed by the I-poem. The issue becomes whether the listener is left grasping to get the message or rendered confused, as I was.

I cannot say why this is a ‘perfect example’ of his auditory or visual recall; the topic we were addressing went onto a tangent which I could not relate to. I felt tired, partly because of my experience of his voice as monotone and because I lacked energy. The disconnection of most of this session seemed to me climaxed by the Perfect Example.

5.2.6 Summing up.

Gst experienced early childhood stress both at home and at school, aggravated by bullying and rejection at school. His stories suggest that he experienced difficulties with reading and auditory memory during his early school days. However, during a protracted stay in hospital during late primary school, he independently discovered that he had strengths in maths and
pattern recognition. By Year 7 he had also developed skills in creative writing, because of inspired personalised teaching. All these patterns point to a visual/kinaesthetic learning style.

Having discovered that these methods of learning such as maths, pattern recognition and personalised/interactive teaching, worked for him, he continued relying on them through to an undergraduate degree in higher education. However, when he did not receive the interactive teaching he felt he needed, particularly when he was not reaching his potential, he became frustrated and under-performed. It was during this time that he began experiencing visual stress, which escalated into CFS during his second degree because of the stress. At the learning level, the mismatch between teaching methods and his learning style resulted in what he believed was inconsistent assessment practices. He felt there was a lack of understanding of both his learning style and his health issues. He expressed anger about both, arguing for the need for ‘just and fair’ educational practices.

Gst worked out in childhood how to compensate for his deficit in auditory processing by utilising his strengths in visual/kinaesthetic areas. However, based on my clinical experience with learning challenges and associated health concerns, I consider that many of Gst’s learning and communication issues most likely stem from auditory limitations that he is largely unaware of. His patterns are also consistent with what Gilligan calls dissociation (cited in Kiegelmann & Gilligan, 2009) and Davis (2003) refers to as disorientation. In this state, self-regulation is difficult to achieve, which in itself exacerbates existing problems.

Figure 5.3 below summarises the main aspects of Gst’s story in terms of health, life stage, learning style and teaching style that enhanced learning.

Figure 5.3 A summary of the main aspects of the Gst story.
5.3 Ph: From Farm to University Scholar

This is a story of a diverse learner a hands-on learner (kinaesthetic), a dedicated athlete and a single father with one child. He spent his early childhood in nature on a farm, leaving school early to work in the family business, and then moved away when the farm was sold. The diverse nature of his learning unfolded over the twelve meetings we had over three years (2008–2010). He found my research project by way of the presentation session I held in April 2008 at the Adult Community Education (ACE) to recruit interested participants to my study. He had come out of concern for his son, who he suspected had auditory processing issues (Bellis, 2004). His first tertiary study was doing an entry level program before starting an undergraduate degree. He was in his second year of his undergraduate degree when we met and we continued to meet until the completion of his fourth year.

The first year we had six meetings, averaging a meeting every second month, then a gap of nearly five months before three meetings in the second year. The third year had a gap of nearly eight months, followed by three meetings held close together to complete the project.

At the follow-up individual start-up meeting (Ph1, May 2008), we settled on helping his son by doing practical exercises together that he would pass on to his son. In the first meeting I felt conflicted and bemused by his communication style. He preferred to listen without interrupting, other than saying ‘yes’ or ‘yeah’, which did not convey understanding. I reacted by talking more than I had intended. As with other co-researchers, he had received the information package (Appendix 4) and the briefing sheet (Appendix 5) which explained what to bring to the first meeting - to nominate five concepts from the Listening Checklist, which would form the basis for the development of our action plans. He came without his list, but had read the information and knew what his goals were:

Ph: I want to improve so my time so it is more efficient for one thing. [The list] was great. Starting at the top I saw one that sounded like [it] was going to help me be more efficiently organised.

From the Listening Checklist, he had picked up on the heading ‘Receptive Listening’, which is the inward directed listening. The examples from the list are short attention span, oversensitivity to sound, need to repeat verbally, sequential instructions, and distractibility (Appendix 4).

Ph: and I thought ‘That’s the one! I’ll work with that one and all the points below will follow from that.’ I got to a [point in the list] that was coming across as you need to be interested and sort of passionate about what you are doing and then you will learn. It’s kind of working back up the list from that point. That was my spin on it. It was kind of like the top one was more like a head thing and the bottom more a heart thing.
The ‘bottom’ he is referring to is the last category on the checklist (the Behavioural and Social Adjustments), which gives examples that listening can be related to: low tolerance for frustration, poor self-confidence, poor self-image, shyness, difficulty making friends, a tendency to withdraw, avoiding others, irritability, immaturity, low motivation, no interest in school/work, and/or a negative attitude toward school/work (Appendix 4). He had generalised the Listening Checklist as a head/heart connection and decided his aim for our meeting was to improve his study time efficiency – the head concepts – and to work with the values of heart communication.

In the briefing sheet (Appendix 5), the Kolb Action Learning Cycle was highlighted for the co-researchers to look for the parts of the cycle in which they may have thought they were underdeveloped. Ph wanted to explore feeling aspects, and my agenda was to develop reflective observations (seeing), to improve our learning together. It took about 3 to 4 meetings to realise that he was struggling to implement any actions from our meetings. For example, there was little feedback on him having done anything between meetings, or on how he had used the input from the previous meeting or about any of the informal actions I suggested for helping his son. With an established goal to improve feeling communication, which was unfamiliar to Ph, and a time perception issue, our relationship initially was hampered. Gradually a strategy developed. (See section 5.3.1.3) For example, coming to meetings sometimes caused him stress because of having to break away from the intensity of his study. Time perception and management are common issues with adults with Auditory Processing issues (Bellis, 2002).

My rationale for placing a strong emphasis on feeling and intangible feelings was that, if I could interrupt the learning cycle by expanding the feeling and the observation awareness parts of it, then his learning would be more holistic and his time stress may be reduced.

5.3.1 Reflective observation.

At the end of each meeting we made time for reflections on the meeting and what he was taking home. In the first meeting in particular, I sought to access his feeling state, which in regard to listening and the action research cycle was one of our first aims: “I had two agendas: I was working on mechanical and retaining information, and the more heart way [of communicating].” To meet the second aim I used feeling (‘I’ language), and gave examples from my practice. For example, I told stories which discussed aspects of mind mapping. At the first meeting (Ph1 May 2008), his feedback was:
A good discussion on feeling, and when I’m hitting a brick wall and the process of calming the mind quickly which allows the mind to open up again. Typically when I’m grappling with new concepts it fluctuates from being a little bit enlightened to frustrated, not sure where we’re going and not knowing if I’m on track at times.

He said he had felt some frustration at times, but he was unsure “…if I should have interjected.”

Absolutely, if you allow me to ride over you…

No it wasn’t overriding. It was a case of I’ll ‘hang in’ a bit longer. If I get this, I don’t want to change track. I like where she’s going but I’m not quite sure I’m with her. But I don’t want to change track again—I want to keep going down this path.

5.3.1.1 Reflection on the use of feelings and story.

When you mentioned a feeling I wasn’t 100% sure you were giving me an example or an actual feeling of how you were feeling…um, may be frustrated or more annoyed…I was sitting there feeling annoyed—not sure 100% what I am being told. But I think we had not followed—we were on several good pathways but more we had gone off on a different one…I couldn’t get over the fact that neither one of us had the reflection which would have made me clarify.

I agree with him that I had not clarified sufficiently as we went along that we were on track. Rather, I kept bringing in more examples. In his mind we were “on different pathways”, but for me there was too little feedback to know if he was listening, other than monosyllables like ‘Yes’ or ‘Yeah, yeah’, which were not always convincing. This reflection helped me understand that this was an unfamiliar way of communicating for him.

5.3.1.2 What representational system did Ph use in this initial communication?

The communication system a person mainly uses can be helpful to understand. Matching their style of communications can quickly deepen rapport (Ellerton, 2003). While I was not planning to do this in the situation, as I was listening to Ph’s first main talk (Section 5.3 above), his word usage stood out for me. He used, for example, ‘itching’, ‘spin’, ‘kind of’ (kinaesthetic), and ‘sounded like’ (auditory) representations. In the Ph quotation at the end of the previous section above (Section 5.3.1.3), he used more kinaesthetic terms, including ‘overriding’, ‘hang in’, ‘I like where she’s going’ which were about movement, and ‘I want to keep going down this path’ (visual/kinaesthetic), but also ‘I’m not quite sure I’m with her’ was for auditory processing. And it can be seen that I also used kinaesthetic representation a lot, which may have been a factor in the development of our rapport, and why we continued to meet.

I am also aware that how a person perceives time can highlight perceptual integration issues. Ph indicated this early by being disorganised for our first meeting (not arriving with the agreed work). I was to find, as we went on, that time perception was indeed a major issue for
Ph. My professional experience is that time perception as an internal process is tied up with feelings, and is not simply a ‘time management issue’, as commonly believed. This was supported in Ph’s case by him demonstrating emotional communication issues as well as time mis-perception.

5.3.1.3 My action after the reflections: A teachable moment.

Ph’s feedback confirmed my feeling of us both being uncomfortable with our initial interaction. I experienced a lot of agreeable ‘yes’ answers and passive listening from him, but suspected there was a blankness happening, that some of my information was getting lost inside him. I wanted to develop our interaction to be more of a dialogue. I explained how communication and listening is a two-way process, and that including feelings is an important part of defining and expressing active self-listening.

I suggested that using feeling statements in conversations can bring both people to the present moment, help engagement and mutually develop their ideas. Behaviours that convey the opposite, which are distancing, include a person referring to themselves as ‘you’ rather than ‘I’ in conversations. My strategy for times when I am conscious I am not present, and am losing the essence of what is being said, is to make an “I feel_” statement, adding words to express my present awareness of the situation or conversation. Sometimes to remind myself to focus internally, I touch my heart area. This kinaesthetic/verbal technique can strengthen my communication and my dynamic state of being with people as I intervene in my own process. This always has an effect on the other person. I went on to add that at times I can be stuck for words after I have said “ I feel_”. I no longer find this embarrassing, but believe that I will eventually find the words, and with practice it does happen. When I started, I had to be willing to let go and trust. Sometimes my intervention might not lead to a feeling about the situation, but rather to a feeling of acceptance of the situation, for instance when I may have been uncertain. For example, I might say “Hang on, I don’t have to be right”, where the feeling is that I can accept the situation as it is and can let it go.

5.3.1.4 A meta-reflection.

My own example above was rich in kinaesthetic words – ‘feel’, ‘point to...my body’, ‘action’, and ‘hang on’. I was introducing this way of communicating as a new concept to Ph, and illustrating it with kinaesthetic phrases and words; however he was still resistant when I asked him for further input. So I attempted to put these ideas into his personal context, to differentiate between inner listening and outer listening. As an example, I suggested that if someone were to say, ‘I am a little bit irritated about…,’ the listener would clearly recognise
that the speaker was expressing their own inner feelings, thus clarifying the discomfort that they were both probably feeling. This clarity would give them a much better chance of staying connected.

I got so little feedback from him that I was unsure if what I had tried to get across to him had been comprehended, despite my giving liberal examples from my own experience. I then gave an example regarding his communication with his son. In the mornings when Ph was irritated, almost certainly his son would pick this up and be silent and shut down. Ph could use this as an opportunity to reflect back to the boy later in the day, starting another conversation like: “Did you notice when [whatever the situation was], I felt irritated. How did you feel?” His son would be able to answer, opening up the possibility of a new depth of communication between them, through incorporating reflection, listening and acknowledging feelings on a deeper level, leading to greater appreciation of each other.

5.3.2 Feeling awareness.

This section is from the Ph 6 2008 meeting.

I learned that Ph usually read out loud to his nine-year-old son before sleep, and recognised that this was a bonding time for them. However, at the time of our working together he had ‘let this slip’ for four weeks and his son was complaining. Therefore, as part of our action learning, we agreed that Ph would have his son read aloud to him. One of the aims of the exercise was for Ph to listen for the level of his son’s reading comprehension, and to reflect on the story with him. I hoped this process would enable Ph to gain insights into the relationship between listening and learning.

After the boy read his own stories out loud to his father, Ph taped comments and feedback from his son. Ph reported that: “We often are reading and I'm not absorbing any of it, because I'm falling asleep as I'm reading.” He believed his son seemed to have good comprehension, because the following night he would ask him what the story was the next night, and he would know what was going on. So despite Ph recognising his son’s comprehension ability, the boy regularly wrote creative stories, but “the teacher talk [is] going over his head”. For me this is a conflicting message.

Ph: He’s a language kid – I don’t remember him learning to read. I didn’t sit down, I didn’t try manipulating – but I read to him every night. And then at some point in time he started reading after I finished reading to him.

I asked him to bring some of the stories his son had written so that we could look at his writing style. He brought in two stories: a Ninja fantasy where he had used the word ‘implode’ correctly, and a second story, a ‘relational fantasy’. Part of the text was: ‘...and
once, screamed in the middle of the night, my parents are scared of me. I hear them saying that it’s mum’s turn – its mum’s go to change me, she gets her bulletproof vest.’

This imaginative text led to insight into Ph’s learning preferences. Ph said after reading this: “This doesn’t make any sense. That’s what I think in my head.” But then he saw it as a ‘pointer’ to something deeper, and did not wish to follow it up with the boy, fearing that “…it may destroy his ability to use this medium [reading aloud]”.

My reflections were that Ph clearly was expressing his feelings, and I wondered how I could encourage Ph to work more with feelings, while continuing to acknowledge, respect and encourage the boy’s writing process. Ph was excited for me to hear this tape because he was sure I would see how smart his son was. As I listened and reflected on their conversation, in my mind the focus shifted from the son to the father. Although we had been working on generating feeling responses from the boy, here was the father unable to do that very thing, which rather confined him to analysing the experience.

Ph: Umm, I had predetermined ideas about what I wanted him to talk about, and he spoke about them anyway and I missed them. And um I think I might have asked him again about…and he had talked about it anyway.

I wondered if, by his predetermining, he had kept in control in the father role. How Ph related to his son was very similar to the pattern he showed in our first meeting – going silent or saying meaningless ‘yeah, yeah, yeah’. So I again asked what he felt upon hearing the tape of the communication between him and his son. Now he said: “Disappointed that I didn’t hear what he was saying.” I replied: “It wasn’t about your hearing – it’s about your listening.”

Then, as if a dam had burst, he became animated and described his feelings.

Ph: when I first listened to it, I was like ‘God! God!”, and it was as I was saying it, you know, ah, Jesus, where was I, like what was I – what am I trying to – I’m trying like manipulate him into go where I want him to go, say what I was hoping he should say.

He was really quite disappointed that he had not listened and said: “[I] wasn’t just absorbing what he was telling me. I was processing, I suppose.” He acknowledged feeling anxious about the reading out loud exercise because it was a ‘plan’, and he was never comfortable with setting structures for his son. But at the same time he was pleased that I now had a better picture of his son, because he believed that he usually focussed on the negative aspects of the boy. At this point Ph was actually articulating his own feelings, which he rarely did.

Interestingly, on the tape, the son responded assertively to Ph’s attempts at questioning, declaring: “I already told you that!” This suggested that despite Ph’s fears, the boy was capable of expressing some feelings, and he was not inhibited by the reading and feedback experience. This emphasised that the main issue was not the son’s communication, but rather,
the father’s. What Ph was projecting onto his son was what he was in need of addressing within him.

5.3.2.1 A Meta-reflection and analysis on reading aloud.

I suspected that the pre-determining Ph talked about earlier, when trying to organise his son, was a similar pattern to when he silently listened and processed when I was speaking. This was achieved by saying yeah, yeah, yeah an expression of feeling and agreement, but what feeling? I gave me little understanding of his auditory processing of “…not absorbing what I was telling him”.

5.3.3 Listening as communication: What are the effects on learning?

This section is from the meeting Ph 6 2008.

My ongoing issue was with what I called his ‘silent listening,’ where he appeared to be listening by saying a courteous ‘yes’, yet it didn’t feel satisfying, and prompted me to do more monologue rather than to develop the conversation into a dialogue. However, he began to explore his communication:

Ph: when someone says do you understand what I’m saying there’s two things I can do. I can go yes and I know what they’re saying, I can go yes and have no idea what they’re saying or I can pause and make sure I know what they’re saying.

I added to this that he could give feedback to the person and reflect what he had heard so far, developing the skill of summarising. It keeps the conversations moving and the concepts developing for both parties. An example: you could say ‘What I think you said was…’ and in this manner we add on to others’ understanding, which can develop into a dialogue. When I espoused new ideas, he seemed to be constructing them in his head and comparing the new information with his concepts. Such a process takes time and it was difficult to know what he understood as he did not ask questions.

Ph: I've probably don't trust the ability to, to just soak it up. It's like, like if I don't actually construct it and make sense of it as I go, it won't be there to retrieve.

So the feeling is unsure: he is anxious that the information may be not accessible. In our learning situation together it may not be ideal, as I find it hard to connect because I do not know what he has absorbed. Perhaps some of our conversations do not warrant such an intensive approach.

Ph: but I'm here to learn something. Yeah. See and what I feel like you’re saying to me is to just uhm is to just relax and experience, experience rather than to try and be constructive all the time, and store.

His pattern of communication was deepened after I reflected on my own listening pattern.
Kay: What I noticed how I talk more than I would like sometimes and listen less to myself I may go into a monologue as I link ideas. Although this ‘interlude’ seems like a distraction from the main topic it usually has relevance. I usually come to a point of completing the circle and get back on task. If I don’t, I need people to pull me back, question, or share responsibility for managing our time. I’ve noticed you’re getting better doing that.

Ph: maybe not last week but the one before I remember we went through that process sometimes just I’m processing what I’m going to say at the same time I’m trying to talk…

That is one of his patterns to slow down his auditory processing and any consequent action.

Ph: There was a moment here earlier, where I was going yeah, yeah, yeah, yeah, yeah, and I thought about that as we continued on. I thought, when I say yeah, yeah, yeah, yeah, yeah, I’m often trying to decide whether I need to say what I’m thinking or whether it’s going to be too much information and to just hold it back. That’s all at least that what was happening on that occasion.

5.3.3.1 A meta-reflection.

His pattern of ‘yeah, yeah, yeah” may be done as a point of wanting to act, to stop the flow of the conversation and regroup his thoughts. Does it work for him? The problem in our communication I react by continuing, sometimes going faster, and I consequently lose contact with myself, and this moves to self-doubt to question for feedback that he has received the information. I now think of his ‘yeah, yeah, yeah’ as a warning system. He is reaching the overwhelmed stage and could be about to switch off. Why otherwise would I speed up? Speeding up indicates I have lost connection and feel disconnected. We need to come to an agreement about how to handle this, as it may impede our progress. Perhaps many of my suggestions were not acted on because the communications were not processed sufficiently, despite him making the sound of yeah or yes. This is a repetitive behaviour and I found there was little change in him taking some responsibility for developing our discussions into a two-way conversation.

5.3.3.2 A sound discrimination example.

This section is also from the meeting Ph 6 October 2008.

Our conversation on sound discrimination began when he was telling me about a recent conversation with his parents, where he was spelling his email address to his mother. He sounded slightly impatient.

Ph: I can't believe they haven't heard what I've said… I started off trying to tell it to my father and he said, ‘I can't get that’ and gave the phone to mum, I tried to explain it, to tell her over the phone and she kept getting the words, letters mixed up. P and B and___

This was a great example and an opportunity to discuss sound discrimination.

The first aspect is that the sound environment of the telephone is usually difficult because it is designed for a voice range of frequencies between 300 and 3000 cps. We can hear it, but it
does not cover the full range of sound in the voice – that is, it has no quality in the mid-range frequencies (Rodman, 2003 as cited in Roup, Poling, Harhager, Krishnamurthy, & Feth, 2011). So the frequency range when speaking on the telephone is restricted, with fewer of the high frequencies necessary for comprehending speech. For older people this can be difficult because by attrition certain high frequencies are lost. In fact, “one in six Australians are in some way hearing impaired, with over half of those aged between 60 and 70 affected” (Australian Institute of Health and Welfare, 2012, p. 309). Missing high frequencies may not affect an older person in a general conversation but it will become difficult, for example, when a caller has a foreign accent.

A second aspect is voice tone, which in Ph’s case is he has quite flat and monotone voice. While his voice is very familiar to his parents, it will be difficult from both aspects; the monotone voice and one frequency range challenging auditory perception and discrimination. The same process happens with children, and is usually referred to as the speed of processing issue (Peter, Matsushita, & Raskind, 2011). This is why some children may make up words or put images in as they are reading. It can become an automatic process. If you listen well enough to them you can hear this ‘gap filling’ when they are reading out loud.

5.3.4 The influence of auditory processing on learning style.

5.3.4.1 The pain of rote learning.

Ph was adamant in regard to his son’s learning; to avoid any rote learning processes. He believed it was ‘almost subconscious’; he would rather see his son fall behind in maths than to

Ph: give in and say all right, you come home, you eat, we do half an hour of maths before anything else. And we sit down and just hammer it out, that’s kind of what works for a lot of people.

He was feeling pressure from other people to do impose rote learning on his child.

Ph: so that they will get up to speed with this amount of time with the other kids…and that’s where I draw the line basically. I’m just not going to go there; it’s just too stressful for me. It’s probably the main reason why I won’t do it. But I also honestly believe that it won’t teach my son to enjoy learning in any way, shape, or form. So I sort of flummox around without having any real plan.

I suggested that he share this with his son, as it seemed it may be better that he tell him his stance, rather than putting him through pain that seemed to be happening. The big picture that learning has to be fun was very important to Ph yet there was little evidence in our work that this was happening with his son’s learning at home. His narrow definition of the way rote learning is ‘executed’ and the lack of understanding of why rote learning could be useful, are
enmeshed with the pain and stress of his early learning, and perhaps got in the way of effectively helping his son.

### 5.3.4.2 Meta and theoretical reflections.

Ph seemed to have to work out in his head what something means when communicating either verbally or when reading; this surely must become a time consuming and stressful process. For some people it doesn’t matter how much they have been hammered through rote learning the issue, for example, a math problem can remain. This occurs mainly when under extreme stress and when without the awareness that there are old solutions operating may cause difficulties. In practice I have found such old solutions can be behaviours, habits, and mental tricks, which may have originally taught to help children to resolve their continuing mistakes that have caused their disorientation. Even those children, who are more visual spatial or hands-on learners, may not have strong auditory processing, will use old solutions. Examples of old solutions in mathematics are finger counting, or having ‘time’ rituals; or may only be using digital clocks rather than clock faces, or using rhyming methods such as ‘thirty days has September…’ to know the calendar. Davis points out that in adults it is almost certainly those “behaviours associated with time boundaries [that] may give insight into an overall issue of poor basic maths foundation” (Davis, 1994, pp. 252). Using the metaphor of the building, to have poor foundations means putting continual stress on the building when confronted with new learning in mathematics. The biggest outside observation would be the amount of time needed to get the information scaffolded. An old solution can unravel in adulthood, sometimes in unexpected ways. One client, a highly successful nurse manager, was in a supermarket looked at a sign showing a 15% discount on a product she wanted. She tried to mentally work out how much it would be. Her mind went blank and she started to shake. She believed her panic attack was triggered by looking at that sign. She told me that she had always had trouble with maths, but got by (FD, personal communication, 2005). Another example from my professional practice was a young man working in a club who had to collect the money from the poker machines. He continually went blank when he had to write down the date and time he emptied the machines. He had not been able to change this and was in jeopardy of losing his job. He was becoming over-stressed by this daily number disorientation. He had lived a life ‘off balance’ without knowing it and his hidden perceptual issues were triggering further stress (CT, personal communication, 2007).

Another set of old solutions that can come into play with excessive reading is an unconscious process. If the person reads with their eyes and the auditory processing is not balanced with the visual processing, in the role of teacher, when the person reads aloud you hear how the
brain compensates by adding words (gap filling) and/or ignoring words (see an example in Gm 4.5.2.1). When communicating, this lack of balance is seen as the person staring at you or as a vigilant look (Gm 4.5.2), which can take on the form of cognitising every word, as though the person is having to make “a constant effort to arrange the exact words…” (Berard, 1993, p. 21) or of concepts to connect to their mind pattern. It can be quite extreme in some people, and is an uncomfortable one-way communication. It certainly at times felt an uncomfortable way to communicate for me.

Old solutions when reading, may interrupt the flow and comprehension of a text, for example having to constantly repeat read. One way to bring reading old solutions into conscious awareness is to interrupt the visual reading pattern by using the voice in a focused way is by reading out loud. I did this with Gm on a number of occasions. Most people will show traces of old solutions, but if auditory processing and dyslexia are known issues, there is more certainty that invisible old solutions may slow down learning, build up stress and lead to a dis-regulation.

5.3.5 Developing self-awareness.

Following on from the attitudes to learning, it was becoming clear that Ph’s passionate thirst for knowledge and competence in his studies was to some extent driving his behaviour. Perfectionism was beginning to show, in the form of needing to do assignments to perfection, which entailed excessive reading and researching. This section further explores attitudes to learning from a bodymind awareness of balanced sensory perceptions. Three different examples of learning ‘incidents’ gradually expand the notion of balancing perceptions, helping the reader understand that these are different aspects of the broader idea of disorientation of perception.

5.3.5.1 Not being present: could it be a type of disorientation?

Keeping in mind the struggle to communicate with his son in a direct way, Ph’s next example he volunteered as a relevant example on how to keep communication going with people:

Ph: During a conversation where I’m in dialogue [and the conversation is] going backward and forwards, I’m obviously saying the right things as they are responding. But I’m not interested and I’m not retaining too much of what is being said and I’m looking to move on. An example: … it’s a bit like you bump into someone at the supermarket and you’re doing it purely out of courtesy perhaps and it’s not to talk. And you then you miss opportunities for better connections to follow as you say the bare minimum and don’t pick up on what the person is trying to tell you.(Ph 2 May 2008)
5.3.5.2 An analysis and reflection.

Two aspects stand out for me in this example: the choice of words, such as ‘you’ and ‘trying’, and the tone of voice distance the listener. The absence of auditory words in the text and the reluctance to be engaged suggested he was in his visual/spatial right brain during this conversation. The connections to this side of the brain are not as active for auditory processing (language communication) and there can be a delay in processing (Maartensson, 2007a). So I checked this idea: “It is as if you are ‘missing’, they are there but not really there – it is not happening?” He replied: “Yes definitely and that can flow through to more important conversations”. Flow of speech to more important conversations suggested he was in a non-flow mode, that is, the right brain, which confirmed my idea. I then asked what he could do to make the above example a more active process.

Ph: I probably need to move away from that feeling that you don’t have time or that feeling – that you are not there. It is already a non-existing connection to that person in life, so perhaps strike up another connection may be? (Ph 2 May 2008)

Word usage: ‘move’, ‘feeling’, ‘strike’– all kinaesthetic. His awareness followed my line of thinking and expresses understanding, however, I wanted him to be taking action so asked him what could he have said in that situation that would express a distinct feeling? His face went blank. I continued. “You’ve actually said it already, you’ve analysed... ‘I feel rushed’ – is that what you were feeling?”

Ph: Yes, it’s a shame I haven’t got... I manage to put meditation in there as well to try to be more present and talk about working from the bottom up more trying to be at the same point I was talking about ….(Ph 2 May 2008)

He took the known option: expressing understanding of what the concept of using direct feelings meant in his ‘map’ of his world. The word ‘try’ used twice suggested he felt a lack of skill using this more direct feeling action. Does it also suggest a feeling of helplessness?

The last interaction, which starts ‘It’s a shame I haven’t got...’ I was confused by what he was saying. Was it an avoidance to take action? In retrospect I think it is more likely to be that I am suggesting a completely new way of behaving, directly using feelings in conversations, and he had difficulty too quickly integrate my suggestion and act on it. What I could have done was to focus on his words more. On another level, the scenario he brought forward suggested his lack of interest in the conversation. This led to him not ‘picking up’ (not tuning in his ears), and not speaking out (taking a firm action), meaning that he did not motivate his auditory system, which would mean little chance of orientating himself to the message of the person. He needs to act by asserting himself through his voice and that was what I conveyed.
5.3.6 A small disorientation: The challenge of sound discrimination.

This section is from Meeting Ph 6 October 2008.

Ph agreed to carry out an action learning activity aimed at improving both awareness of learning and auditory processing. This particular experience, technology-based Brain Boy, was developed to test and to train the processing speed of both auditory and visual senses, which will ultimately train the central processing and perception of the human brain (Warnke, 2007). From the series of games for this purpose, and to improve laterality, the game chosen was a time measure of the processing speed of visual/auditory only.

The process was to have a headphone plugged into both a visual socket and an auditory socket. The player sees two lights come on, while at the same time two clicks are heard in the headset. The task was to choose which side you hear or see the pair of sounds (clicks) coming from first. Most important is to have the headset on the right way, so the click corresponds to the same side as the light. The more that the player gets these pairs correct, the lower the score and the longer the game goes, as the speed of processing is increased and the brain becomes more efficient at processing auditory and visual input.

I gave the verbal instructions, had him play with it and then left the room, because I wanted to assess how he managed a new challenge with verbal instructions. I was surprised and delighted by the result, which I believe showed up his ability to self-correct and deal with frustration. Here is his awareness of the process:

Ph: I couldn't, I couldn't believe that I wasn't getting any score on this and I, I, I, I assumed the machine works out if you miss file 1, 2, 3, to 4 times in a row, you've got no score. I felt confused. All I could think is that the machine was falling down. I was getting clearer and clearer and clearer too, in my mind it was so easy to go back. It came from that ear first. And yet…, I was wrong! So, I find, I find after three tests, I worked it out. I thought all I've got to do, is if I heard it in my right ear, I've got to press the left button.

Taking the above text and making an I-poem:

<table>
<thead>
<tr>
<th>Sound/light discrimination</th>
</tr>
</thead>
<tbody>
<tr>
<td>I couldn't</td>
</tr>
<tr>
<td>I couldn't</td>
</tr>
<tr>
<td>I wasn’t</td>
</tr>
<tr>
<td>I, I, I, assumed</td>
</tr>
<tr>
<td>I felt confused</td>
</tr>
<tr>
<td>I could</td>
</tr>
<tr>
<td>I was</td>
</tr>
<tr>
<td>I was wrong!</td>
</tr>
<tr>
<td>I find</td>
</tr>
<tr>
<td>I find</td>
</tr>
</tbody>
</table>
I worked it out.
I thought
I’ve got…
I heard
I’ve got to…

He quickly worked out that he had put the headset on back to front, which meant the sound
and light were coming from opposite sides.

Ph: before I went on,…I got a bit excited about that. And I stuffed up the pattern I changed it from
the exercise to the next game …and I had to work out how to get back to the original one.

He was distracted by having to work out which exercise from the six in the machine he had to
work on. What followed was interesting. He got back to the original game but:

Ph: I just wasn't concentrating properly. I'd love to do one more [so that he could prove his
competence?]. When the lights were on, I was, I felt that my perception was– I wasn't really
noticing the tick, tick. I wasn't even– I didn't even,– it wasn't even in my consciousness the
first couple of tests – when I got, if I could recover from getting one wrong straight away, not
so bad, but if I got one wrong and then the next one I got wrong as well, then I felt confused
and…

The mental effort of working out what was wrong in the first few games, losing the game and
having to find his way back to the original game meant he lost concentration, as though he
had no control. He talked of not being aware of the ‘tick tick’ sound. Did this mean he had
switched off his auditory perception and was relying on the visual perception to make the
game decisions? He was at the point when he had a sensation of confusion or disorientation.
He had ‘pushed through’ to make sense of the machine, found a solution and then experienced
a physical after effect. I asked him to describe the confusion, and where he felt it in his body
and he answered: “Just more of not keeping up, I think. Uhmm”. He gave the rationale instead
of the feeling, without answering the body experience question.

5.3.6.1 Awareness of body and feeling.

Having observed his body language, I said: “But you are pointing to your gut; you're feeling it
in your gut?”

Ph: Yeah, yeah, yeah, I suppose that's where it was.
Kay: Did you feel it in your gut a bit of a knot happening? Does this feeling happen when you're
studying?
Ph: I think it's maybe at that point where you're on the verge of umm well in a, lecture anyway, if
you're not quite keeping up and you know that if you don't be aware of what you're not kept
up with behind or get on top of it within the next couple of seconds, that you might lose the
rest of the lecture.
Kay: Yeah. Yeah. That's right. So it's about you're losing your orientation, your mind orientation is
going. … Your brain begins to disorientate and you need to find a way to hang on.
5.3.6.2 A Meta-reflection.

The above scenario had all the elements of another small example of disorientation of the senses. The elements were the confusion, the experience of the separation of the visual from the auditory, and the acknowledgement of a panicky feeling which was body based and immediate. Interesting that in this case the auditory became insignificant, yet it was this sense that let him know that something was wrong when he started with the game – that the visual and auditory were out-of-sync when the headset was back to front.

5.3.7 Reading aloud: Getting orientated through voice.

This section is from meeting Ph 6b 2008. In this scenario Ph reads his son’s stories and I noticed that he went blank for a moment:

Ph: Yes, I knew it doesn’t make sense; I went back and read it again. And then the second time, when I finished reading it, I didn’t find – it still doesn’t make sense and then I realised that there was more to that sentence. I went into a strategy to try to work out why it didn’t make sense. Initially there was a blank.

In section 5.3.2 Ph demonstrated the need to repeat read when a part did not make sense to him. Unknown is what the trigger was for him not to make sense of the text. It can be for example that the person does not see/hear a letter, a word, or in this case it may have been the whole meaning of the text. I already knew that his speed of processing (Section 5.3.7) was an issue, when Ph had done the challenge of the technology and sound discrimination. I used a strategy to get a right ear advantage (REA) (Section 4.3.2.2.1), which was to use his hand as a microphone while reading aloud, as is described in Section 6.3. I then asked him to read the same passage again to see if anything changed and he gained insight into his processing.

Ph: I think it jumped into my mind a little bit… I wanted to mentalise what I was reading. And, just try to not do that just keep going.

K: And you’re listening?

Ph: Um, that I remember hearing was more was more um in my voice----my voice was more animated.

He had started to discriminate – the sound of his voice.-- and had gained a deeper element of listening.

5.3.7.1 Meta reflection and the notion of a learning disorientation.

The second time he listened, he had no reason to “mentalise” the reading. By using the hand to deflect the sound of his voice to the right ear, increasing the amount of auditory information getting to the right ear/left brain, a change in focus and auditory fluidity was possible. This led to an awareness of listening to himself speaking and he could analyse that.
To focus and get a deeper flow meant the ears were ‘tuned in’, and he listened with the flexibility not to mentalise, as is his habit. Davis (1994) defined disorientation as:

The loss of one’s position or direction in relation to other things; a state of mind in which mental perceptions do not agree with the true facts and conditions in the environment; in some people, this is an automatic response to confusion (p. 249).

Using the concept of disorientation in the above scenario, Ph found initially that his mental perception disagreed with what he saw on the page. What usually happens is there is a sight word missing, for example ‘be’ or ‘at’, or there was no full stop, but in this case it was an incomplete sentence. He had to ‘fill in’ and as there were omissions it would have lowered the comprehension of a text and caused a confused feeling, as expressed above at the beginning of section 5.3.7. To come out of the confusion, he immediately solved the problem by reading it two more times, found an unfinished sentence, but was not satisfied.

Children in particular, whose reading processes are punctuated with filling in missing words or concepts, experience disorientations which they continually ‘push through’. Such a process is unconscious, below awareness, eventually developing into deeper stress issues, often of visual stress. Others who may be slow to pick up the text require many re-reads. If the gaps the person experiences while reading text cannot be filled in, such as a new concept not mastered, a constant re-reading of new information can be done in order to get any of it into auditory memory.

In the ‘not being present’ scenario (Section 5.3.6.3), there was a trace of disorientation as Ph was not sufficiently listening to engage with the person and he acknowledged this was habitual. His perception was that the act of listening was time consuming and stressful.

When learners and educators become aware of the sensory aspects of the learning process, knowing how to integrate their visual, auditory and kinaesthetic modes more efficiently can have impact on study. By recognising these mild disorientations, learning how to de-stress and focus can enhance the learning experience and develop learners’ efficacy.

### 5.3.8 Time perception: How time relates to stress.

This section is from meeting Ph 5 October 2008.

#### 5.3.8.1 The assignment ‘that got under my skin’.

Ph: was pretty important to me and I suppose that with that, with the extra hours I was putting in, just everything else starts to – fall over a bit? – Yeah, yeah, yeah, and that's just getting things revolve around, I was paying too much time maybe to Uni...I found I was just, I was enjoying
it immensely which meant I was doing a lot of reading and not always pulling it altogether. It was getting hard to put it all together and make it the way I wanted it to be.

The assignment he discussed was a practical one involving people. His enjoyment meant losing time boundaries and some confusion, showing at times as a lack of synthesising the material to his high standards. Were obsessiveness and perfectionism creeping in? Could obsessive reading and perfectionism indicate higher than normal stress levels? Do we dismiss these stress levels when it’s “enjoyable” and study?

5.3.8.2 An unresolved learning issue or poor decision making?

The first meeting in the following year (Ph 7b 2009) was after no contact for five months. I emailed and rang the last month of the holiday period and had no response. Ph was in his third year of his undergraduate. I emailed in term time and a meeting was arranged.

Ph: I didn’t go back to what I was doing with you before the holidays though and I wasn’t and I suppose it was just a case of, um – one could almost sever ties with the university and studies and just have a proper holiday. … I feel like I’ve fallen behind in a number of subjects and I’m only just keeping my head above water.

Ph: I’m losing my thought – my train of thought now as to why it’s so difficult and why it happens so often with so many assignments. The whole – initially you just can’t work out where this belongs and where this belongs in the understanding of it, let alone where you’re going to put it within your assignment or paper.

In the next breath he was saying he was on top of his work because of the hours he was working. I suggested that he was nearing exhaustion, which he confirmed. I asked if he had been exercising.

Ph: I’m trying to but – my sleep patterns have gone to crap um – in the last three or four weeks. I have that week on week off situation [He has his son every second week] so I worked as hard as I can with studies for the week…even when I have got L, I’m generally up to 11:30 or 12 on the computer so that, that’s kind of where I’m at. My technique is to try and break the back of these big, important assignments early in the semester. But I’m finding that I can stay on the computer even when my brain’s not working real well.

Was he finding this ‘ad hoc’ research reading ended up confusing him?

Ph: limit yourself as to what you’re going to read is pretty tricky because you keep---you’re not quite sure what you really need to read. So you start somewhere and it takes you there and it takes you there and it takes you there”.

No plan and direction and being continually driven to ‘the next best thing’ signals not much control and integration. At this time, despite my earlier attempts to get him to break out from this near obsession, to stop and ‘let it go’, there were not many signs of change.

On the other hand I considered this was the pivotal meeting for that year and came to think of it as the contrapuntal meeting. Using a music analogy, contrapuntal is the playing of one melody (or voice) against another in such a way that harmonises with the original melody – like a two-part harmony (Gilligan, 2003). Expressing my frustration about not knowing
whether he was actioning our work together was one melody. This resulted in a more open dialogue and a two-part harmony in the form of meaningful verbal and written reflections. I offered the following metaphor to ‘lighten up’ our conversation.

**5.3.8.3 A metaphor for ‘letting go’**

During this year, Ph continued to have little flexibility in his study habits. I used the following story in order to build awareness of what I thought of as ‘holding on’.

<table>
<thead>
<tr>
<th>That dog has a bone!</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kay: You sound like a dog with a bone in its mouth and he’s not letting it go. Can you see the dog holding on, dancing about going ‘grrr, grr, grr’ and you say: ‘Come on, give it to me! And as you come closer he runs away, daring you to catch him. What would it take to get the dog to drop the bone?</td>
</tr>
<tr>
<td>Ph: I guess talk nicely and I’d give him a pat_ yeah and the dog drops the bone.</td>
</tr>
<tr>
<td>Kay: This is the message to you: Talk to yourself nicely and give yourself a pat.</td>
</tr>
<tr>
<td>Ph: Yeah, that’s some very good advice.</td>
</tr>
<tr>
<td>Kay: And then what does the dog do?</td>
</tr>
<tr>
<td>Ph: Ah, he probably runs away again happily with a big grin on his face.</td>
</tr>
<tr>
<td>Kay: Before it was really serious now you’ve been able to ‘switch’ the dog. What did you do?</td>
</tr>
<tr>
<td>Ph: I lightened up and--- spoke to him nicely, gave him a pat.</td>
</tr>
<tr>
<td>Kay: Can you do that for yourself?</td>
</tr>
<tr>
<td>Ph: Yeah, I, well, I think I’m, I really enjoy the bone that I’m chewing on.</td>
</tr>
<tr>
<td>Kay: So does the dog, absolutely!</td>
</tr>
<tr>
<td>Ph: I mean I also--- I mean I do give myself time out.</td>
</tr>
<tr>
<td>Kay: I’m not saying that you don’t enjoy it, however, you continue to not let go and your brain doesn’t switch. You waste your energy, time and what suffers?</td>
</tr>
<tr>
<td>Ph: I—I don’t know.</td>
</tr>
<tr>
<td>Kay: Your sleep patterns.</td>
</tr>
<tr>
<td>Ph: Yeah. (Meeting Ph 7b 2009)</td>
</tr>
</tbody>
</table>

This story confirms the difficulty he was having while deciding to stop something that he considered was all consuming and ‘enjoyable’, yet his body is well out of balance.

**5.3.8.4 Reflective observations on the process on the contrapuntal meeting**

This section is from meeting Ph 7b 2009. The following data demonstrates a coming openness, awareness and development of the communication and the linking-in to self-regulation theory.

Kay: You have to start to look at your stress levels because this is what we’re talking about. How do you feel right now?

Ph: Fantastic, fuzzy, fuzzy. I’m not – I’m a little bit um I was expecting to be um really flat today.
Kay: You seem to have come full cycle. You came in with some sympathetic ‘up drift’ and have come ‘down’ with the parasympathetic activated. You are very much on a sympathetic with some anxieties and you know what you’re going to do. You’ve come to a point, I don’t know when that critical point was but it was a point of ‘ah ahhs’ and then you’re down the other side with the parasympathetic and the result is you’ve got a nice buzz in your head.

Ph: Yeah. I think it happened when we started talking about um why, why it’s so important that I nail this, I think, and it went from the fact that – because I’d like to go and use this information to help people Mmm hmm. And this is where I’m headed is probably in the area of –, and so it’s where a lot of the anxiety comes from is that I want to get this, I want to get this right. Mmm.

Kay: As a student you are making it difficult for yourself by choosing a very challenging hard case. Is this your pattern? In terms of your confusion and desiring to do more when the task may be to do less… means you’re worried that you may not get it for that future thing- just stay with the present.

5.3.8.5 Challenging the use of meeting time.

This section is from meeting Ph 7 2009. I challenged Ph to act on the information he was receiving in the meetings – I was frustrated. I kept making suggestions for actions he could take by describing ways he could help his son or himself and nothing was coming back.

Ph: I actually, yeah, I’d be more than happy to um I think that what happened with me going off the radar is that um especially when I’m back at Uni there’s always that conflict of um time is, have I got time to be seeing Kay for an hour?

Kay: You’ve got to value it. [And then came some feedback].

Ph: Actually it goes---as we go, it will be more like uh something that happens in my life everywhere

Ph: I do things in chunks… do use my exercise to some degree [and] do it in chunks. I um tend to study until it’s just not happening and then I’ll jump on the bike for like three hours.

Previously, I learned that he would do six hours of reading in one sitting. My thinking was that the ‘reading muscles’ become overstressed with such long sessions and create sensory stress on all levels of the brain – auditory, visual, kinaesthetic. This would push up the vital signs, whereas to do sessions ‘a little and often’ trains muscles and would accumulate and give stability (Mackinnon, 2000; Tallal, 2006). Ph acknowledged that this sort of behaviour “is a risky pattern”.

5.3.9 Reflections on time boundaries.

The gap of nearly five months between meetings, I believed, was to do with Ph not organizing his time efficiently. The following conversation is the meeting following my challenging this.

5.3.9.1 Verbal.

Ph: If you’re talking about the cycle of just my own uh the way I feel and coming in a very speedy sort of state. Not very clear. Um, I’m just not feeling very open, yeah
Kay: When you said [last time] ‘I thought you’d probably given up on me’ at the beginning of the meeting, I felt unsure, it felt rejecting, it was difficult for me because [it] pushed my [life] into a small cycle of self-doubt, thinking well I’ve been of no use to him.

Ph: No it’s um it’s always quite profound when I come in here and talk. Mmm hmm. But then when I go out um this sort of advice is great and I’ll use it, I have used it um mind mapping I’ll use but not when I feel that I’ve got the most out of the meetings. [It is]… more that I’m learning something but I’m not sure what it is. It seems more of a subconscious thing that happens. It’s more of a relaxed – learning to relax a bit and maybe trust in what’s in my head already, that sort of thing. (Ph 7 2009)

At the end of this meeting I suggested he send me by email a reflection on what had transpired for him in this meeting. I particularly wanted to know about his time boundaries and how they are affecting his self-regulation. The following extracts come from the written dialogue that developed.

5.3.9.2 By email.

| I think it’s a matter of acknowledging the power of reflection and wastefulness of being unaware. Once that’s done you make time which saves and adds quality to time. |
| Ph, 7 2009 |

Ph provided clear insights in his email reflection, which linked the importance of self-reflection to changing behaviours.

Ph: I look forward to the meeting and value it. However typical of the last few weeks I was working on stuff up to the last minute….It’s as if I put too much emphasis on my own time and not enough on others. It does cause anxiety….My thoughts, actions and general being more organised after the meeting as opposed to immediately prior.

It's not that I lack awareness I know when things start to spiral. But it's easy to say to one’s self ‘drop the bone’ it will still be there in the morning! It’s another thing to do it. It ain’t always easy to see or sense the benefits in letting go. [I] can only see the benefits in keeping ongoing till the task has been completed. (Ph 7 2009)

My thought was that keeping going on a task to a point of collapse could be perceived as a passive act. It means no internal decision is made to stop, and has been considered as a time perception issue (Vobs & Schmeichel, 2003). Figure 5.4 shows Ph’s learning issue, process and outcomes from AR3 meetings.
5.3.9.3 Further verbal reflections.

This section is from next meeting Ph 8 2008

Ph: Yeah, it was pretty cool, umm, because, I think it helped to stop a cycle from repeating again. A cycle of, probably, overwork, where you kind of get too caught up in the, the studies, it’s mainly studies, because that’s what my problem was, I think, when part of the problem was getting dragged into my own head too far. Yeah and, to the point where you can’t, you lose track, you lose awareness that you’re losing balance in your life. Umm, specifically just way too much time in front of the computer and your own head, and, not where I want to go in life anyway.

He acknowledged that his stress cycle was curtailed by the use of the email reflections. This fight not to ‘get dragged into my head too far’ is a disorientation which he struggles with identified by the loss of time and spatial orientation (Oitzl & de Kloet, 1992).

Ph: Doing the reflective process helped me to see that it was happening again. It was a little bit of a kind of self-counselling in a way, and a little bit like a different form. I use a bit of meditation to try and take myself out of my head and back into the real world, but this achieved a similar purpose, one thing never seems to always work.

Having another way to reflect, in this case by writing with an inner focus, seemed to help connect him back to the real world. It was an emotional support which empowered.

5.3.9.4 An intangible reflection.

Ph’s emails were very important, as previously there had been little written communication. His communication pattern is not strongly auditory and he tends to work in isolation. Using his voice in these reflections opened him to another method of inner reflection. He already used meditation; however, with this ongoing disconnection from the internal emotional side which intensive study brings, I think it is fundamental to communicate through the voice and self-listening. The style of these reflections was inner directed talk which activated an inner voice.

Following his first reflections, I challenged the detail, his beliefs or concepts that arose in his text, and returned it for a second round of reflection. This allowed the possibility to gain more clarity and depth and is an inner self’s communication, which he likened to his experience of meditation. His writing became poetic:
There is time for reflection as you run through an old growth forest or cycle through an exquisite morning you can’t put words to it…I do know that through that reflective process there was, um, a certain _____, you know, it was beyond just putting down words at different times.

Ph 7 2009

This text gave me an instant picture in my mind and I imagined it as a start of a poem. The next sentence: “You can’t put words to it…” seemed a contradiction, as it was his words in the above sentence which had transported me to experience a scene of peace and tranquillity. He had put words to his feeling and attempted to express the internal shift that happened.

What I had hoped to achieve; to make tangible the intangible feelings – those we think cannot be put in words – had been achieved. There were real observations and creativity in those last two short reflections, quite different to the verbosity of the previous page. Together we experienced those illusive or ‘intangibles’ feelings of what our meetings had been about.

5.3.9.5 Reflecting on future study – a ‘balanced’ life.

means me adopting a life that incorporates research into it. If I go down the track of unbalanced effort around the research, two things will happen: Time quality will diminish and I will drift away from my path – ways to restore a more balanced life amongst communities.

Ph 7 2009

Knowing and doing are two different things and still the letting go into action is an issue – he wants to hang on! Following these reflections he began again to do short meditations ‘to create the same calmness’ following our pivotal meeting. However, a week later, change was eluding him:

running with the buzz that comes with the early stages of working too hard. Ended up too wired. Got four hours sleep last night. Got to deal with enjoying that buzz… I’m speeding up and enjoying it want to get another coffee to enhance it. It’s only 9 am
then Sunday (a report due) at 10p.m. not so good… working through to 2am…..I don’t see it as a huge problem. Ph 7 2009

5.3.10 Body awareness: somatic affect regulation.

“Learning to express their emotions can help them empathise with others and that other’s expression of emotion is natural and normal” (Quenk, 2002, p. 143).

5.3.10.1 Meta-reflection.

This section is from meeting Ph 7b 2009, which was held three days before Ph 7 2009 meeting. I had previously expressed disappointment at our progress and the lack of learning and felt a level of disconnection. In the meetings he had said “what I was meant to do…”; to me this did not sound like he was in agreement to do it. I was curious to know: if he was avoiding and was not acting on our meetings, how were his studies?

Ph: Ah, probably the one thing that keeps coming into my mind is that when I’m, doing my reading …that’s chewing up all of my time at the moment. Mmm. … pulling together quite a number of reasonably complex um areas… I think that it’s a bit of a lack of structure and how I go about not just reading but note taking I suppose.

When I’m reading, I do a lot of reading – it feels like I do a lot of reading that is of almost no use because uh I have to go back and do it again. Mmm hmm. -but I’m not sure that it is wasted time. Frustration I suppose and the fear that you’re getting behind and uh lost time that you could have spent more productively” (?) [Voice rising up]

The elements of the chaos – repeat reading, lack of structure unable to take notes, fear beginning to sound obsessive? Was he coping at home?

Ph: Probably avoidance as of somehow maybe like coping, …With everything that's been going on in life, which is nothing unusual, there's been a number of issues where my coping strategy has probably been to just to put it aside.

This text gave me a feeling that he was tossed around by life and study, and was unable to act to stop the chaos and the remoteness. He had been asked for one month by his son to get some more reading books! When I suggested our meetings could speed up his process by confronting issues quicker, he seemed to agree. I felt our relationship was becoming more honest with this interaction. After what I considered to be the contrapuntal meeting (Ph 7b, 2009), when he acknowledged his lack of self-regulation, he described the intense process of study he had been doing:
Ph: I was self-controlling trying to follow a dogged sort of a path. Having problems with a little almost obsessed with what I was trying to learn, almost too much as if I needed to know it very well or things would go very wrong if I didn’t umm Its almost panic

I asked is the panic in his body?

Ph: Yes may be even I think it was stronger in the prior meetings (Meetings 7 & 7b, 2009) I met you and I remember walking in and I wasn’t aware of how obvious my feelings were to other people looking from the outside um just very much caught up and loving the stuff being thrown at me but feeling desperate and wanting to understand all of it.

I asked what had made the change.

Ph: It was probably not sustainable in the first place doing the level of late nights study and I was also studying physiology and have to keep the hours up on the bike as well take study further than I need to and …

I then asked how he had come to that realisation.

Ph: The last meeting came at the right – it was quite profound walking away from that meeting just feeling some sort of a release just I don’t know you spelt– no you didn’t actually spell it out.

Further clarification of the need to let go – but now it is not so much enjoyed.

5.3.10.2 Interpreting his dis-regulations.

Ph: I’m studying physiology and I have a reasonable idea of the adrenalin build up in the body by overdoing long study hours. I think that is what was happening. I was overtraining and was trying to get to an end result and I didn’t feel like I was getting there. So I just tried harder and did more hours and I kept going backwards. (Ph 7 2009)

What he initially described above was what Schore (1994) calls affect regulation. Ph was talking on one level about his internal self-regulation, but when we met and he was challenged by the reality of the meeting, it became a relational or affect-regulation. I believe it is the trust and rapport that we built up over the time that brought about a “felt shift” (Gendlin, 1981). It may not have happened without some sort of focus on the body, which the meetings gave him. He agreed: "Yes, this meeting gives me license to go into this area to talk it through. You can talk about it with your friends a bit but you hit on the spot.”

5.3.10.3 Reaching out into action.

Further reflections in this section and the following section 5.3.10.4 on the process of the pivotal Ph 7b meeting come from the meeting, Ph 8 2009.

Ph: The other thing is the reflections. I started to do again when I left that meeting (Ph7b March 2009) and did a couple of reflections with you and then stayed on track...I continued to go through the cycle and I’ve backed up kept reflecting emails with others, then with lecturers and pushing limits of what I say a bit and you find people are open to what I think.

This was an important step in his journey, as prior to this there had been little contact with other students in regard to critiquing. For example he did not share any of his written work
(for editing) with fellow students; I certainly had difficulties getting any written work and action. By the completion of the degree when this action took place and his identity as a student was satisfied, and his future research work was clearer, he was more open.

5.3.10.4 An example of the excitement/anxiety edge.

Ph: I did what I typically do I got into it I got into that spot and over my head the knowledge wasn’t’ gelling any more so I walked away from it. I didn’t need to be studying no more study basically and I’m finding a little hard to go back in now. I’m easing my way in and I may have just let it go a little too long its half way year and suddenly got to start drinking a little less coffee and hang out with friends that don’t really want to get their heads back in the books either.

5.2.10.5 Are you less driven and more self-regulating?

Ph: Unlike the previous three years of study I don’t feel the need to do well in all subjects. [Rather] I’m honing in on what really excites me and I can’t do that to the level I want to go if I’m trying to keep the lesser subjects up and start to take my life proper. Almost definitely doing honours partly because I lack confidence in going back to the working world, I’ll keep myself at Uni.

5.3.10.6 Advice for coping with study from Ph

Ph: [While] you still [get] served a bunch of info [which] lowers your own standards [to] keep working hard and try and come out of a unit feeling you’ve grasped it or back off and be more disciplined with rest and play.

5.3.11 Summing up Ph’s learning story.

This is a tale of how the pitfalls of overstudy can play havoc on a student’s self-regulation, from the perspectives of auditory processing, time perception and management, and mental health. His identity and the adjustments necessary to be ‘happy in his skin’ were initially confused with the learning issues of his son. The auditory processing issues surfaced as he developed his academic identity. His hidden learning needs were revealed as his learning goals came to fruition.

Students with diverse learning styles do not come forward to share their issues; rather, they are encouraged to be and are valued as independent learners. Often this ‘independence’ is permeated by stress, anxiety, and depression issues. It is as much a social/cultural attitude as it is an institutional problem. The university student facilities base their help on the premise of pseudo independence - you come forward and we will help you. The teaching staff generally may know of the struggle of students only from the marks obtained, and make often unintended independent decisions on to how to help the students’ learning.

Early in their academic education, such students need to be involved with other students in group work within their disciplines, where they can receive critical reflection in a nurturing
trust-building environment. A structure encouraging learning and reflective practices with facilitation of such group work, for example using an action research/learning model, students would be encouraged to understand the learning processes. The importance of active listening, when facilitated well, can embrace the whole person and include the senses, feelings and the physical body. An outcome of such facilitated group work would be developing critical thinking and reflection. These attributes are highly sought after as academic skills and are the makeup of independent learners and thinkers. Exposure to a horizontal ‘bottom up’ model would encourage working on a more equal footing with academics and make for improvement on all aspects of academic life. Figure 5.5 summarises the whole learning journey for Ph.

![Figure 5.5 Summary of Ph’s learning experiences.](image)

**5.4 Chapter Conclusion**

This chapter explored the early learning stories of three co-researchers, their related learning and cognitive preferences and their health/learning link. Each demonstrated tendencies towards a kinaesthetic learning style; although attentive, they had lacked focus as children and as adults this manifested as poor self-regulation and a proneness to compromised health. The contrast was between Jas and Gst, both of whom had chronic ill health. The third co-researcher Ph used his skills as an athlete to relentlessly push through periods of extreme study.
The three co-researchers demonstrate different aspects of kinaesthetic learning and its meaning, with regard to sensory integration and self-regulation.

In terms of the length of time of illness, Jas experienced on and off ill health most of her adult life. The perceived difference was that she was more self-orientated and willing to look within herself to find answers to everyday issues. On the other hand, Gst’s motivation was directed and connected to his illness. It was hard to ascertain whether his illness motivated him to his study or if it was the past experiences of learning in higher education. Gst and Jas each had degrees of negative early childhood experience which may have exacerbated their health conditions, but they could reach out for help when they needed it.

Ph has little memory of her childhood and schooling, other than wanting to escape as soon as possible. The auditory processing issue was revealed through turning points in the story related to his son. His study has equipped him with knowledge of sports biology, anatomy, and physiology; however, during the research he did not apply his knowledge to his vulnerability to stress. For example, when working on a deadline he did not apply this knowledge to manage his stress.

The following chapter explores the learning stores of co-researchers in AR3. The cycle is composed of the health group and two individual co-researchers. The focus is on diverse learning and health in the habitus of higher education.
Chapter 6.
Health and Diverse Learning in the Habitus of Higher Education

As part of AR3, I set out to explore the possibility of a connection between health and learning difficulties. Therefore I began an interaction with a group of students who indicated some learning issues and who could therefore be considered diverse learners. The group consisted of four postgraduate students, and we met together for four meetings. Additionally, I met individually with two further students, one from the postgraduate group and one undergraduate student, for three years.

6.1 The Health Group

Each co-researcher had a chronic health issue and experienced fatigue and pain. All were highly motivated and talented individuals. At some stage they had all registered their chronic health conditions with the university’s Disability Services. They showed varying degrees of self-acceptance in relation to their health issues; the university also demonstrated variable levels of acceptance. For instance, La had chronic pain, which she believed the university process and procedures did not make due allowance for, and this meant she did not always complete tasks in the time allowed.

Before meeting with them, I sent each a questionnaire requesting them to write about their early childhood learning experiences and to also define health and well-being (Appendix 4). This life history was to be sent to me prior to the first meeting. I condensed some of this writing into prose and it was used as the basis for developing our common understanding of some of the issues.

My aim was to create a group situation to empower the co-researchers to develop some understanding of the wider context of disability and health-learning issues. To reach these aims, I had the co-researchers read aloud their chosen creative writing texts. To explore ‘disability’, we co-jointly read a paragraph from a book by a physically disabled author (Kramer, 2003) which encapsulated what the word ‘disability’ could mean for any group of people. This exercise provided an opportunity to hear about different kinds of diversity and to learn greater acceptance of self and others. For example, after the group finished our first meeting, Ma reflected on being frustrated when listening to a music experience, because one
of the co-researchers could not get the point, and then did not have a reflective ‘inner listening’ experience to share.

My agenda was to adapt two methods, as outlined in Chapter 3: to use early learning stories as a metaphor to develop learning potential, and to use writing as a way of inquiry (Richardson, 1994). The focus was on one story per person and for some I condensed these into prose similar to the I-poems (Gilligan, 2003). These exercises were the highlight of these meetings, emotionally engaging the group, encouraging connectedness through the depth of listening reflections, and facilitating a way for the co-researchers to reframe their notion of their disabilities.

To set the context for our discussions, the first exercise was concerning beliefs about disability and also [about?] learning. I aimed to encourage the group to talk in a reflective way on their beliefs about their chronic health issue. In order to broaden and inspire them, I chose to read to them from the text by Kramer (2003) discussed above. I chose this writer because she has a progressive chronic disability, yet talks of how she transforms ordinary incidents of everyday life into her greatest gifts. For example, when talking about her progressive lack of mobility, she said, “I’m discovering that bodily stillness can be as mindful and engrossing for me as action was at one time...” (Kramer, 2003, p. 17). I also read aloud a section on writing (p. 15) where she poignantly tells of her acceptance, empathy and humour about her deteriorating writing and spelling, a major new experience. All the co-researchers could easily relate to this reading. While some may have had long-term writing issues, the point she made was a message of acceptance and being at ease with everyday issues, and the resultant feeling of empowerment. The discussion that followed, where each person gave their own reflection, was particularly valued by co-researchers. (For a meta-reflection example see section 6.1.2.4.)

The second exercise, from another meeting, used the participants’ written work, gathered through the health learning and wellness questions I had initially sent out. It was envisaged that I would use some of these stories as a stimulus for discussion. (See a sample of questions in Appendix 7).

6.1.1 The co-researchers.

Gst had had involvement with me two years earlier in AR1. His story, in section 5.2, has emphasis on self-regulation and on his perception of unfair treatment in higher education. His written work during the group was a valuable contribution.
La and I met at an equity conference and later she came to the introductory meeting at ACE (April 2008), which revealed that she had a substantial listening issue. She has a bubbly, attractive nature and is a determined, assertive woman. She struggles with pain and an overweight body. The most significant acknowledgement in the prose is that she needs to learn to accept help.

Mt had no previous AR cycle involvement with me, and we met through postgraduate meetings. She has a strong cognitive ability which enables her to independently find answers to her problems. She wanted to come to the group meetings but found it hard to make a commitment to them, possibly concerned with revealing her disabilities to others. We had two preliminary meetings which I draw on for my reflections, as well as on her presented prose.

Ma and I had met at the 2007 postgraduate conference, and we had an easy rapport because of having a common earlier learning experience using AR methodology at the University of Western Sydney (UWS) (Hawkesbury). She felt at ease with participating in this experience, although at the time she was struggling to find a way to break her writing block, which was exacerbated by her chronic ill health. Her participation as an individual following the Health Group meetings are described in the next section (6.2).

6.1.2 The four writing exercises on health, stress and learning.

The co-researchers produced variable quantities of written material, which left me with a dilemma. How could I make the volume of written work equitable, as some had handed in volumes and others only a short prose material. I decided to take the more profuse writers’ answers and restructure their exact words into shorter, manageable reflections. I did this by leaving out words that would identify them and returned the altered copy, requesting that they choose one of these condensed reflections for the exercise in the group. I outlined the process we would use, which was that each co-researcher would read their contribution aloud, followed by reflective feedback from each person, before continuing to the next contribution. We would use ‘I’ statements in the reflection, as this would help promote a feeling of safety and increase empathy and the feeling of being deeply listened to.

Given below are the four co-researchers’ prose on health, stress and learning, each followed by a reflective analysis, which includes reflections from preliminary meetings (La, Mt), to enhance understanding of their health and learning issues. I conclude with a meta-reflection on the whole process.
6.1.2.1 Prose 1: Gst.

**Good Health**

has changed.
It is a day without too much pain,
some good energy and good
functionality.
I remember it meant the energy to get
through the week
actively and with focus
I could play my sport without
little side effects at a good standard.
I could eat what I want,
drink what I want and work long
hours.

**Stress**

...a feeling
that manifests itself physically,
emotionally and mentally.
And can be self-created or inflicted.

When I stress it affects me
pain,
muscles spasms,
neck pain, irritability,
headaches
reduction in the quality of life
Prolonged stress
increasing sickness.

I manage stress by
dealing with issues there and then.
Set and forget!
Distraction via work
Effective.
Sport or training
Useful.
Rarely through drinking.

Early memories of stress.
At school conflict and bullying from
year 1 students;
when I was in Kindergarten:
my appearance; how I did things. 
I didn’t want to go to school!

6.1.2.1.1 Reflection.

When Gst shared his prose, it revealed the gifted child who could ask the hard questions from an early age. From this it seems to indicate that, even then, he was not listening efficiently. Pain is a measure of health and in his case it caused him to slow down and restrict what he could drink and eat, and how long he could physically and mentally work.

Gst manages stress by dealing with the stressors in a ‘Set and forget!’ process, which is a distractor from the internal stress, while he acknowledges that stress can be both self-inflicted and external. This can be a useful short-term strategy, but has its limitation when used for long hours of work as a distraction from pain.

He had a disturbed family life, and was bullied in prep school. He was competitive and was a motivator in his early development, despite not enjoying reading early in his development. Sport is significant for him as a stress release. Learning how to ‘tune in’, to inner listen, or to work with the inner world as a strategy to relax was not mentioned.

His learning issues were not obvious as an adult, covered by an armament of compensatory strategies which are ways to deal with the stress. In body work I knew this as a ‘somatic compromise’, which is when “…two complementary reactions go to form a state of emotional repression: a somatic compromise of tonus deficiency; and a vegetative reversal process which inactivates hormonal activity through containment [encapsulation]” (Boyesen, 1978, p. 41). For example, his regular headaches point to ongoing visual stress (Figure 4.1). He has a hunger for knowledge and wants to extend himself. From his stories it was clear he had always been different, which was noticed as early as kindergarten. The differences included body image issues and his behaviour. He was not popular because of being a restless, distractible child.

6.1.2.2 Prose 2: La.

<table>
<thead>
<tr>
<th>Good health is about:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confidence</td>
</tr>
<tr>
<td>Self-esteem</td>
</tr>
<tr>
<td>Good body image</td>
</tr>
<tr>
<td>Mental health</td>
</tr>
</tbody>
</table>

How do you self-regulate your stress?
I have fallen into the stress trap lost complete sight of reality and normality. I am (now) on a better path with greater supports. Being able to acknowledge stress and take action is an important process for me. Living alone compounds my stress. I must accept that reaching out for help is OK.

My earliest memories of stress Parents fighting- domestic violence.

6.1.2.2.1 My reflection on La’s health issues.

Based on my professional experience, I found that the information gleaned from La’s Listening Checklist responses, which was part of our introduction at the ACE meeting (April 2008), revealed that she had substantial listening issues. She nominated several factors: the need for sound stimulation, despite having an oversensitivity to sound; low energy levels; and difficulty with repeating instructions.

These factors are receptive listening attributes which, coupled with a lack of focus, could point further to laterality issue in which the brain uses a less efficient auditory pathway to process information. The effort to listen exacerbates the physical draining, where symptoms of exhaustion and fatigue lead to issues with receiving auditory information. A conflict ensues in the body to deal with the over-stimulation and the strain on the rest of the body; in particular, the adrenal gland produces a vicious stress cycle. Learning to deal better with stressors is a major lesson for La. Growing up in a stressful environment, having a difficult birth and childhood abuse in her family, and later experiencing bullying in the workplace are all major traumatic events. All these are typical precursors to laterality issues and a subsequent lifetime of difficulty in self-regulation. To manage herself so as to avoid overstepping the stress boundary and plunging into depression or other somatic compromises would likely be a challenge for La, given the level of imbalance that she appears to have developed.

She tended to talk a lot; however, when there are auditory/laterality issues, talking with others is often physically depleting, and one of La’s health issues is fatigue. Being with people will sometimes be counterproductive, and with her accompanying poor ability to self-regulate, the conflict will compound the stress she is already under – which she acknowledged conceptually, but had few coping strategies. Her concepts of health were mainly
psychological, rather than physical. I would like to see her pay more attention to her body and its needs (increasing somatic awareness). To love and accept her body is probably the biggest and hardest psychological issue she faces. As her body is a source of pain, there would be a tendency to escape the body or avoid being ‘present’. All this would exacerbate her already poor ability to self-regulate and deal with stress, despite being intelligent. La’s overweight issue was also typical of an underdeveloped self-regulation and the impact of chronic health issues.

Thus La demonstrated a predictable progression in which stress from an early age causes a slowing in the development of the auditory pathways, resulting in laterality issues. When the brain processes auditory information in an inefficient way, it is physically tiring to the body. It negatively affects the body’s ability to deal with stress and balance, and results in auditory issues which affect learning capability.

6.1.2.2.2 A learning prose from. La

I included this learning prose because it adds further information to the learning/health link.

<table>
<thead>
<tr>
<th>Do I learn differently?</th>
</tr>
</thead>
<tbody>
<tr>
<td>I always need to know the ‘why?’</td>
</tr>
<tr>
<td>I was not grasping the concepts</td>
</tr>
<tr>
<td>I told the lecturer</td>
</tr>
<tr>
<td>I believed it’s taught from…</td>
</tr>
<tr>
<td>I need something different.</td>
</tr>
<tr>
<td>I struggled …finally taught myself,</td>
</tr>
<tr>
<td>MY WAY</td>
</tr>
<tr>
<td>He was blown away, confirming my argument</td>
</tr>
<tr>
<td>men and women learn differently!</td>
</tr>
<tr>
<td>I need to know ‘why?’</td>
</tr>
<tr>
<td>I find it hard to accept face value.</td>
</tr>
<tr>
<td>I am always looking for ‘other’ ways</td>
</tr>
<tr>
<td>of doing something</td>
</tr>
<tr>
<td>a better, more efficient way.</td>
</tr>
<tr>
<td>I do not accept NO easily</td>
</tr>
<tr>
<td>this pushes me to find answers</td>
</tr>
<tr>
<td>I am very aware</td>
</tr>
<tr>
<td>I make pictures in my brain</td>
</tr>
<tr>
<td>All discussions become filmed in my brain.</td>
</tr>
</tbody>
</table>

6.1.2.3 A reflection on the La learning prose.

La’s description of making pictures in her brain in order to learn showed her to have a highly visual learning style. Her language also revealed kinaesthetic preferences. Since she identified
that she could have conflict or difficulty with learning concepts when they were transmitted auditorily, this almost certainly was her least preferred mode (VKA).

La’s driving need to know ‘why’ would make sense as a compensatory strategy. This was possibly developed early in life to enable her to feel more secure. It was an understandable response when her connection with the world around her was incomplete because of compromised cognitive function caused by poor auditory processing.

Her need to learn alone and be an independent student is also typical of left ear laterality (non REA). Left ear advantage normally manifests as poor integration of information being received auditorily (Sollier, 2005). It was therefore not surprising that she expressed more reliance on her emotional, intuitive side.

The information gleaned from La’s learning prose reinforced what was revealed by her health prose. They both point to her health and learning issues being related: that is, that they very likely developed from compromised auditory processing/listening because of her early trauma and stress and their continuation into adulthood.

6.1.2.3. Prose 3: Mt:

<table>
<thead>
<tr>
<th>Good health</th>
</tr>
</thead>
<tbody>
<tr>
<td>…a balance of body, mind, emotion, soul and spirit.</td>
</tr>
<tr>
<td>Wellbeing.</td>
</tr>
<tr>
<td>I would be able to meet the needs of these aspects equally.</td>
</tr>
<tr>
<td>I try to balance the negative aspects of myself</td>
</tr>
<tr>
<td>Over my lifetime so far.</td>
</tr>
<tr>
<td>Mt</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Stress is</th>
</tr>
</thead>
<tbody>
<tr>
<td>when...</td>
</tr>
<tr>
<td>one cannot access the requirements that contribute to one’s good health.</td>
</tr>
<tr>
<td>AND there is a lack of understanding of one’s condition by others.</td>
</tr>
<tr>
<td>Mt</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Managing stress</th>
</tr>
</thead>
<tbody>
<tr>
<td>I meditate</td>
</tr>
<tr>
<td>I need a vehicle of creation</td>
</tr>
<tr>
<td>Not being able to Move along</td>
</tr>
</tbody>
</table>
With my abilities when
I was a child.
I have ill health
My family do not understand
They think
I am a psychiatric patient.
To look after myself and
meet the needs of
my illness.
Family tensions.
Lack of understanding
Ex-husband rejection
Influence on family
I have asked:
What is my reasonable right?
It is ignored. Mt

6.1.2.3.1 Reflection on the prose

Theoretically Mt has an answer to good health, as she talked of ‘balancing negative aspects’, addressing them by meditation and seeking creative outlets for her talents. I found it hard to reflect further, other than to say the feeling level seemed void, that she talks from a place of great restriction in childhood, and that she spends her adult life seeking ways to tap her abilities. Ill health is stopping her finding a balance of these negative aspects. If the body does not regulate well, then it is essential to be inner guided to work on changing beliefs.

I wrote the following reflections after one of the individual preliminary meetings I had with Mt before she joined the Health Group.

I found three issues. Her level of trust was very low and may have contributed to her indecisiveness and my frustration as she has such difficulties in processing information, that is, she had difficulties with receptive listening. The list of health, learning and wellness questions were specifically developed to elicit a deeper understanding of the link between chronic ill health and learning (Appendix 7) and these were the subject of our meetings. Although she appeared quite keen to join she had many reservations which seemed to render her unable to make a decision. Little discussion ensued on how she could benefit from joining the Health Group. Mt did not take in the questions when she looked at them rather distracted with questions unconnected to the upcoming group. Her way of questioning left me feeling uncomfortable as she continually compared herself to me and my work to hers. She did reveal reservations in joining as people could find out about the extent of her disability as she tried to act ‘normal’.

In these early meetings she often took everything literally and it was hard to discuss anything or come to a resolution. Her mind seemed ‘set’. While she did not discuss learning issues I felt there was a gap in her ability to process information and particularly something new. She seemed to lack inner contact with herself, that is, she seems to live on the outside of herself: I heard little proactive stance, rather questioning which had little connection or added to the conversation (Personal Journal July 2008)
I used no coercion to get her to join. She attended three meetings and found it was a positive experience. Despite her limited communication in the beginning, not being prepared to risk speaking, by the third meeting she was openly communicating her views with the group.

6.1.2.4 Prose 4:Ma

A Learning Journal
I have ongoing inward struggles
Writing up my work
I have to close off the chatter about
What I’m not (my emphasis) doing
While focused on doing
Underlying feeling:
‘It won’t be good enough
so what’s the point?’
Internal tension
Creates
Procrastination causes
More tension.
Overlaying ongoing mental tiredness
reduces concentration if
I’ve done lots of reading
Synthesising the ideas is VERY frustrating
I’m not satisfied with my written work.

6.1.2.4.1 Reflections

Ma’s prose gives the impression of hopelessness, disjointed thinking, extreme frustration and an inability to cope with the feelings caused by “brain fog”. In the beginning of these meetings she was reticent, yet when she read the above piece out loud, it became the pivotal prose which brought an honesty and openness into the group and she began to speak up more. She started by saying “I have ongoing inward struggles”. For me health is when both inner and outer influences are in harmony. This is balance. My first impression from this prose was that Ma has a long-term self-regulation issue. The quotation, “What I’m not doing” sounds like an inner critic which is acting like a slave driver, telling her what to do, for example “Do more!” and “Stop not doing!” , and then her reaction, “It won’t be good enough so what’s the point?”

There seem to be two psychological issues: self-doubt, and a substantial feeling of wanting to give up, which is resignation. She recognises that the chatter in the head creates more tension and is accumulative. This phenomenon from a somatic perspective is a decreasing
“vasomotoric cycle” (Boyesen, 1982, p. 65) where the tension builds and the emotional tension is not discharged. A strategy to help decrease the cycle is simply to ‘Let it talk’ (Boyesen, 2001), which encourages expressive language to develop deep inner listening. This will activate the brain and move the person towards a new affect regulation. Her mental tiredness is the result of a dis-lateralising/affect regulation that may have been stimulated by the visual stress of doing excessive reading. To synthesise ideas while in the process of reading, ideally the executive function located in the left frontal lobe is operating. When there is dis-laterality, the ongoing stress cycle continues and little cognitive processing will take place. It is interesting that the inner critic had the last word to leave her dissatisfied with her writing.

6.1.3 Summing up the Health Group experience

The experience of the Health Group is difficult to sum up. It was positive that the meetings were well attended and that discussion was free flowing despite the diversity of the group. Ma reflected on the meetings when she started her first individual meeting with me (Ma1 2008) following the group meetings. She felt inadequate during the meetings and thought the reading aloud and the discussion on meaning of ‘disability’ were great experiences. The latter she thought could be used to demonstrate the different kinds of expressions of diversity. She also expressed being frustrated when Mt could not understand the concepts which followed the listening to music experience.

6.2 Individual co-researchers – Ma: A community advocate

Ma is a mature-age (late 50s) Caucasian woman with a long-term chronic health condition. She had experienced two major life traumas as an adult. She has extended periods of ill health, with the associated issues of a foggy memory and fatigue.

6.2.1 Family history and schooling.

Ma is the eldest of five children of parents who emigrated from Great Britain in the 1950s and became small holding farmers. As she was the eldest, her parents “needed her to grow up fast and become another pair of hands”. She felt her childhood was short, as she and her nearest brother became the helpers from a young age. Her mother was ex-army personnel and “very strict in expression of emotion” and “her love was conditional, she was stoic and lacked hugs.”

During her primary schooling, Ma was under pressure to obtain a bursary but instead of offering encouragement, the teacher said “This is how you do it!” The teacher banged a book
down and expected her to learn from it. Ma believed the book had a complexity of language that was well beyond the standard for an eleven year old and she had received no lessons on that standard.

Despite the hardship of not obtaining a scholarship, she went at age twelve to junior boarding school for two years. Her mother’s message, she felt, was that she was incompetent. In hindsight, Ma thinks it was a clash of old culture and ‘Aussie kid’ learning styles.

Another shock came at the end of secondary school exams: her marks were just below university entrance. She had always expected to go to university. The early schooling experiences traumatised her, and this was compounded by later having insufficient grades to go to university. This may have confirmed her self-doubt.

She gained a place for a cadetship with the library but she refused it. Now she rationalises this decision, based on not having a mentor to discuss the offer; she took it on face value, only to learn later that they would have put her through university. She began to have doubts – about her mathematical ability. Seeing no future or career path, she joined an insurance company.

6.2.2 Identity as an Adult.

Prior to coming to her course at university, she identified herself as a competent community advocate and trainer. Ma’s background study in action research was from her undergraduate degree at UWS (Hawkesbury) where there was a systems/reflective approach taken in some of the agriculture departments (Bawden, 2005) . Her most recent work has been in the community as a trainer and advocate, meaning that she possesses quality facilitation skills and resilience. Her work role as a practitioner trainer of adult learners was her most familiar confident and competent identity. In our interactions, I noticed she fluctuated between practitioner and student researcher.

6.2.3 Higher education experience.

Ma was attracted to the Indigenous studies Masters’ program by the strong experiential component that was familiar to her because of her previous degree. However, even with competencies in group work and training, she found it difficult to integrate into being a new student in an Indigenous/non-Indigenous culture and being in the minority group. This did not concern her; rather, what concerned her was the lack of emotional support following intensive learning situations. She considered she was re-traumatised by some of the experiential work.

The course structure was project based, with the use of an Internet learning site, access by phone calls and regular blocks of experiential workshops approximately three times a year,
which could be a full day for six days, covering two or three subjects. Following the workshop period, there was no provision for an ongoing learning group.

6.2.3.1 Identity as a mature-age student and student role.

As mature-age students come back into higher education, more attention needs to be paid to their learning process. Their learning can be enhanced in several ways: finding ways to clarify their prior learning and work experience; providing opportunities for telling their previous learning stories in the new learning context; and having opportunities for successful group interactions. Such activities carried out in a group situation can help cultural safety and move the person more successfully into their new role and environment.

The intensive experiential learning sessions of the course allowed for personal exploration. However, the subject matter of trauma and healing is a highly volatile subject which can reactivate old wounds. I wondered how such experiential exercises would help the integration and learning in the role of student. It would certainly locate the student in a particular body of knowledge. I recognized in Ma that the researcher/practitioner part of the identity of the mature-age learner may be well developed, and conscious activities were needed to ensure that the student’s cultural identity was developing at a comparable speed. With her action research understanding, Ma suggested that part of the process of becoming grounded was by answering questions: Who am I, and what do I bring to this project and group? When I asked her if this type of discussion was possible in the block workshops, she replied:

Ma: It is actually. I find myself doing it very early in the piece I see a certain amount of disjuncture among the students in my group who have not had this kind of learning. They are used to the ‘chalk and talk’ kind of interaction and so a lot are reacting against the openness of this. I’ve even had opportunity to speak with the facilitators (Ma3 2009).

I heard part of this text above as her speaking from a trainer’s perspective.

Ma recognised that our interactions were becoming meaningful to her as “exploration, explanation, clarification and a review. This is a generative and a creative process” (Ma 2009). However, she was ambiguous about her role as student partly because of the unfamiliar content area, which meant she was “almost starting over again” despite her knowledge and experience.

6.2.3.2 Learning issues.

Ma’s learning/writing issues have their roots in a childhood humiliation in sixth grade by a teacher who deemed her creative writing unacceptable. Ma explained her writing block:

Ma: I think too what I do is pretty damn good … the self-doubt and the practice of interacting with one another [the student] that creates the blockage. I’m better now than I was! (Ma 3 2009)
6.2.3.2.1 Experiential workshops.

Our discussions critiqued the process of these intensive workshops from trainer and advocate perspectives. I wondered how she was in groups: if she was identifying more with her prior learning than with the situation in the course; this slowed down her process in obtaining group support. Cultural safety, learning detachment and discussions on reciprocity and deep listening were issues we explored together in what felt like a balanced co-researching relationship.

Ma clarified further how she perceived the situation of herself as a student experiencing people around her in a ‘creative tension’. She meant that some of the students may have been feeling uncomfortable in the situation. While this was a time to learn about oneself as a learner, it was also about methods the learner was developing to competently transfer their learning to another environment.

Ma realised that the unorthodox methods of focusing on the dynamics of learning about self, which she experienced in the workshops, challenged those students who had embodied the didactic traditional methods, the ‘chalk and talk’ culture. She endeavoured to feed this back to staff. She believed there was a separation between teaching and learning; they were not integrated well enough in the workshops.

Ma saw the difficulties she experienced as being a combination of the old performance issues she always had, made worse by her neuro-biological health issues. She perceives the affect and the biological changes interfering with each other – a conflict of body/mind or a split between the two hemispheres. I see it as an affect regulation issue.

Ma possessed group skills; however, she acknowledged her frustration at sitting with people who at times lacked the benefit of the/her insights or wisdom. She was also annoyed:

Ma: that um I’m repeating a certain amount of work that I’ve already achieved…And at the same time (pause) um I’m having difficulties starting this. I want to try to verbalise I feel inadequate when it comes to the writing. Perhaps displaying the knowledge putting into the words rather than the verbal I can talk until the cows come home practically.

Kay: And yet in some circumstances you are not talking, you’re withdrawing and with that comes more and more dissipation of your chance to write.

Ma: Good on you thank you! There are situations where I'm grappling with the fact that I have the knowledge and insight and I’m working with people … I don’t know how to be around people in that other place … I don’t want to be there. I want to be moving forward and not moving back. My cohort doesn’t challenge me enough. (Ma 3 2009)

From the comments above Ma begins to recognise that at times her silence in the cohort was exacerbating her resistance to writing. She then went on to talk about reciprocity as leading
value in the course and if a group is facilitating for compassion, then all sorts of presenting
issues would be taken care of. She explained reciprocity as meaning:

Ma: a shared experiential process … [which] gets away from the teacher disciplinarian and
enhances rules of cultural safety you can participate as much as you want when you are….(Ma
4 2009)

But her issue was that there was little direction provided to the students. When we enter a new
situation, our identities can become enmeshed, or pushed back, until we can understand and
act using the rules and norms of the new cultural environment (Toman, 2010). As a non-
Indigenous she was in the minority group of her student cohort (20%), which brought its own
stress, as along with just being in a new learning environment. Ma pointed out that for the
Indigenous student it may be much worse, as she perceived many as “vulnerable and quite
raw” and was concerned that they would return after the experiential workshops to their often
isolated communities, working to be there for local people surrounded by trauma in every
waking moment. How best can these students’ support needs be met? Do we expect the
students to explore issues that open them up and risk the development of mental health
problem? What can be done? They can be given information about the student counselling,
and the disability services, but how do you overcome the lack of resources in these isolated
and difficult situations they work in? It’s a very real situation. They leave without support and
in particular no official learning group or network.

My understanding was there was an emphasis on creative therapy with a cognitive learning
process at this stage of Ma’s course. I heard little about how the information was integrated
into, for example, individual learning plans developed in the group workshops for the back
home situation. Such a process could be used as a parallel conversation on the Internet
learning site to acknowledge and monitor their ongoing emotional needs.

At another meeting we continued our discussion. I had in the meantime read bell hooks
(1994) and was considering how one could merge philosophies from three paradigms: critical
pedagogy, feminism and black culture. I realized that her empowerment of students was a
process of transgressing that could go beyond the boundaries of the status quo and come to a
place of inclusion. I began to understand that the course Ma was on had a similar philosophy,
to take the students beyond their usual comfort zone to a cultural healing.

Ma had been on another intensive experiential session and realized from the grief and loss
input that identity was a major issue. In the group process they had a type of learning circle;
she felt she had answers to the questions I had posed in the earlier meeting.

Ma there was so much of it, and the bioenergetics we did some basic work just to loosen up and
all the time I had you on my shoulder. It was brilliant, it clarified stuff I already knew having
the group work and the different people it clarified it in my brain and gave me a boost of confidence (Ma 7 2009)

It seemed as if she was actioning some of the discussion we had.

She had been disturbed by the quality of the first group she had been placed in during the experiential work. She believed the course structure of experiential open discussion and reflection processes was what some students could not cope with and they blamed the staff. This certainly sounded like the beginning of a transgression process, which needed careful facilitation by the staff. She said:

Ma: There are some people you can’t relate with on a certain level and I need to be selective who I agree to work with and who I accept in my circles and be more proactive with who I want to be [there] for. I’ve left that other group behind and found a group I trust more.

... This is my favourite way of learning, it suits me while [it can be] uncomfortable. It suits me best I just don’t thrive under the old style pedagogy it doesn’t work for me … I’m being assessed on all sorts of qualities and attitudes that you don’t in the regular [education] …It’s about listening and being present. (Ma 7 2009)

Now I hear Ma with curiosity, excitement, seeing the possibilities as the researcher voice emerges.

Ma: Coming from the feminist background I can relate to it easily, and so much [of] the work I’m doing around healing at the moment. I keep finding myself wanting to use this concept of learning rather than teaching. I’m putting together as you know a healing program. I love the way that “educaring” (Atkinson, 2002) comes together you learn self-care then community care and that is done in an experiential researching way.(Ma 8 2009)

6.2.3.2.2 The isolation of the external student and lack of learning support

Coming together for the intensive workshops without having an established support learning group was an isolating experience. The diverse learners in the course did not have the skills to challenge Ma’s learning and it was up to the facilitator to help her develop new skills. The problem was that she was becoming reticent and withdrawn because of her frustration and did not feel safe enough to express it.

Ma: The general student situation I’ve deliberately learned how to challenge but some of the people over last two years (were) nasty people (who) personalise everything and I’m not strong enough to cope with that. I’m looking at exploration. You’re helping me already I feel on a content-based experience, whereas I’m taking it further. We are speaking a different language that’s what you’ve helped me recognize. (Ma 12 2010)

The whole point of the subject was to develop a common language and values, but this did not seem to happen initially. As Ma indicates:

Ma: I share it with quite a few of the facilitators but as [an] external student I don’t get a chance to interact with it. (Ma 12 2010)

While Ma’s main contact should have been through the Internet learning site, she found she could not join in and was frustrated. People were available, but she felt she wasn’t assertive
enough to say “Let’s have a discussion”. Here she again highlighted the need for a structure that could nurture and helps students. She was particularly concerned for those students further marginalised by health and learning issues who do not qualify to have a supervisor or mentor help. Both she and Supa were in this situation. Following her participation in these block sessions, Ma struggled to get back to a reality and often sank into debilitating fatigue.

The lack of formal support, and the recognition of prior learning, made her student role ‘invisible’ and her writing and organisational skills came to a standstill. In particular, she found the writing work on the Internet learning site impossible to navigate. She had doubts about her writing ability. Also her lack of technical skills and her rising level of fatigue, which was exacerbated by the workshop, were perceived as re-traumatisation.

6.2.3.2.3 Chronic fatigue symptoms and learning style.

By the third year of study Ma’s health was affecting her progress in her course of study.

Ma: all of my written stuff is incomplete, you know. I’ve done all the research, last semester and the semester before and the semester before that. (Ma 9 2010)

The health issue had taken a toll in the last two years, starting from her initial re-traumatisation in the earlier groups, and led to an exacerbation of the symptoms of chronic fatigue, particularly a foggy brain, which delayed the completion of assignments. Now, in the third year, the course coordinator wanted to work up a study plan with her. Ma was concerned that such a plan would not be specific enough to target her learning issues, as the coordinator had no experience of her written work. As she explained this to me, she had difficulty finding the words [foggy brain] that she wanted to use. I wondered if this was also because she had not expressed her feelings about meeting the obligations of a study plan.

An effect of her brain fog was that she would struggle with management of the material after doing the initial research. If she was not physically working with it she would not be able to find the resources for quite a while. There were times when she could not think straight enough even to do ordinary things like just preparing a meal. She recognized that her learning style preference at the best of times is not as a “Converger” – a learning style which creates and uses theories to explain and make decisions. Rather, she perceives herself as a “minor Diverger”, more involved in the experience and making observations (Kolb, 1984a, p. 1). To refresh on these concepts go to section 3.1.1.1).

This was an interesting statement, as she doesn’t normally become too distracted, yet she puts it down to the brain fog. When I asked her what it would take to finish some of those unfinished papers, she replied:
Ma: Pulling it altogether would be useful. Um I’ve got a few you know half started things so even Ok next week I’ll find time when I start putting things together. Ah, that relates to that assignment and I think oh well I’ll just put that there and use that later – just have to focus. This is all you’re going to do and you’re not going to do anything else. Yeah, just do it!” (Ma 10 2010)

What was the underlying message? Can you feel and hear her brain fog? I hear her word usage as indicating a dominant learning style of kinaesthetic – hands on. The kinaesthetic examples in the above text are underlined. I also hear a number of edicts: “Just have to focus”; the whole sentence starting with: “This is all…else”, and the last sentence: “Yeah, just does it!”

I asked her: “What is there in that particular project that is something that really switches you on?” I deliberately did not pinpoint what is essential in the particular project, which would assume that memory is accessible. Rather, I followed the sensory approach: because what she had given me in the previous quotation was kinaesthetic, I therefore used a kinaesthetic image, ‘switches me on’, which potentially could lead to convergent thinking. Her response was instant, with enthusiasm.

Ma: I like that: ‘what switches you on?’...I’ll write that down: ‘What switches me on?’”
She was motivated, and engaged to act on this as a strategy.

6.2.3.2.4 Actions required to complete the assignments.

There had been limited opportunity to take many action steps because the chronic fatigue issues of lethargy and head fog had been a constant issue in our work together. Now she was beginning to reach out.

Ma: I need to go over to have social time at the university for lunch or something like that in their common room and hang out with people from the classes so that I’m talking about what I’m doing. Yeah, develop that little community we used to have back in HAC [her first degree experience of experiential learning] (Ma 10 2010).

I offered some advice from a recent seminar on writing which had made a difference to my commitment to the writing process: “Turn off the Internet!” and “Nail your feet to the floor!” and “Write for two hours every day!”

Ma: Yeah, and that would make sense too because there’ve been times where I’ve done some work and I’ve worked for more than two hours and I’ve been totally stuffed afterwards. And then it takes me a couple of days to get back on my feet again. That would make sense—limit you to just two hours. The messages I’ve been given is ‘keep working, just keep working’. It’s counter-productive isn’t it?” (Ma 10 2010).

Ma had started to explore a new way of avoiding working to exhaustion. She began to set time limits and stick to them. She is making some changes in her beliefs and has observed her pattern of ‘keeping on going’.
6.2.4 Meta Reflection.

Several factors detracted from Ma’s experiences in higher education. Firstly, her schooling experiences had led to self-doubt concerning her writing ability. Secondly, as an adult she had developed a chronic health condition that resulted in fatigue and difficulties with thinking clearly. A positive influence was the skills in training and facilitation that she acquired during further career and educational experiences. However, Ma was unable to implement these skills appropriately in the group work in her program and became frustrated and discouraged. As a mature-age student, her undertaking a challenging Master’s program of study in Indigenous trauma and healing added a further dimension to her experience of higher education. Ma experienced a program in which teaching and learning were not well integrated, experiential workshops were not formally supported to deal with the emotional impact of the content, teacher facilitation skills were lacking, and the external Internet-based learning component for which she had minimal skills felt unsupported. Further to this, the external component did not match with her kinaesthetic learning style.

Ma perceived some of these experiences as a re-traumatisation that compounded her existing health problems that contributed negatively to her writing problems and to her poor organisational abilities, which at times resulted in unnecessary over-study. The outcome of her self-listening was recognition of the factors that contributed to hampering her study progression, and a change in her perspective concerning her abilities, with the end result that she has been able to finish her program of study.

Discussions of cultural identity need to be ongoing, in such an environment to ensure that a balance exists for the individuals between the emotional unpacking of trauma and the development of understanding. It is particularly important to be able to work effectively to empower such a diverse learning group of students, from mature-age indigenous and non-Indigenous backgrounds to the young indigenous students.

6.3 Individual Co-researchers: Supa – Valuing Prior Health, Learning and the Student Role

6.3.1 Family History.

Supa, born in Thailand of bilingual English and Thai parents, arrived in Australia at 15 years old. Her assimilation was fraught as she was put down a grade because her English was not good enough, yet she was superior in the sciences compared to her cohort. She believes she
was not dyslexic in Thai as a child. Her father was a strong disciplinarian; in particular, when she faltered in her English spelling he would yell at her.

She arrived in higher education as a mature-age undergraduate student, with no previous formal learning experience except childhood aspirations of being a doctor. She had raised four children, all who had varying degrees of learning difficulty. Supa was diagnosed at that time, along with two of her children, as dyslexic. She spent the children’s school years advocating strongly for them.

Six months prior to taking up the degree she had a traumatic car accident, which became the motivation to apply for the healing and trauma degree course. The degree had been recommended by a medical personnel as a suitable direction for her ‘healing’ from the accident and as an alternative to becoming a ‘rehabilitated disabled’ having to rely on Centrelink payments. She has skills in group work and facilitation, and wanted a qualification to help her become more integrated into a community of practice. The main philosophy of the course, the idea of Dadirri, an embodied deep listening, suggested a holistic model, and the experiential learning workshops were attractive features for Supa. She believed her issues were mainly to do with writing, but she soon found it difficult to develop the language of academia and to have any ‘flow’ of writing and language.

### 6.3.2 How did she get involved in my study?

We met at a course I had been invited to attend. I had accepted as I have had little exposure to Indigenous ways and was interested to learn. During discussion time Supa sat next to me and in one interaction I noticed her distress when she was confronted with a word she did not know. Her way to understand the word alerted me to a learning issue; her distress was palpable. Later she asked what my research project was about and then said that she was dyslexic and was interested to join to have some support for her learning.

### 6.3.3 Summary of the Meetings with Supa.

Supa became part of the AR3 individual processes I was implementing, following the decision to seek more diverse learners. My understanding of co-researching was changing; I was working with individuals, listening to their issues regarding their health and learning. This was similar to the other individuals (Gm and Ph).

We met for sixteen individual meetings held over three years from May 2008 to December 2010. The five meetings in 2008 established a working relationship, understanding her history
of dyslexia and family background, her learning issues and discussion of the course she was undertaking.

In the second year, four meetings were held between March and November 2009. That year she really began to struggle with the learning issues and her health began to suffer. She recognised she was experiencing dissociation and panic attacks, and we discussed the conflict in her identity as student/practitioner. When she had a substantial failure, she began to seek help with the services at the university. She was confirmed as having post traumatic stress disorder (PTSD) and this became her higher education disability status. This year we started to do some action learning experiences on her growing number of outstanding assignments and had some good results.

In the third year, seven meetings were held between February and November 2010. The year started with positive reflections and feedback on the previous work. More depth was gained on her disorientation experiences and on the learning for two exams requiring rote learning, which dominated months of that year. Eventually both exams were passed but she fell behind with the other subjects. We were collaborating well and her reflections were meaningful. A reflection after I had helped with the counselling paper:

Supa: How you questioned me in the reflection that (was) the power. I remember to do that for others. You’ve embodied it”.

6.3.4 Summary of the process.

Of all co-researchers, it was with Supa that I felt my role was to actively participate in supporting her, through both facilitation of her learning and her health issues. Working with Supa was different to working with other co-researchers, in that we shared a similar experiential training of Somatic psychotherapy, which helped to quickly develop rapport and which opened the possibility to work from that perspective. I could work more intuitively with the metaphor of the ‘red thread’; and had permission to use appropriate touch and the senses in a deeper way.

Each meeting was different. I would take time to listen to find what her most pressing issues were; she could often be unfocussed and need time to refocus her thoughts. Once we established the direction for the meeting it became a focused dynamic process. I helped with essays, discussed issues to do with the group work, and listened and developed reflective questioning of her assumptions in relation to her health issues and learning. One example was when she experienced dissociation following a Vipassana course. I could give her a different perspective, in the form of grounded reflections, and helped her develop internal body
awareness through non-verbal methods. She felt supported and was happy with the outcomes of the meetings.

In the first six months of her studies prior to meeting me she had gone through a state of re-traumatisation which she expressed as “swimming in the grief and trauma of some of the workshops, adjusting to a new environment and coming to terms with her learning issues”.

6.3.5 Supa’s current learning situation.

When I met her she was receiving no help from student services; rather she was accessing informal help from friends for her writing issues. As we worked together, issues emerged associated with dyslexia. She floundered with the concepts in reading material and was often confused by the language and structure of writing an essay. Although her sentence construction initially was poor, over time there were solid improvements. It took time for me to realise the depth of her health vulnerability, as she was articulate, positive and motivated to learn.

6.3.5.1 Auditory processing of words.

In the following example Supa describes the difficulty of getting to the language side of her brain, what that means to her, and how she can quickly go into a disorientation when using her strategies for spelling or writing a sentence.

The text in this section is from meeting Supa 2 2008.

Supa: I’m going on to do my learning and doing the left brain stuff I’m finding it really difficult. You know, there is – I have to utilise my skills and tools and get a lot of help to actually make my sentence work and sometimes I just go blank and I really cannot figure this out”

Kay: Can you give me a recent example?

Supa: Well I might be writing about um like in psychology – that was the one – but I’ll be writing it all out and it will be all over the place and it might, um – it doesn’t flow, I’m not using the right words um.

The concept of disorientation is further described as she attempted to spell ‘refrigerator’.

Supa: One thing still remains with me. If you spell the word ‘refrigerator’ for me, okay, which, by the way, took me one year to learn to say that! One year to say it ‘refrigerator’. I could say fridge …and I got away with it socially, but …something happened and I had to learn to say it. There’s some words I still can’t say and – but if you went to spell the word refrigerator for me (ref... I can’t say it) I have to very slowly write it down or check it or something like that and – I’ll just get the “ie” and I might get the last part. But you know how sometime you just miss the middle – You can miss the middle, the beginning, any part. Yeah, yeah. By the time you get to the third time repeating it to me, you’re frustrated – So if I ask, “Can you spell a word for me?” I will now say to people, “Can you please spell it really slowly.”

The above is an example of an auditory/visual processing issue. She cannot perceive the nuance of the sounds of particular words. As she described, she is likely to variably miss parts
of the sound of the word. I did not have the opportunity to find out what other words she knows she can’t pronounce correctly. Imagine if there were many words where the sounds of the word are not perceived accurately, what ongoing stress this causes. Naturally she and others with auditory/visual integration issues seek ways around such issues. These strategies, called old solutions as discussed in section 4.5.1, can sometimes turn into obsessive behaviours. I think she gives an inkling of this with the ‘refrigerator’ talk.

This freeze/disorientation has early beginnings:

Supa: It’s my father who actually did the damage. My father also did the damage to D. Bless his heart, an absolute honest man he felt, he has dyslexia and there are a lot of symptoms of autism – this is what my sister and I, you know – maybe he’s high functioning Aspergers. No, but he is a learned man. And he would spell the word for me and by the time I get ‘re’ and I say ‘yes’ – by the time I get to the third one he would yell at me – absolutely yells at me – and I would go – freeze!!

I perceive this was a trauma to her at a vulnerable time, which emotionally exacerbated her integration issue. It seems her body has been programmed that spelling out words has potential to become a threat.

6.3.5.2 Experiences in the course – teaching style.

She was enjoying the work presented to her but found she was being criticised, and wonders about this.

Supa: I have a critical mind but I don’t criticise them, I just listen carefully to what they’re saying. I listen to see why they’re… training us this way? Because they’re training us to be empirical researchers so you have to be the example. (Supa 2 2008).

One of the lecturers someone who Supa admired because she “talks her walk and walks her talk” shocked her a little with her feedback and she began to explore the art of reflection.

Supa: I find that when she asks us to do reflective things, she does have a critical – she has a way of um critique, if you like, critique with kindness, but very direct. To me I would like, I’m going to put this to them, they need to um have a little bit more tools for processing the processes. (Supa 2 2008)

She was unsure of the group facilitation method and had some safety concerns:

Supa: There’s no way in processing the processes with just listening…. I feel that we will move and deepen our understanding more and get less messy, not that messy is bad, but you know, people go out into the world.(Supa 2 2008)

Like Ma, Supa wanted to talk to the lecturers about her support concerns following the workshops. She was concerned for some of the people attending. Supa has a similar experience of facilitation through body therapy, and has the experience to know the dangers of people becoming overwhelmed and going into regressive states. She thought her
knowledge and experience in group work could have been seen as a threat to both lecturers and students.

Following some complementary feedback from a highly trained facilitator/lecturer, she recognised that some of the other facilitators had little experience of groups. She was concerned, as the type of work they were doing needed good facilitation. The next section explores her experience in the groups.

**6.3.5.3 Her identity and values.**

For the whole of this section the quotations are from meeting Supa 2 2008 unless specified.

**6.3.5.3.1 As a professional facilitator.**

Supa: Yes, what happens just sitting there and letting them cry or do whatever they do that’s fine. But then they still have that. But I’ve shared my process which is a rare thing for me to do because [pause] some of these people have never done anything so I’m sharing my process while teaching. I’m still doing it to get my rage out, but without them knowing what I’m doing. I just say I’m sharing a process I’m still doing it to get my rage out [and to] safely sharing it with them. I’m a facilitator, I can do this differently.

Was she having trouble getting away from her facilitator/practitioner role and sounding a little superior? No. What I understand is that she felt the process was not sufficiently reflective and there was a need for a secondary process so that people would feel safer. Because of her experiential learning of somatic work it was at times hard to not intervene.

Supa: very difficult even for me sometimes to sit with an uncomfortable feeling. But, I have learned to sit with my uncomfortable feelings, notice what I do with my uncomfortable feelings, laugh at it sometimes because it’s funny... And I agree with you that part of me being there is [to learn] how to deliver differently.

**6.3.5.3.2 As a bilingual, non-‘invisible’ student in an Indigenous course.**

Supa felt isolated but respected in her course:

Supa: my reality once I am respected in the classroom in the lecture … I am real but I don’t um I find maybe because [I am] mature- age perhaps [this is why] I’m not asked to be involved. I haven’t put my hand up as I cannot do it. They use younger people to talk to younger people I asked how those struggling with literacy issues in her course were assisted. The Indigenous students had funded tutors who often acted in the role of mentor. However, Supa cannot get help from the tutors as she is non-Indigenous and is not permitted to go into the computer room. Supa is of Asian/Caucasian parentage so her difference is obvious. This is contrasted with others in her cohort who may look non-Indigenous but if they identify as Aboriginal and are ‘declared Indigenous’ they can access funded tutors. Supa had no idea how many could be in a similar situation to her, in this invisible group, in that they did not identify as Indigenous. This partly accounts for some of her feelings of isolation.
Supa: it’s very difficult, the kids when you’re doing the trauma subjects you are floating in trauma. I can see it, I’ve been really good in the last couple of weeks is just, having compassion, keep on going if I only get one question done that’s all I get done. I’m doing other things like cooking cleaning. It’s not like life stops.

6.3.5.3.3 How does she integrate her student/practitioner role?

Supa came from an experiential practice base as a facilitator/practitioner who coordinated and designed courses. She felt some of the experiential group work she experienced on the course was a ‘part’ process. What she meant was that people were opened up emotionally, but some of them were left ‘hanging’, unable to get back to a pre-workshop self-regulation. Some students did not have sufficient skills to take the work forward.

Supa: student comes first but we are sharing in a group and something happens, then I’m consciously put [the student] aside and be in the situation and whatever I’m sharing they take it on board. Then maybe two months down the track it suddenly clicks for them. It’s not that, I’m conscious my intention is to remove that part of me and just be a student. I’m enjoying being that part.

It seemed she was constantly dissociating during the course. While she liked to be the student, when it came to the group her difficulty was non-involvement as she too easily was in the practitioner and therapist role. Part of the course work structure involved sharing ideas, but there was no space for comments, feedback or reflective time. It was because of this lack of reflective practice that Supa felt the need to talk afterwards, to share her insights with the course leader but “…there is awkwardness and I can’t go beyond that the barrier is there… I would like her to engage more.”

With another assignment due, with extensions, she was beginning to falter in her beliefs.

Supa: there's a part of me that kind of really my self-esteem on that level is really low… even my reading is not as sharp as I usually am because this part of me has like given up.

She was beginning to feel shaky with her identity as a student.

She went into the student meeting and was elected to the committee as she felt the need to do something that was constructive because, as “an intelligent adult, yeah, I'm feeling really battered.” The student part was suffering, not the intelligent adult. I wondered if she could prove it by being in the student association. She expressed it as: “Hopefully it's my positive distraction, that's what I'm putting it down to because I did think about it before I put my hand up.”

As an individual she was hurting because she had an issue with learning and it was a critical time. I saw it as a distraction from her main study; she needed to ‘get back on the horse’ and get the psychology failure sorted out. Having not yet mastered the structure of essay writing was beginning to affect all her assignments.
6.3.5.3.4 A friend helps with an assignment.

This section is from meeting Supa 4 2008.

Supa: Being heard is the greatest thing to heal. My father didn’t know I saw I was damaging my own children. The pattern comes through and I’m hard on my self-direction.

A friend whom she had known since her children’s dyslexia experience in schools was helping Supa with her assignments. She had shown her writing to her and wanted to be shown the way so it “clicks in and I can get it.” Supa had some regressive moments with her, as sometimes she felt she was in trouble with “the authority person”, particularly if they were not listening to her. She recognised it as her earlier childhood behaviours with her father.

Supa: My father made us read. I did ok. [Then there were times] when I can’t get out the word or don’t spell and can’t even remember.

She was distressed by the outcome of the help from the friend and had stopped work on the assignment they had been doing, despite her planning to have it finished the following day. It was two weeks later and she had not looked at the work. She spoke again of her friend:

Supa: I knew she is a great teacher everything I learn with her I learn it and don’t have to relearn it. (Is it mastered?) Yes, but what happened was that when she left I knew that she couldn’t come back and help me. But I was in the middle, I haven’t finished and I know I can’t finish the rest. …I’ve put it aside until I can get the right help. I am needing help, not support, help to get past this … once I get it but I slip back into the academic writing.

This text was confusing, so I took it as a ‘red thread’ to make an I-poem, hoping it would address and reveal the deeper invisible conflicting feelings. The following I-poem is constructed by taking just the ‘I’ and the verb from the above text.

<table>
<thead>
<tr>
<th>Help!</th>
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<tr>
<td>I knew</td>
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<tr>
<td>I learn</td>
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<td>I learnt it</td>
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<td>I knew</td>
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<tr>
<td>I use</td>
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<tr>
<td>I haven’t finished!</td>
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<tr>
<td>I know</td>
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<tr>
<td>I can’t</td>
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<tr>
<td>I have not</td>
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<td>I have</td>
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<tr>
<td>I can</td>
</tr>
<tr>
<td>I am needing</td>
</tr>
<tr>
<td>I get</td>
</tr>
<tr>
<td>I slip back</td>
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</tbody>
</table>
6.3.5.4 A meta-reflection.

What I think was happening when she could not find the word, spell or remember had an emotional regressive part which, when dominating, meant she could not get a visual image of the word and stopped her accessing the auditory equivalent. I believe this is one of the main issues that manifests for people with dyslexia when under stress. When the words do not have a picture attached to them she would falter. The fact that she could not even get the words out sounded like a situation of extreme stress. It sounded very much like the teenager dissonant voice examples from Gilligan (Section 3.4.5.4.1). I knew her father made her read and was harsh, leaving her often with a ‘blank’ in her head. Her thinking was that once she knew the structure of the academic writing, as she had already experienced in learning to write business letters, she would be fine.

The process with her friend had pointed out she was over using certain words, for example, the word ‘which’. Her rationale was because “the modern culture is to use ‘that’ and ‘this’” and she equates it to learning a new language. I wanted to know how the friend worked. Supa was pleased to learn the difference between the words ‘effect’ and ‘affect’. I wondered why this was important and found later that it was part of the criteria for one of her papers she was having trouble with. I think this incident identified her learning style as a dominant kinaesthetic/experiential learner. For example, when she had some editing help, she worked out it was best to keep her original work and to later reread and compare the changes as a practical way to learn to improve the structure of her essays. What she struggled with was rushing when she was editing her own work. For example, she could not see repeating sentences and other grammatical errors, as her focus was more attached to the ideas. At this stage, I felt the editing functions would be best done with learning support, and my help would be better employed helping her unblock and release her writing flow. In retrospect, the flow of our action learning meant she became empowered to do her own editing using the Hand microphone method. (Section 6.3.4.2.1.)

6.3.5.5.1 A reflection on the meeting.

At the end of the first meeting (May 9 2008), a process of reflections was established.

Supa: What I’ve got from today is the excitement of being part again of sharing the diversity in learning, and facilitating my journey and, you know, supporting others…. I was affirming my own intuition of having to learn different styles of how to be also how to do it differently. And I’m excited because I feel that you understand, without me saying too much where I’m at. You can see actually where you put a little drop of encouragement so that I could actually have the tools to just go for it. I have a little lack of confidence in thinking that I don’t write English very well. But I do.
I see more and more the importance of more clearly spelling out and reiterating a structure or a research model underpinning the process work she was involved in. The notion of Dadirri (deep listening) theoretically should have reflexive processes embedded in the material so that the group can develop their knowledge. She explained that after doing some reading there would be a discussion, but “it can be emotional, it can be disconnected, it doesn’t matter that’s what I’m finding”.

I interpret this to mean that in the reflective part of the group process, any expression is acceptable, and this means the earlier cognitive learning input may be lost and not grounded sufficiently through the facilitation structure. If some levels of learning are ignored, this limits the group discussion to the emotional level. When this happens, a facilitator has the option of changing the level when receiving a disconnected statement. This can happen by first connecting on the emotional level of the statement and then reflexively reflecting back on a level of the content. With the connection to the topic made, this opens the opportunity for another person to pick up the thread and add to the learning in the group discussion.

I felt from this meeting that the direction of our time together would be more situational, working with what is. Although in this meeting I had no direct experience of her level of dyslexia, I was already building a picture of how she ‘froze’ in relation to her spelling issue, and a sense of some compulsive behaviour that could surface. I suspected she may not be able to engage with me through writing at this point.

6.3.6 Action learning activities.

6.3.6.1 Writing a psychology assignment.

She had failed her last psychology assignment by three points and was not given any comments other than that it had to be redone. In contrast, her second assignment received a high distinction (HD). This was an assignment where she was passionate about the subject and during the researching process read six books, absorbed many examples and felt she really understood what was wanted.

Supa: I learned differently (with the HD assignment) I edited it myself... It was L who edited my writing without adding, there wasn’t much needed. I took it to learning assistance to make sure my referencing was ok. Since then I haven’t been able to focus… I think my English is not good enough. (Supa 4 2008)

She began to look at the draft of the paper that she was blocked on and commented that she had consciously read the instructions: “I get confused I haven’t learned it properly yet. I have it but I haven’t got it.” And the I-poem made from that line:
6.3.6.1.1 A reflection on the I-poem.

On a cognitive level this failure was to do with understanding initially on a surface level and then realising that the concepts in the essay instructions needed a deeper understanding. I could have taken up this aspect but she had already done the papers and her needs were more concerned with improving the essay structure.

6.3.6.1.2 Facilitating new learning: a further assignment.

We used a facilitative process with the essay she was struggling to complete. My focus was based on the insight that some of her difficulties with the last essay were compounded by her not taking the time to fully understand the essay’s criteria, and working out how to reach the aims. I read the criteria for this essay and found the task was about evaluating personal growth and linking those insights to the unit material. Our session again became a dialogue of understanding what the criteria meant, how they linked to the books she had studied, and how her experience of the main philosophy of deep listening related to these works. To write this paper she had used an ‘academic’ style, yet what was asked for was more a self-reflective approach, which could be done in a more subjective manner.

6.3.6.1.3 A meta-reflection.

Use of the personal ‘I’ in this essay was missing. It seemed hard for her to change from what she thought of as ‘academic’ writing, the structure and nuances she was just beginning to understand. She was a capable and intelligent person and, I believe, very able to adapt. For example, when she went into business she had learned to write good business letters. Given her keenness and intelligence, to really support her learning, she needed a regular learning support person who could consistently step by step build up her knowledge of the academic genre. This genre of self-reflective writing was different and may be one which would suit her, but at this point she does not have enough examples to follow.

6.3.7.2 A plan of action.

The plan of action involved several steps. First I read aloud one of her psychological papers, to give her some emotional distancing from the text by just listening. Then I encouraged a
critical discussion to activate the right ear (left brain language area activation). This plan assumed that we had developed enough trust to allow me to read her writing aloud with respect. I would make no comment about the writing; rather, I invited her to jot things down or draw as I read.

The second part was for her to listen to herself reading aloud, with the idea of developing her critiquing writing skills. I asked what it felt like:

Supa: Yeah, it’s not bad but what I’m noticing is that there’s some commas missed out – you probably don’t know – did you know – did you feel that? … there were some commas missing?

Her first comment about commas was interesting; it felt she tried to draw me to correct her. Rather, I went on to the concepts because she had earlier nominated this direction. I asked her what the main concept of ‘diffusion of responsibility’ meant to her. She came back with a cheeky response.

Supa: Diffusion of responsibility means that somebody doesn’t give a f** about what anybody thinks.

I gave a more academic example, suggesting she could work with my example. She immediately came with her own example. We then established a dialogue. An element of trust had been engendered and the session continued as her enthusiasm picked up as she took over more and more control.

6.3.7.2.1 Supa reading aloud using her hand as a microphone.

The conversation above explains the learning that resulted from the hand microphone. The key strategy was me reading first, before Supa used the technique of the ‘hand microphone’ herself. Listening to herself through the right ear gave her more direct access to the left brain, allowing her to focus on thinking and to critique herself. My instructions to her were to do it nice and slowly and make out she was using the right hand as a microphone. I demonstrated the acupuncture line from where the breath from the speech hits the hand then connects up through to the ear and then into the brain. When done well, the physical deflection of the sound means a person can feel the vibration through their right ear and through their whole body. It is also possible to feel the vibration when speaking. She spontaneously started reading aloud from her assignment and then stopped and commented: “This is good, this is good!” Her enthusiasm was genuine and she continued for another two to three minutes.

Following this reading aloud, it became easy to facilitate her to change some of the issues in her written text which were unclear, for example the word ‘interdependent’. Her final input showed understanding, participation and satisfaction with having comprehended the text. If an
interdependent relationship is about being in communication, autonomous and cooperative, as co-researchers this is what we have been developing – an interdependent relationship.

Supa: I’ve learned more today noticing that we’ve – you know all the connecting words I put in because I think it all makes…”(Supa 6 2009)

6.3.7.2.2 Reflections on the hand microphone.

I asked Supa what helped while using the hand microphone. She had used an example from her own life experience and a number of times she said, “oh yeah” in a manner that I took as knowing. She was getting those little words, the sight words that are usually missed. She was listening. I told her it was important to pick up those sight words visually while reading aloud because they can trigger her visuals blanks. At the same time, doing reading aloud means we know that the auditory is switched on. The more she uses the hand microphone, the more she will listen to pick up the commas and full stops and improve her comprehension.

Supa to have the the um showing and and support you’re giving me by actually doing it um, without me feeling – this is really important to me – without me feeling like I’m failing. You understand – talking to my hand like a microphone, because I like this type of practice too it steadies me, like even now I’m putting my hand here so I can feel me slowing down and more grounded. I do believe in somatic work for my body so it worked well for me. You’ve helped me heaps with the words like with, in, what else – joining words. I don’t quite understand it all but I do understand so sometimes I just get a blank and then I go ah… (Supa 6 2009)

She is able to accept and trust me. The hand microphone had enormous value for her. She had realised the difference between being facilitated in learning with me, and teaching ways of working, and was now prepared to go to learning assistance for help. This was months after starting university.

Supa I feel that I can’t ask her [my friend] for more support so I will go to learning assistance and get to support me. I do need the help – just to get enough practice of the right way for me which might not be anybody else’s but mine. It’s my recipe if you like. (Supa 6 2009)

Her understanding of her individual process had increased. In the next scenario she switches herself from negative self-talk to a clear proactive intention.

Supa: I do learn quickly and…But you know this has been happening to me since I was little so I want to get over – Stop!! You can hear the pattern coming in! I’d like to embrace it in a way that I don’t have to be blocking my flow each time when I’m thinking I’m going to write… an English something. Yeah, well it affects my speech … when I get nervous and things like that. So, yeah, so all this is good. I’m now learning a little bit more about me, um so that I can get focus on living. (Supa 6 2009)

In summary, my goal for this session was to initiate active learning to help break the pattern of holding on and not looking at the essay, which had gone on to for two weeks. The extra stress after her psychology exam failure was making it hard for her to concentrate on anything. She was quite resistant to looking at the essays, but I held my focus and she began
to see a way forward. Following this meeting she started to work with student learning assistance.

A year later Supa was still using the hand microphone and described the process:

Supa: I do my writing then I go back, then I go in I read it out loud to myself and I'm able to see the mistakes or I have confidence. I feel this confidence of not having shame around not having the right English for it. It's been amazing. I read my assignment out to myself today. … …my own personal confidence was like marvellous, not bad at all (Excellent) … especially, talking to you was I can sense my excitement but I'm able to hold the excitement in a centre place – that's the idea of this one assignment it's when I get this 'ooooohhhh' out I've used it. (Supa 12 2010)

6.3.8 Health aspects of disorientation, affect regulation and self-regulation.

6.3.8.1 Disorientation: Floating and panic attacks.

Supa attended a Vipassana ten-day silent retreat in December. Early in January she was back to university to carry on working with her assignments. Although the retreat was a wonderful couple of weeks, the experience left her connected too much to her feelings, at the expense of being ungrounded and lacking focus. She described working on her assignments in this period:

Supa: it took two to three whole days to do three questions …Friends helped me to get the information and [I did] self-talk ‘Supa get out of this!’ It’s like I’m really dumb and there is a apart that floats with having panic attacks in the night. (Supa 7 2009)

Before I trained as a therapist I had an experience of Vipassana and share it.

Kay: It was difficult... That early experience taught me to be careful of silence; it may not always have the desired regulating effect. I understood the theory and loved the philosophy but this experience of silence had not been useful. I was left with accumulated energy in my head. In retrospect it was probably energy in the right brain, as I was unable to speak even when there was opportunity. My thoughts and cognitive side went in a tight uncomfortable circle. I described it as ‘It was like I couldn’t catch up with myself quick enough’ and was scared by that. (Supa 7 2009)

My analysis of Supa’s situation was that she may have made too big a shift, similar to my experience, which had led on to another form of dis-regulation, the panic attacks and the floaty unfocussed senses. The enigma was that she felt at peace with herself as she says “In my floating mode I can’t get a sentence at all, when it happens I have to stop”.

At this time she had her first interview with the university psychologist (2009), and she was managing until the main reason for the meeting, the issue of her car accident insurance claim, came up. She felt herself beginning to waiver, and in the conversation with me she began to jump to other subjects, as she was not comfortable with her feelings and wanted instead to
clear up why she had failed an exam by 1½ marks. She did not like how overwhelmed she was feeling.

I made an I-poem of the text when she began to ‘jump’ subjects. Here is the I-poem:

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<th>Vipassana</th>
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<tr>
<td>I had</td>
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<td>I have</td>
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<td>I am</td>
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<td>I want</td>
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</table>

6.3.8.2 Signs of distress.

All data in this section are from Meeting 8 2009.

She continued then to describe her stress.

Supa: My eyes, I can't even see properly OK, they've gone blurry on me every day practically like it's just, I mean I know that somatic [psychotherapy], it's something, it's just my cataract plays up, then I go blurry and I can't even see some times, I can drive and all that sort of thing but when I start reading, even with my reading glasses I'm now blurry so I'm just not – I'm just in shock I'm just in that, but I'm not giving up so I'll just keep on going.

I suggested that she did something to help herself orientate because I thought she may be in a grip of disorientation. The shock had triggered her tendency to activate the extreme parts of the left or right brain. I thought she was going in both directions at once and what was needed was to focus an activity to centre her that would connect both hemispheres together to bring better affect regulation. With trust and rapport and our background of body psychotherapy we had established a relationship that Schore (2009) describes as “the fundamental role of the right-brain to right-brain communication across an inter-subjective field embedded within the therapeutic” (p. 115).

Supa: I've been not even connecting to my creativity, that or this, I was doing the creativity in conjunction with what I was doing it was really helping my reading, my flow and my memory… so yeah, it was a bit, I can't connect to it at this point now, right now. I can just feel the numbness of having to accept that I failed, and I can tell by my voice that I don't like.

I went through a body work exercise with her to reconnect the two sides of the brain. What followed was less frantic and a deeper emotional connection. The depth of the issue is demonstrated by the following conversation.
Supa: Yeah, I felt shame and misunderstood.

Kay: Know that our expression together will help you get grounded, and clear your energy field, because what you're doing is accumulating emotional expression.

Supa: It is and I'm feeling it, I'm feeling it, like I'm sick and tired of people. My children still disbelieve I was sick, even though I've given T my certificate to say that I was sick. They kind of wipe it off as me being mad at that stage. I admit that I was mad you know what I mean; my ex still runs his story… I can't do any more, but… And she went on to get things off her chest.

6.3.8.3 A reflection: The irony of the situation.

All data in this section are from Meeting Supa 9 2009.

Supa had felt confident, then angry, about her psychology failure, and wanted to confront the issue. She thought it unfair that the marker was from the ‘old school’ and not contemporary at all. The irony was that one of the essays she was working on was the Biology of Stress. She shared that she had been asked to redo another essay on the concept of ‘trans-generation’. On reading the instructions clearly, she [found/realised that she] had missed that the essay required discussed her own experience, and she had too much “academic stuff” in it.

During this period she felt isolated and in turmoil; her usual supports were not around. An interstate friend she rang for support helped her see it not as a failure but as not meeting the criteria, and gave her permission to give up if she needed to. This gave her resolve and she felt less imbalanced.

Supa: If I had put in for special consideration and they failed me part of me the logical part says it’s alright it will be fixed but the panic part says I’m not going to do this anymore if I have failed I’m not going back to do them again!

Still the two sides are in conflict and her dissonant voices seem to struggle with dissociation, similar to the examples from Gilligan (Section 3.4.5.4.1). I deflected the comment and we discussed how I could help her: she decided to work on the self-evaluation essay. She had already accessed another helper to gather the information for the essays and that helper was impressed with her verbal knowledge. Yet Supa felt that it was because of the mental block. She said. “If I’m to share my knowledge, I don’t usually write it down, so it [writing] is one of innate fear.” Again she is recognising a trigger into the right brain affect. As a practitioner, I felt the need to work more with her affect regulation, but this was not sufficiently established.

6.3.8.4 Memory-related stress from rote learning.

Supa was nervous about the anatomy course she was repeating. She was having memory blanks but she was enthusiastic and loved the learning. In order to remember these anatomy concepts, her process was that she needed to be shown so she could feel it. She would then
have someone say it to her so she remembers their voice. By her saying it then she can embody it. This process may need to be done three to four times and was failing her.

To help herself with the memory function, she was having some cranial osteopathy, which basically moves the bones of the skull to create a different rhythmic flow of the fluids. Changing and increasing the rhythm ultimately restores homeostasis (Christchurch Natural Health Practice, 2007). As well she took gingko, a herbal remedy renowned to help memory. She says these health strategies “gave more space in my brain and works on an emotional level to set the path for memory to work.” However, this good work changed quickly when she had an emotional upset with her new friend. The process of cranial osteopathy usually quickly helped; however, not this time. She felt overwhelmed because of the work needed to help her remember.

At this time she had an important awareness that, in her enthusiasm and excitement about learning and creativity, there was a fine line between anxiety and excitement in learning which can easily move into the negative energy of anxiety. What makes one situation exciting and another situation more anxiety producing? I think the type of action is the key. If there is little satisfactory outcome from an action, then anxiety could build. I think her excitement doing her anatomy studies was related to an increased adrenal function which she experienced as a level of high energy. However, she then recognised the negativity of this particular state. This insight provided a greater understanding of her self-regulation. She was endeavouring to work out the difference between the learning and her strong desire to be a doctor. The early attempt to study anatomy in her first term added to her excitement.

Supa: When I go into the lab my learning [is a] hunger [of] delightfulness When…my learning is a ‘hunger of delightfulness’ I don’t remember it…. I have to stay in my calm so I can memorise. (Supa 15 2010)

Kay: Is it like you are getting ahead of yourself that’s why I think you lose body and focus?

Supa makes the connection to embodied learning:

Supa: Hand talk [hand microphone] when I read it slowly calms me down and I can memorise it more. (Supa 15 2010)

What an important statement, as it shows that memorising or memory is tied up with sensory perception.

6.3.8.5 An I-poem: The ‘excitement process’.

Taking just the ‘I’ and the verb in the follow text from Supa, I created another I-poem.
Supa: Well, I think that I get excited about when it happens and I can remember when the task is achieved. I get excited by the fascination of the body, itself. I've known about the body, I do all the intuitive stuff and just see it in the reality of where all the lymph, you know that lymph, the lymph system goes, or where this happens or that happens, but the element of the body still gives that surprise, which I call it the will. It still has its own temperament so…the excitement takes me away also, you know I get really high and I'm conscious now when I get that high, I really I still want that enthusiasm to be there because it opens the channel. (Supa 15 2010)

Excitement
I think
I get
I can
I get
I have
I do
I call
I get
I am
I get
I really
I still want
Enthusiasm!

6.3.8.6 Recognising anxiety: The panic attacks.

All data in this section is from meeting Supa 9 2009.

Her affect state was getting more serious, as she was bringing up old negative beliefs.

Supa: ... went into a depressed state of not knowing and dumb, I'm dumb, I guess…like I know when I'm writing, like I’m still very sensitive about my writing, people expect me to write academically well and I don't. I still get paragraphs and paragraphs of repeated mess and I know that that's part of my issue of confusion. I just go into prolific writing and it makes sense to me, it may not necessarily make sense to anybody else.

I asked her if she was experiencing panic attacks:

Supa: Yes, and then I lose it emotionally then it doesn’t take much to defocus myself and then in the class I have some students that help….I’ve hardly done the Repeat work just have to go through it again and again that’s how you do anatomy but I find it exciting I learnt sterno-clavicle-mastoid the muscle…I get excited because I discover the 'o' means connecting and I remembered it. Now I have to remember the rest… You can’t work out I draw, I repeat it and I write it up.

Supa acknowledged she uses some excuses for not studying more consistently, but at this point she was “not coping I’m sick and tired of hearing myself – the car accident; the tax people have me on the list”. In discussion she realised she has to let go some responsibilities,
and was giving up the student association when her time was complete to avoid further affect dis-regulation.

6.3.8.7 Sensory perception and affect regulation.

All data in this section is from meeting Supa 9 2009.

The link between sensory perception and affect regulation is explored in the conversation which ensued.

Supa: I find if I talk to you now, in this stance, my voice lowers, the voice becomes softer and slower, and my brain begins to start to think a little bit more. Is that possible, sort of like, I'm not pre-thinking what I'm going to say… , what I do in my writing is I read all my information, I read my objectives carefully, this is my academic study, or whatever topic that I'm going to do, so then I will mind map, in my mind or outside, like I write little reflections all over the place, page such and such, look up this, or read that, do that, do that, here's a good…

Kay: So part of the difficulty is with the mind map, it has no labels or words to ‘trigger’ on.

Supa: No, in my mind, it's pretty, a visual component that__ hasn't been working as well, when I'm_when I'm emotionally unstable, I can't do it.

The mind mapping process I envisaged, as a systematic approach, would allow her to articulate her ideas more easily. She spoke about a more ‘artistic’ mind map which was not accessible when she is upset. The following sentence shows the quality of her anxiety:

Supa: I can do it, I mean I'm not, but I can do it. I do do it [pause] I guess my regret for me, if I was to critique myself is that I'm not giving maybe the quality time it needs to do some of my work.

In this last text above as an I-poem, her hidden feelings were revealed:

Anxious

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<td>I am not</td>
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<td>I do</td>
<td>I guess</td>
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<td>I critique myself</td>
<td>I’m not</td>
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6.3.8.7.1 Imagery/emotional work.

I made an observation to her that I felt she was suppressing crying and the area it was affecting was her throat. We agreed to explore this idea further by using imagery.

I said: “If you could see that cry from the throat, what shape would it be or take?”

Supa: I see …a free flowing dance movements, free flowing and stopping when I need to just flowing like giving it the kind of me without, I've got to do it now, I've got to bracket it now, or you know I can't go there now, or if it comes, but oh well, I've got to do more study, oh no,
I've got to do this, now, but is always this, I've got to, I got to, I got to, and it did come yesterday and enough for me to realise that I do need to cry I do need to let free whatever it is, I do need to love my controlling self. You know she re-manifested in the outside world and I don't need that, I don't need my wings clipped, I need to fly and that's what I got from M this morning – a reminder, and my relationship the people I was working with and all of my failings and things like that, so, academic studies?

The I-poem from the above text revealed:

**The Cry**

<table>
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<th>I see</th>
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<td>I need</td>
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<td>I’ve got to…</td>
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<td>I’ve got to…</td>
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<td>I’ve got to…</td>
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<td>I got to…</td>
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<td>I do need to…</td>
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<td>I do need to…</td>
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<tr>
<td>I don’t need that</td>
</tr>
<tr>
<td>I don’t need…</td>
</tr>
<tr>
<td>I need…</td>
</tr>
<tr>
<td>I got…</td>
</tr>
<tr>
<td>I was working</td>
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</tbody>
</table>

The cry of the infant voice can be heard by the repeated “I’ve got to…” a kind of frantic seeking, then the parent voice represented by the “I don’t need that.”

6.3.9 Action learning.

The following sections trace some of the conversations between Supa and me that led on to action learning.

6.3.9.1 Learning reflection skills.

All data in this section is from meeting Supa 10 2009

She wanted help with a reflective assignment using a ten-minute counselling skills training interview she had created. She was confused about the definitions of reflection and the process of reflective practice. Her brief was to cover attending skills, confidentiality, advising the client, and open and closed questions. Attention was considered an important aspect, including the micro skills that come with it: how to allow the client to speak or not, and paraphrasing the feelings. I asked her what she had learnt from the training interview.
Supa: Confirmation of my own skills, now, that was the harder part for me to reflect [on] because I actually haven't found what it is that I have to improve … [in the demonstration of reflective practice in the video] that I was doing.

I wondered why? Was it because the team was not able to be reflective? Does she understand the skills sufficiently to know when she used them? She agreed it would be helpful for me to observe her video interview and reflect back to her. We had our direction for this meeting.

I listened to the audio of the meeting, and then went through the skills to bring out examples that she could use for further exploration in her assignment. I thought she summarised well what the client had said at the end. I noticed that she had missed some of the steps in between.

I demonstrated using the video proactively and asked her questions, hoping that she would go through the video again and ask herself questions of the type ‘What do I say here? What do I say there?’ to indicate and practise summarising or paraphrasing. I gave an example using ‘What if I took this point what would happen?’ She seemed to get what I was saying.

Supa: This is good. This is good. [pause].This is good. This is what I'm needing. This is where I'm stuck, so this is great, Kay.

I later learned she got a high distinction for this assignment.

6.3.9.1.1 Outcomes on learning reflection skills.

Supa: You gave me questions that …helped me put it into a sentence and slow [down the] process… the kindness really helped. It was quite ‘masculine’ to the point it showed me how you did it. (Supa 13 2010)

That session helped Supa to move on, gave her motivation; she was able to finish the assignment in less than a week. Usually it takes longer for her to pick up her creativity after working on her writing with a helper.

Supa: The power of your support was in the questions. How you questioned myself in the reflection that’s the power. I remember to do that for others. You’ve embodied it. (Supa 12 2010)

She gained a credit for this assignment and acknowledged the help by a friend who explained to her why things needed to done in a certain way. Through her study of somatic psychotherapy, Supa could elaborate on her learning style using what Anderson (2001) called “embodied knowing”.

Supa: In appreciation, it’s not [only] the writing [but sometimes] you will touch a point [on my arm] in a way that meant I can embody [the knowledge]. (Supa 12 2010)

Here she refers to my kinaesthetic knowhow, which she had given permission to practically use this knowledge with her.

To understand the difference between critique and criticism was a new understanding for her from this session. She realised critique was the
Supa: type of question which encouraged me to make more questions and reflect even more. Then that becomes your critique. Yes, critiquing is a gift that comes from heart and if not from heart or from practical or just from logic becomes criticism. (Supa 13 2010)

An example of critiquing is demonstrated when she said:

Supa: when we were doing that counselling (assignment) for instance, you were critiquing what I didn't see, you made me go in and look at it more. That's what needs to be done. The critic within had to be able to do that, it was part of the objectives… I couldn't do it, I was stuck in my, my, my way of verbalising, my way of writing and all that sort of thing and you just brought it into succinct, and I was able to tap into that side of my logic, I needed that. (Supa 16 2010)

6.3.10 The Institutional culture for disability.

6.3.10.1 The process of becoming a ‘disability’ student: support in the university.

My children were subject to being ‘different’, had me [to fight for them]…who’s fighting for me? (Supa 9 2009)

During her time at university Supa saw two psychologists. One was concerned about the car accident and an insurance claim, while the second psychologist was concerned with compensatory strategies needed. From the second psychologist’s point of view, dyslexia was not an issue. Her report to the disability services did not support Supa having dyslexia, but rather highlighted the PSTD and her cognitive processes as the priority. Nevertheless, she requested a referral and a meeting with the disability services, who would do the Dyslexia Adult Screening Test (DAST) (Appendix 9) as part of that process. Supa’s reason for going was that she had failed an exam in psychology. She was informed she could not use a computer in the exam without obtaining special consideration and disability status.

Supa: I’ve had to put myself as a disadvantaged person when I look at it I have overcome my disadvantage by using the computer. It doesn’t make sense to me. (Supa 9 2009)

The psychology failure was substantial as it was a written exam. Possible exam questions were provided to her. She studied those questions and had typed out model answers as part of her study plan, but before leaving her house she could not find this work for her last minute swat and panicked. She had been confident and had not been thinking that she would fail. She decided in her mind that it was outside pressures that caused the slump. As well, her assignment had been marked down to 40, the lowest mark she had ever had, and she was asked to redo the whole unit.

She struggled to come to terms with having previously had a high distinction (HD) on an earlier assignment when she had editing help and learning support for referencing issues. She thought this fail was because her “sentence structures weren’t right… and perhaps my referencing was poor.” The shock of the failure motivated her to go to follow up with more
learning assistance. She had been over twelve months at the university with minimal learning support.

Supa was hard to get to know in one brief meeting. She had positive tone and articulation, many competencies, and has adapted well in her life. The following week, Supa was seen by the disability officer and seemed not to know what else to ask him. I was slow to pick up her concern; rather, I focused on what the School was doing about her outstanding essays. This was in her first year and she was already not getting feedback and marks on submitted essays. She said: “I'm still struggling with them ... I'm sending it in imperfect [form].”(Supa 7 2008)

6.3.10.2 The lack of on-going support.

The text in this section is from meeting Supa 14 2010.

When Supa had help with an assignment, she felt understood and was particularly pleased that the person could change some of her work without taking her “creative content away” – she felt she could learn. “I actually learned from the examples and my memory then comes because I learn when I see the right format”, now she could keep going and self-correct. By this time she had other helpers who worked in a similar way; she said: “They've learned not to argue, learned not to tell me what to do!” But the issue did not go away over the time I worked with her. She was getting piecemeal help from friends and there was no ongoing process available within student support to teach her consistency in structuring her writing at her own pace.

Supa: If I had someone who took me through each of my writing processes, I would get high distinction for every one of them. I would, seriously I would get high distinction for every one of them.

I was concerned that she was unable to access the consistent help. She felt differently:

Supa: I've manifested you, you doing your process ... you have been an enormous help when I'm doing my assignments. One you give me the confidence you sit with me and you trust my confidence. You give me that empowerment, is the word I would use and hope. That's for me very important when you're learning.

However, she felt the need was to have a fairer system for all struggling students in the course.

Supa: People who claim they have Indigenous in their blood can have a tutor for free and they do well. I have a disadvantage, but I can't have a free tutor ... I really think the Uni needs to provide possibilities for students who are not doing well, like me in the practical to provide a tutor in the classroom.
6.3.10.3 The paucity of lecturer feedback.

An early experience was of being told to resubmit an assignment without explanation or feedback from the lecturers. When she inquired if it was a technical issue, she was told she had not passed. She re-sent this assignment without any changes and a second marker awarded 37/50. Supa wanted to know what the problems were with the first assessment, rather than just have silence. Much later, when she found that her grade on that subject had still not been registered on her records, she was told again to re-submit. This third re-submission without alteration was marked as 32/50.

She completed all assignment and class work on the Indigenous part of her degree. However, her administrative records were incomplete, with eight subjects where no mark or feedback had been recorded or provided to her. In contrast, all her friends have had their work marked and returned. In January 2011, I had an email from Supa to say that she had again resubmitted all of these eight papers. I can only assume that there was an issue with inconsistent criteria for marking relating to her special considerations being applied to most of her papers.

Other than these outstanding eight subjects, her records showed three failed subjects, of which one was incomplete and one an absent fail. Despite all of these experiences she has maintained a positive attitude.

Supa: I just want to do my best to not worry if I get a high distinction (HD) or a pass [but] I want to get high distinction (HD) or high credit (HC) because in the academic world if you want to go on to honours they look at all that, so I want to have the higher credit. I know if I want to do a Masters I will create it, I’m not going to be beaten by the system (Supa 18 2010)

She was always optimistic and into possibilities. I believe she will do just as she says!

6.3.10.4 The departmental inquiry.

Supa learned that her issues were to be addressed by a departmental inquiry (Supa 20 2010) and she spoke at length:

Supa: I have become a part of the unpacking of the Indigenous course and that was not my intention. I feel sad. I also realise when I go back out into the world my organisation skill is the gift I will be giving to any group I go into…. how to do that with flow and flexibility and still get it done, this is the other way. It doesn’t mean people don’t get special consideration and don’t do it in their own time frame they do but it still gets done. The social science school really followed us through really well, they are tearing their hair out too but they live what we are talking about. (Supa 20 2010)

She had experienced a School working with integrity.
6.3.10.4.1 Supa’s public statement.

Supa’s intention on our last meeting (Supa 2010) was to make a public statement which she thought may be of value for the research. At this point it was twelve months and possibly longer before she would be finished her degree. The following is a précis of what she said.

Supa believes that she would not have completed her degree without the special consideration report and would have given up in the first year because of her trauma and other difficulties. Further, she was grateful for the system in place to support her when she needed special consideration. She wanted to take the shame out of learning issues; she knows students still suffer and some have committed suicide as a result of not knowing how to ask for and receive support. She thought this was because “the system insists that is how it has to be done”.

Finally, she said that even though the institution had done a lot of work to support the students, the funding cuts and lack of understanding continue. Her advocacy for learning disability is that the focus needs to be what the student brings: start where they are at. She wanted to work with me as her way of contributing to a deeper understanding of the learning process.

6.3.11 A Meta-reflection and conclusions: learning processes in the university.

Supa: Coming to university has shattered my confidence in the sense [that] I have a lot of knowledge, but they're asking me to do this and if I don't get it right I've failed. I haven't failed; I've failed their criterion, that's all. I had more respect …, a higher respect now for those who really have gone through the hoops and become psychologists … people now are saying [to me] why do you want to do another five years and squash your personality? (Supa 2010)

Supa struggled to understand the disciplinary ‘language’ in most of her subjects; her communication is mainly on an experiential level. It is essential to nurture diverse learners through the language of a new subject; to help them to use a simple model or structure by which experiences can be reflected and learning enhanced. With Supa I used an empowering self-regulation learning model as my main structure.

I believe Supa will succeed because of her strong positive beliefs and is finding her way into a learning style which will enhance her strengths further should she wish to continue to study. Should she continue her experience has shown her that she will know other methodologies, such as using story-telling/narrative works, where she could be guided to make the process both a professional and a personal development. She needs an environment where she can contribute verbally to complement her kinaesthetic and visual learning. Her oral work is an important strength, which strengthened as we worked together. She demonstrated that she could quickly pick up new ideas and incorporate them when feeling in a safe dialogical
environment. Eventually she will require more techniques to help her further improve her auditory processing. This would mean she could learn more directly with less stress, listening to her own voice and speeding up the process of listening to herself. In another meeting, as discussed, I used an example of modified music from my therapy practice, to enable an experience of an aspect of auditory processing. While she experienced only three five-minute elements of the process – laterally, shifting sound from left to right, and the filtering stage which makes the ears attend more consciously – she had already in the last element (third stage) experienced her ears beginning to relax. This was a small example of how with a receptive person such modified music can help the sensory integration process by enhancing and developing the neural connections to the visual and auditory memory.

This sensory integration process is a common issue with people with dyslexia and the one that gave Supa the most distress when she was doing her ‘rote learning’ for the anatomy and physiology exams. The connection to stress and the sound pathway from ear to brain is critically important for diverse learners and is useful for all. For example, when stress slowly accumulates in one side of the brain, as when doing a rote learning exercise, it can be directly associated with an over-stimulation of the senses (Kranowitz, 1998). Visual over-stimulation is common in people with dyslexia, who usually have a strong preference to either visual or kinaesthetic learning, leaving the auditory sense underdeveloped and with limited integration. As a learning process like ‘rote’ learning is implemented, it can push the person to an unbalanced self-regulation, which increases the imbalance of the lateral and integration processes.

As an example, when the feeling underlying a text on excitement (Section 6.3.5.5) is compared to a text on anxiety (Section 6.3.5.7) and made into I-poems, the I-poems show a fine line of difference. I interpret ‘Excitement’ as a moving present dynamic flow; while the Anxious I-poem reflected a stop/start, coming forward-going back feel and, possibly a trace of future worry.
6.4 Chapter Conclusion

The common outcome of working with each of the six co-researchers was that they were facilitated to a deeper level of connection with their feelings about their learning experiences. This proved critical in enabling them to recognise the connection between their emotional and physical (kinaesthetic) state and their cognitive functioning. They gained the understanding that feelings and mind are interrelated, and that stress impacting on one would affect the other.

Factors which helped to improve the self-regulatory ability included improving communication and connectedness by developing reflective practices; acknowledging feelings; and directly working with techniques to improve auditory processing.

The catalyst for understanding affect regulation was enhanced in the Health Group by their becoming connected to each other through a shared experience of listening to each other’s writing which was further used within the group as the basis for further reflection on their health and learning issues.

For the two individual co-researchers, the learning strategies implemented enhanced self-regulation processes by recognising strengths from their prior learning. Their catalyst for reaching this understanding of affect regulation was achieved through kinaesthetic awareness, applying kinaesthetic techniques and the use of I-poems.

To varying degrees, all the co-researchers came to understand that whenever there is a learning issue, there will inevitably be physical and emotional health issues as well. Helping co-researchers make permanent positive change to their health or learning outcomes was beyond the scope of this project. However the first step to empowerment is awareness, and indeed the two individual co-researchers, who were both at crisis point during their tertiary
education experience, did go on to be more successful after their involvement in this research. They acknowledged the value of the research process and outcomes.

The following chapter summarises and synthesises the learning stories as revealed in Chapters 4, 5, and 6 and explores the self-study aspect of the research and my own reflexive understanding of self as researcher and listening practitioner.
Chapter 7.  
A Synthesis of the Stories and Aspects of Self-study

This chapter draws together and synthesises the diverse learning and health concerns of the co-researchers in this study and explores the self-study aspects of the research. The discussion is divided into three main sections.

The first section is a summary of the main issues for each co-researcher, to show the emergent themes, with the major concerns then illustrated in Figure 7.1.

The second section presents the thematic commonalities and differences. These thematic concerns overlap and separating them at times has been difficult.

The final section discusses the self-study aspect of the research. The shift in focus of this research from dyslexia to diverse learning requires an exploration of how the term diverse learner is used in this project.

7.1 The Overview

Diverse learners in tertiary education are “those students who, because of gender, ethnic background, socio economic status, differing ability levels, learning styles or disabilities, may have academic needs that require varied instructional strategies to help them learn” (Wickersham, n.d., p. 1). Other minority groups such as the Indigenous and individuals who have English as a second language can also be diverse learners (Toman, 2007). Historically, such minorities are supported through equity and student support services. As minorities become majority groupings, for example through the advent of internationalisation of higher education, diverse learner requirements are forcing a change in structures and practices. The diverse learners in this study were from two main areas: (i) those with known learning differences (dyslexia) and learning styles, and (ii) those with chronic health related disabilities. The research explored how health related issues affected learning and vice versa.

The politics of Australian equity funding in higher education means larger numbers of diverse learners are expected. At present, funding help for diverse students is supported legally by the DDA (1992). This funding is available when students self-refer, and is accessed through disability support services when students need more assistance than they could receive from learning support services, particularly when they require extensions of time to complete projects. Although the disability issues of the co-researchers were invisible and therefore not
overtly talked about, there was a sense of shame associated with having to seek help from learning support services (Driedger & Owen, 2008). However, when one co-researcher had concurrent issues, a learning issue of writing and a chronic health condition, the institutional diagnosis favoured the health issue and in so doing by default ruled out her accessing ongoing developmental learning support.

Other anomalies were that two co-researchers with dyslexia were both previously assessed before coming to university. While assessment for disability is possible in higher education, in order to access the funding, dyslexia is defined as a medical condition, and for some students the stigma may be detrimental to their progress.

### 7.2 The Co-Researchers’ Individual Experiences

A total of eight mature-age (over 40 years old) co-researchers were involved in the whole project, six women and two men. Two of the women participated only in the AR3 Health Group; two were known to have dyslexia (Gm and Supa), three had fatigue issues and accompanying brain fog (Gst, Ma, Jas), and one had unrecognised auditory processing difficulties (Ph). Pain was the main measure of the body dynamics for the males. Their attitudes were directed towards physical activity and I had little evidence of a sense of a highly developed inner awareness. All the women had varying degrees of inner awareness, could express feelings and had strategies to move beyond pain.

All co-researchers came with a social or personal issue to resolve. In general they felt positive about their course choices and subject matter, and enjoyed their studies or their research. There was a level of neglect in taking care of self, for example by ‘pushing through’ when tiredness meant less efficiency, and by having misperceptions about their present health situation and an unrealistic understanding of the learning tasks. For some co-researchers, the dynamic process of building up stress triggered excessive behaviours that impacted upon learning abilities. For example, the stress associated with not understanding the requirements of assignments or projects was common. Asking for help was not easily undertaken and in some cases was considered to be a weakness. A sense of a growing isolation and the resultant need to have more opportunities for interaction were strong. The main issues of each co-researcher are presented and summarised in the order of their appearance as presented in Chapters 4 to 6.
7.2.1 Gm: experience of dyslexia.

Gm had been assessed in her teens as dyslexic. The overall theme for Gm relates to how she managed her studies, particularly in terms of her health and well-being. Her story is one of courage, fortitude and passion to succeed against all odds. She completed a Social Science degree in her 40s and mistakenly thought that as ‘she liked working and relating to people’ she could do a psychology major. After completing this she was ‘head hunted’ to do a one year Masters in Science. Our meetings took place in the last six months of this degree during the completion of her write up.

When she went for help in learning support, an astute staff member recognised her dyslexia and assessed her as being close to a “mental health breakdown”, which Gm described as a form of dissociation. She was at one point unable to write anything and it was then she approached learning support. Her early childhood learning stories revealed many humiliating incidents in her early schooling that resulted in a period of nearly five years of non-reading. Another humiliation followed as a teenager, when she was wrongly accused of cheating. It was hard to describe and estimate the impact on her identity.

My approach was supportive and the implemented learning strategies were mainly creative writing processes. The written childhood learning experiences acted as a contrast to the formal writing tasks and gave her safe access to her feelings. She also wrote about her experiences of her university writing conflicts using a type of I-poem and resolved some of the feelings of confusion and “frozenness” that she was still experiencing. I also used a computer-based brain exercise program with her to increase awareness of auditory processing and the link to learning and relationships. She successfully completed her studies.

7.2.2 Affect and self-regulation.

These stories reveal a common learning preference for a kinaesthetic learning style and varying degrees of self-regulation issues. Two have chronic health conditions which means they were somatically compromised (Jas, Gst); while the third person (Ph) had no health issues but had some similarities to Gst in attitudes to study. For example, both used endurance skills to ‘push through’ their mental tiredness with a driven attitude which was possibly tied up to identity and competence.

7.2.2.1 Jas: The perpetual learner.

Jas was a professional staff member who was involved in the AR1 group. She experienced fatigue, memory issues, allergy flare-ups, and head pain. Her childhood stories contained
incidences of unresolved balance and laterality issues, which suggested that she had a preference to kinaesthetic learning or learning from experience. She was surprised that she had not connected these physical attributes to her learning experiences. As a child her balance and laterality issues were significant. For example, she could not ride a bike, a skill which incorporates and represents the three primary dimensions of brain function: focussing (front/back), centring (top/bottom) and laterality (left/right) (Dennison & Dennison, 1989).

It is understood from sensory integration theory that such vestibular compromise could account for dis-regulation (Kranowitz, 1998). These childhood physical limitations meant she predominantly sought solace in imaginary play and reading and was known as the ‘brains’ in her small country school. She adapted well and became an academically successful learner; however, these sensory issues from childhood were the possible cause of the somatic issues that were hampering her academic work. Her bodymind conflict became easier to understand when I found she had more than one issue with left/right integration. For example, when she was challenged with a simple left/right ear diagram she continued to be confused despite having seen it twice. Such sensory integration and lateral issues (Porges, 2011) continue to undermine her self-regulation.

**7.2.2.2 Gst: Chronic stress.**

Gst was a mature-age student with both chronic fatigue syndrome (CFS) and visual stress issues. He had an exceptionally dogged attitude to continue and complete his research. His motivation for starting a PhD was the unfair treatment he received regarding his CFS, both in the workplace and at another university as a postgraduate student. He told how work and study choices were interwoven with his illness and left him feeling victimised, he lost trust in the university when his issues remained unresolved.

Two years later in the Health Group in AR3, his written early learning stories told of perceptual learning and health issues. For example he had reading aloud, rote learning and spelling issues, had episodes of not hearing accurately and was bullied. He developed competencies and compensatory and creative ways around issues that had hindered his progress in his learning through masterfully using the resources around him. He became a self-directed independent learner.

**7.2.2.3 Ph: Developing reflective practices.**

Ph was attracted to the research via my focus on auditory processing and its link to health and learning. He wanted to help his son who was not responding well at school. My relationship
with him was quite disconnected at first. I recognised this as hidden stress and looked for ways to work with this issue. My strategy was to use action learning to improve two parts of the action learning cycle – the feeling and reflections parts (Figure 3.3) – which would directly improve the relational aspects.

The contrapuntal point came when I recognised his hidden stress by his body language and my observation reflected back. His identity and the adjustments necessary to be “happy in his skin” were initially confused with the learning issues of his son. It was the auditory processing issues he identified in his son which seemed to be intermingled with his identity, and continued until he developed his academic identity and could let go more. Then awareness of his more hidden learning needs began to surface as the goal of his study outcomes came to fruition.

His high fitness level and strong drive to be competent meant he could endure periods of over-studying and could recover some self-regulation once his goal had been reached. He could often be on the excitement/anxiety edge. For example, when an exciting new subject experience occurred, he could become overwhelmed to a point such that his ‘brain doesn’t gel’, and then he would have to walk away, making it hard to pick up and start again. Alternatively he enjoyed the study so much he could not see any point in stopping until the goal was reached. This was a similar behaviour to Gst, who called it “Boom n Bust” behaviour. After three years of study, he became less driven in his study priorities and could focus on those subjects that excited him rather than always seeking perfection in the minor subjects. Auditory processing and time management issues made it difficult to keep our relationship going. He described his learning outcomes in a passionate way and had some moments of stress release from our contact. Learning about non-verbal dynamics and awareness of and action on self-regulation provided a critical learning for both us both.

7.2.3 Diverse learning and health.

Developing a deep understanding of diversity and difference in learning was not easy; however, the Health Group (Gst, La, Ma, Mt) was worthwhile, with the connectedness and acceptance it brought all participants. The link between diverse learning style and health was explored in terms of the impact of trauma, the ‘disability’ label and chronic health issues on learning.
7.2.3.1 Ma: A concurrent health and learning situation.

Ma (late 50s) Caucasian woman with a long-term chronic health condition, as well as learning issues, and who as an adult had experienced two major traumas. Her learning issues stemmed from childhood humiliation, when her creative writing was received aggressively as unacceptable by a teacher. This traumatised her and set her up for self-doubt concerning her abilities, which carried on when she failed to gain entry into university. Her work prior to university was as a competent community advocate and trainer. She was attracted to the Indigenous studies course because of the experiential component. Although she possessed competencies in group work and training, she found it difficult to integrate into a new student role as a non-Indigenous person in an Indigenous course. The lack of support compounded, to the point that she felt ‘invisible’. This affected her writing and organisational skills. The early work which required writing within the online environment was a stumbling block, as she lacked technical skills and her fatiguing illness had been exacerbated by re-traumatisation in the experiential groups.

Our reflective discussions critiqued the process of these intensive workshops from her trainer and advocate perspective. Cultural safety, learning detachment and discussions on reciprocity and deep listening were issues we explored together. The collaborative, reciprocal processes created a deep co-researching relationship.

7.2.3.2 Supa: Valuing prior health, learning and the student role.

Supa, was born to Thai/English speaking parents, came to Australia at fifteen years old. She comes to University in her late 50s as undergraduate student, with no previous formal learning experience. A traumatic car accident six months prior to coming into higher education was her motivation to apply for the Healing and Trauma course in Indigenous studies. She was articulate, positive and motivated to learn. In the first six months of her studies, she, like Ma, went through a state of re-traumatisation which for her was like dissociation. When I met her she was receiving no help from student services. Informal help for her writing issues was provided by friends. As we worked together, issues emerged associated with dyslexia. She floundered with concepts within reading material and was often confused by the language and structure of writing an essay. Over time her stress built up and she began to have panic attacks. In the third year she sought psychological help and was deemed to have post-traumatic stress disorder (PTSD) and was then sent on to the disability services for dyslexic screening, which could not be established. This meant she could not access any further
learning help in her school, despite others with similar literacy issues having support and funding.

7.2.4 Summary.

Each co-researcher story revealed learning issues, all of which could be traced from childhood experiences, and which for each continued through adulthood into tertiary education. For some co-researchers, these concerns interacted with teaching issues to impede successful progress and ultimately had a negative effect on health. The major concerns within the learning stories have been identified and synthesised and are presented in Figure 7.1.

**Thematic commonalities and differences of the co-researchers**

The commonalities and differences of the major concerns of the co-researchers have been organised into themes and subthemes within the context of diverse learners.

Theme: What the co-research brought to the higher education environment in relation to:

Subtheme: Health and well-being;

Subtheme: Life events, student role and prior and present learning style.

Theme: What the co-researcher experienced in the higher education context in relation to:

Subtheme: Health and well-being;

Subtheme: Teaching and learning.

Theme: The receptive listening strategies implemented by the facilitator and co-researchers.

Theme: The co-researcher and facilitator learning outcomes.
7.3 The Higher Education Experience: What the Co-Researchers Brought

This action research was conducted in a rural university in Australia. Early thinking about the project did not envisage that this would be the case. However, the evolution of the project was such that initial attempts to conduct a community-based project failed for various reasons, mainly related to community members’ workloads and competing demands of work and family. Many excursions to schools and community colleges failed to sustain interest in the project, so attention then turned to an available source of co-researchers within the higher education sector. While the context of the rural nature of the university was not explicitly raised in any reflective discussions, two co-researchers discussed the impact of undertaking distant study in flexible learning modes.

The students brought early trauma, chronic ill health and unresolved learning issues, including a diagnosis of dyslexia and cultural and financial differences. In this study the co-researchers had a very strong motivation to succeed; they wanted, and in some cases needed, to relate well to peers and educators. One of the main features of the co-researchers’ experience was the barriers that were perceived and realised between themselves, staff, and student services.
7.3.1 Health and well-being issues.

7.3.1.1 Confusion, disorientation and dissociation (compensatory strategies).

Perseverance is an admirable quality; however, some co-researchers’ (Ph, Gst, Supa, and Gm) behaviour bordered on varying degrees of obsession. Two examples of auditory processing issues were reading texts for hours with no output, and studying endless hours by rote and yet feeling that memory could still let them down. Behind such behaviour are beliefs and possibly poor auditory functioning. To have the self-control or self-regulation to stop was often missing. One co-researcher went very close to a point of dissociation, while others had some ability to control confusion. One person had excessive time away from study as a way to reorientate or balance in order to maintain confidence with their situation.

From Gm I learnt about perseverance and determination: she aimed to finish her course successfully despite a close call with dissociation which she feared was bordering on psychosis. Using creative writing to express her experience helped to restore her emotional balance, so she could continue to complete her formal writing.

7.3.1.2 Time boundaries.

Ph was invited to communicate outside our face-to-face meeting times, yet took little or no action. He perceived our meetings as part of the “uni thing”, with an apparent attitude that it was not pressing for him, yet in later meetings he expressed the importance of our meetings as they helped him better understand his emotions. Gst had a time boundary issue which frustrated me initially, and his communication style sometimes triggered me into confusion. Two years later our relationship changed; his written prose was focussed and exemplary because he was more comfortable with his study and the habitus.

7.3.1.3 Self-regulation, affect regulation and dis-regulation.

Most co-researchers had little understanding and awareness of how to monitor their stress by communicating their feelings. Learning in a “boom or bust” way represented for Gst a learning metaphor for excessive studying, at times to the point of exhaustion. Although some would perceive such times as enjoyable learning, there was an addictive out-of-control quality to their experience. All co-researchers had different examples of such experiences, with varying degrees of ‘out of control’ behaviours. For example, Gm spent many hours after work and on weekend studying and was fearful about the effect on her relationship, while Ma withdrew and did not ask for help early in her program.
Of the eight people discussed in this thesis, six had chronic ill health. The way they defined it was through their level of pain and their different ways of coping. For example, Gst had a strategy of “Set and forget!”, which I likened to the common metaphor given by health professionals when someone has a chronic condition: ‘Learn to live with it!’ Gst would continue to go through the pain until he could go no further. Recovery from the ‘bust’ would then take him many days. Some were more stoic; for example Ma would turn to a more inward focus and continue her constant struggle to write. She had down times some so severe that getting a meal would be hard to organise. Jas dealt with pain by taking time from work when it became unbearable. Supa’s chronic health issues were not so much physical pain as emotional, in the form of panic attacks. She could have “foggy heads”, which she believed were associated with her low blood sugar as she was pre-diabetic. She handled such symptoms with a positive attitude and welcomed them as somatic interventions to inwardly direct her to a new balance. However, she had two anxiety attacks in one week, which she said did not give her time to find a new balance, and she was for the first time expressing fear (MG, personal communication, 2011). Her accumulated anxiety may have been because of her interstate move away from the familiar support and the stress of finding a network.

What was missing from their accounts? Most had limited inner reflection processes in place. Supa, the most positive of the group, did regular inner reflective practices and generally could manage her own self-regulation. For example, she used mindfulness practices and strongly practised positive affirmations. She was the only one who spoke of this level of intervention in her own process. However, during her ten-day Vipassana experience, which should have helped reduce her stress, she found her self having a form of disorientation and she sought learning support; however, it continued on to become an anxiety attack.

Another of Supa’s insights was discovering how there can be a fine line between emotional disruptions of anxiety and excitement. She realised how direct action would sometimes tip the balance away from anxiety. Her key was to develop the inner skills to actively monitor her embodied state. Knowing and having bodily awareness of the difference between anxiety and excitement made it possible for her to prevent and reduce her stress. This was a clear example of working with a balanced model, as articulated by Davis (2003).

I used body awareness with all co-researchers; this was expressed as awareness of emotions and the expression of feeling as a way of monitoring stress. In this way a new dynamic balance can be set up between the two sides of the brain. The right hemisphere is considered to be the ‘design mind’ or creativity while the left hemisphere is considered to be the language/auditory side (Springer & Deutsch, 1993).
When I think of verbal cognition, I prefer to use a learning concept of disorientation, which I interpret as an inner conflict with the facts and conditions of an external event which can be changed and controlled. I use ‘dissociation’, not from a mental health diagnostic perspective, but rather, as expressed by Gilligan (2002), as an extension of daydreaming, which is represented neurologically as a temporary shutdown of visual or auditory perception, which are behaviours known as receptive listening (Sollier, 2005).

Jas gained insights in our meetings. For example, following a one-to-one meeting when we explored her early life, she experienced an emotional release. She gave a detailed description of this episode, which revealed the power of her awareness and that she could regulate herself to come to a new balance point.

**7.3.2 Life events student role, prior and present learning.**

The role of student for diverse learners may have been difficult, with experiences of pain, humiliation, and/or shame in their prior learning situations. As adults coming to study, they will initially be motivated, and will want to discuss their aspirations and their past successful roles in work, in a learning environment which should support them from their place of strength. They can successfully find ways to work their prior knowledge into the new learning when mutual listening and acceptance lead to empowerment: new ideas and approaches to learning and study become more possible.

**7.3.2.1 Identity and self-esteem.**

As mature-age students, the co-researchers had a wealth of experience which was not shared in their course activities, which became part of the identity issues for two of the co-researchers (Ma, Supa). They both had previous experience in interactive learning and deliberately chose a course that was strongly experiential. Their initial difficulty in becoming part of the group stemmed from their prior group work experience and from feeling alienated because they felt they could not share their skills. One co-researcher became withdrawn and had limited early participation in learning activities in her course. Both attempted to critique the course with me from a training perspective, which may have been a factor in their delayed social integration and their delayed entry into the student role.

Despite putting in many hours of effort (Ma), not completing work led to a sense of failure and affected self-esteem. While Supa recognised only after a subject failure that she was failing in the role of student. She reacted by becoming busy, being elected to the student association and becoming like an unpaid student welfare worker for a year. In this role she
could use her prior learning skills to restore her self-esteem: her way of coping with the disappointment of the subject failure. It was an unproductive move, as she found she spent more and more time doing student welfare work and less time on her studies, which put her further behind.

7.3.2.2 Marginalised individuals become more invisible.

Two co-researchers, one non-Indigenous and the other of mixed race, experienced marginalisation as students on Indigenous courses, where they were the minority group. Both had past trauma and long-term chronic health issues. The interactive nature of the course led to an experience of re-traumatisation. They dealt with this alone, as there was no formal support for students following the emotionally intensive workshops. Both were vulnerable in different ways. The course philosophy of deep listening brought a level of safety when in the groups; however, at times they were left disorientated as an aftermath of the workshops.

Despite a family history of dyslexia, Supa was labelled as having PTSD, so her dyslexia became doubly invisible in the eyes of the student support unit when she sought help from the university counselling service. While she was happy with the outcome, gaining permission to use a computer in an exam, her other deeper needs were not met by her disability status. For example, she needed systematic ongoing intensive help to improve her essay writing, which continued as a constant struggle. She experienced the confusion and humiliation of having many of her essays not assessed, adding to the invisibility. I was unaware of this issue for quite some time. She was asked to resubmit her assignments without receiving feedback or information about why they were not returned. Information from the school in regard to her rights as a student and to the avenues and possibilities of specialised help was not forthcoming.

7.3.2.3 Decreased receptive listening.

A course in an unfamiliar area of study means learning new concepts, values, and the disciplinary language. It is assumed that all students have good auditory processing and therefore can absorb this information through the ears, and quickly make sense of it in order to note-take in lectures. Some co-researchers had a tendency to be passive listeners and my conversations with them did not progress to a two-way dialogue. For some there was little reflection or questioning, while others over-questioned. In my first meeting with a new co-researcher I would communicate information about the way I envisaged the structure of the meetings. I used a simple action research cycle – think, feel, see and do – as a way of understanding our communication patterns (Figure 3.3). Two co-researchers could not easily
interact with this new information. Gst tended to be distractible and over talked on his passion and research; Ph was silent. Ph later described how he managed his lecture note taking using two strategies. He would listen very intently to the flow of the lecturer, and then write down the main gist of the talk. He commented on the time it took to obtain mastery of this process. He took time to work out what I was saying but was unable to put it into his frame of reference in the experiential way as I suggested. There was no such early issue with Supa in relation to receptive listening. We easily related on both the cognitive and emotional levels, and she could discuss and nominate what she needed from me. With the other co-researchers, I had varying degrees of feedback that they had accurately received my verbal communication. However, I did not reach Gst and Jas in a consistent way; my main indicator was their inaction on agreed action.

7.3.2.4 Learning styles.

In AR1 I knew soon after the group started that there were co-researchers in the group who primarily learned from experience (Jas, Gst) and who would possibly have only intermittent receptive listening. In AR3 all the main co-researchers (PH, Supa, Ma, and Gm) had similar dominant kinaesthetic learning styles. A learning model of brain laterality would place a category of learning from experience (kinaesthetic) as a right brain function (Sperry, 1974) rather than as a left auditory language-based function. In an academic setting, auditory language-based study is needed. A cerebral lateralising model such as that of Geschwind and Galaburda (1987) would suggest that to counteract an excessively one-sided brain activity, it may be best to first use the strength mode, the creative ‘design’ brain, and then develop the less dominant auditory.

As Supa and Ma were engaged in experiential courses, this suited their stronger kinaesthetic learning mode. While they struggled at times, their motivation never waned despite the stress they endured. Ph expressed to me using many kinaesthetic expressions yet was mostly engaged in auditory lecture style of learning and reading. He became particularly ‘fired up’ when he had a chance to be ‘hands on’ in a practical course work assignment; he cherished this as “real work” and studied feverishly on an assignment to the point of collapse, feeling he had to get it perfect. I interpreted this action as indicating a lack of self-regulation. While he considered and regretted that he was not creative, to me it indicated that visual was his least preferred mode. When he endured hours of reading, with little result, this would be the time theoretically when his auditory system ceased to efficiently integrate reading material and disorientation followed (Davis, 2003).
Supa on the other hand was a strong visual learner and was enthusiastic to try new ideas. For example, when discussing mind maps she easily understood and recognised the focus and became more disciplined in her way of using this technique, and used her creative art work as a stress release mechanism. She would envisage the success of her studies and her future in a positive way. It was easier for co-researchers with strong visual mode to take on such techniques (Gm, Supa). It took Ph some months before I learned that he had used the mind map ideas introduced to him in our first session. Such differences in learning styles can mean that multiple sensory methods should be used alongside the traditional auditory mode of teaching. A pattern had emerged in relation to how these various learning styles played out with articulate intelligent people who had major chronic health issues.

The co-researchers acknowledged that learning by experience was a type of learning style that needed personal interaction in order to be successful. Some co-researchers described questioning unmercifully when they did not understand something, which is an attribute teachers enjoy as it potentially encourages further learning opportunities. But I learned that for one co-researcher it had become a double-edged sword (Gm). Her manner of questioning was intense and a memory lingered of a school experience of being shamed and expelled from a class for engaging in questioning. As an adult she has not given up on questioning, but is more cautious and can quickly become reactive if the other person does not respond sufficiently. Other co-researchers learned to reduce their questioning: they became aware that excessive questioning can build frustration and be an isolating factor when action does not arise from the discussion.

Ph wanted to learn to improve communication in his relationships, yet his initial questioning with me was toned down to silence, making it difficult to know what he was learning. As he progressed in his studies to the third year, and the role of researcher became realised, he could relate more through asking questions. He struggled to let go the fear of losing the practical side of research for a future in hard scientific research. Gm experienced conflict with different styles of communication from opinion (social science) to fact (science).

7.3.3 The co-researchers experience of teaching and learning.

Isolation and disconnection were felt by most of the co-researchers. Those who had supervisors found their expectations were that lecturers involved in their courses could be responsive to their needs.
7.3.3.1 Teaching support.

Most co-researchers had the experience of being an outsider for many months after entry into their program. For postgraduate external students who are vulnerable, there is a need for contact in the form of a mentor or supervisor. In particular, I found that in any Masters course this is paramount. In Ma’s case, funding was not available for her to have mentoring help in the Indigenous course, and she had to rely on informal contact with staff when she was well enough to go to the university. For any distance or external marginalised students, this can become extremely stressful. Supa found this happened in her final year when she moved away from the area. Although Gm was on site her issue was different; with no supervisor or mentor she was accountable to three lecturers who had differing opinions on how she should proceed. Ma and Gm were doing course work Master’s programs in different schools; both became excessively stressed by their writing issues but did not have the help of an appropriate person.

In the present research, the university culture was a closed system: there was little interest in understanding the transitioning world of the students and how their knowledge could assist and enhance all parties in their study programs. At postgraduate level it is essential to validate prior experience so that student identity can be re-instated quickly: entering as mature-age (over 40) students they are already marginalised, when compared to the undergraduate student population it may be harder to manage. The divide between lecturer motivation as both interested and committed teachers with their students in mind, or as committed researchers, which can distance the student, is a perennial issue as Z described (Section 4.2.1.2.1). For diverse learners who expect to have a commitment by academic staff to student learning and support options this issue can be exacerbated.

Both co-researchers in the Indigenous course had writing issues, as discussed above. The level of expertise required to assist them through their writing issues was not addressed by the school. Although Supa was dyslexic, her official diagnosis was PTSD. Her unit assessors did not grasp the implications of her health and learning issues as evidenced by nine papers that remained unmarked and not returned to Supa during the period of the research. She was informed in 2011 when all these papers were returned and all granted credits. While Ma had an undiagnosed writing issue, her writer’s block was exacerbated by the course she was undertaking and by her chronic health condition.

Gm had issues with academic staff who ignored her requests for feedback on her papers. Her expectation was that there would be a working relationship, as she was known to this person as she was a staff member.
7.3.3.2 Supervisory support.

Postgraduate student supervisors know the territory and have a road map through the maze of postgraduate research. The student’s prior learning can be a source of strength. The student may possess skills and information in areas not known by the supervisor, thus throwing light on possible directions for research projects. At the same time, such discussions of prior learning can signal possible vulnerabilities. Two co-researchers had issues with communication with their supervisors in the course of their candidature, which certainly caused major stress and may have played a part in exacerbating their health issues. For example, one co-researcher in the Health Group developed increasing symptoms, became secretive and played down the disability with the supervisor, with what I perceived as irrational fears related to being prevented from completing by the supervisor. For Gm, one of the three lecturers whom she knew from her work role completely ignored her request for understanding why the work was not acceptable. Both Ma and Supa in the cultural programs had expectations that there would have been ongoing contact initiated by the academic staff or the course coordinator. This did not happen. Ma’s fatigue issue left her feeling embarrassed, and often she felt misunderstood. She did not “pester them”, her assertive self-withdrew, and her fatigue took centre stage.

Most of the co-researchers, had issues with writing, but three co-researchers had explicit issues with the disciplinary specific writing, in particular, the dyslexic co-researchers Gm, Supa and also Ma. Gm had three lecturers at one time telling her to develop three different styles. For example, she would follow slavishly what lecturer A said, only to have lecturer B say it was not good enough and to suggest yet another way to write. Earlier in her course work she struggled to change her style of writing to that which did not give opinion as social science degree writing had taught her. She had to learn to become the ‘invisible’ writer of ‘scientific reports’. This was particularly hard for a person who loved interaction, had excellent negotiation skills in her workplace and prided herself in easily crossing the ‘silos’ in the work context.

Ma’s writing issue was more difficult to trace. She certainly had rejection of her creative writing by an early teacher, which traumatised her. It may have been the lack of guidance and structure in new disciplinary writing with little external support. Her previous experience in essay writing was not discussed. It was more that the workshops and the research topics triggered her emotionally, and she suffered from memory ‘fog’, which made it a constant struggle to compile any order in the literature prior to writing. Having to use an online environment at the start of her study, this competent person quickly became overwhelmed and
anxious about writing: she found it impossible to do any writing within this medium, perceiving it as a source of potential humiliation.

Supa had disciplinary writing issues which became serious when she had to write for an exam without a computer and failed. It was the catalyst to seek help from the Disability Service. Reading the criteria and other instructions for her essay writing were sometimes misconstrued because she was still in the stage of learning the disciplinary language and a system of writing. I was aware of this aspect from my undergraduate days, and took opportunities to have a discussion about the meaning of the criteria, attempting to elicit her understanding of what the lecturers may be wanting. As she still had outstanding papers it was hard as an outsider to judge how the disciplinary criterion was enforced. She continued on without this vital and necessary feedback.

7.3.3.3 Learning support.

For Gm the cliché ‘I’m going to help you’ was very annoying: she found it was often on the lips of support people. Of the six co-researchers, only Supa and Gm had any ongoing university support. Gm was in absolute desperation when she went to learning support with her writing issue. She was fortunate to find an empathetic person who understood well the dyslexic learning style and was willing to ‘bend her time allocation’ to assist her over her ‘substantial’ writing block.

Supa relied on friends to support her essay writing during her first year at university. Although she knew of the mentoring program, which could have enabled her to quickly become familiar with study, she did not think it had relevance to her. When she was getting behind with assignments, and needed time concessions, she sought support. Her experience was mixed. She had sessions with five different people in learning support in the three years, and was given helpful advice and practices to develop. Supa thought the best academic support was from a lecturer with a background in teaching ESL as she felt more understood. This person perceived she needed more than a “catch up formula” for essay writing structures. After moving away for a year and still working on submitting her papers, she returned to the home university and went again to the learning support. This time she was unable to connect with yet another new support person and was not helped. At this time, when she was close to completing her course she was in a state of elevated stress; she experienced two anxiety attacks in one week.

Since second year, Supa had been using the services of the psychologist because of her anxiety. The psychologist decided she should be tested in disability services for dyslexia and
wrote a referral that effectively stopped any further thinking about her having dyslexia. It was not deemed necessary to do the screening test and therefore she did not gain access to full psychological testing for dyslexia.

The student AD, who was to be part of AR1, came only for the initial interview: (Meeting, September 2006) did experience testing for dyslexia after a few years of part-time study. As a low SES student, she found that testing was costly and had a negative health effect. She was sent to another university, and charged $300 to be tested by a student under supervision. She had a severe migraine headache following the testing and believed it was caused by part of the visual perception testing.

An issue of not believing the student’s capabilities as a dyslexic happened when Gm was tested as a teenager at TAFE. She reported being told by the teachers about having “taken myself further than they could” and she received no help. AD was often told by lecturers that she was articulate; she believed that behind this comment was an assumption that; if you are articulate you could not be dyslexic. Consequently she was not offered help for her literacy issues during the early years of her university study.

Ma could not obtain student support as she did not have a known learning difficulty, but rather, had chronic ill health, which affected her organising and writing. The institutional structure did not sufficiently recognise her health/learning link. When Ma entered the university, on her application form she ticked the disability box but had no follow up from the university. When she needed to have parking closer to the library, it took her some time to obtain even that assistance. She felt it was not offered because she did not appear to be physically incapacitated. It seems that “if you don’t know the right language you don’t get anything”. When there are invisible learning and health issues, the person is already isolated. Such narrow options can result in periods of downward spiral, both emotionally and academically. Ma had done her research in regard to available learning support by searching the university website and received the university information disk. She surmised that it was not for her as what was provided was predominantly about study skills such as writing essays and she said that was not her problem.

Ma did not “pester” her school as much as she would have done if her health had been better; Supa made a similar assertion. While normally good at having her needs met, Supa felt blank, unable to think of any way that they could help her after she had been granted the initial help of the use of a computer during her exams. Yet she had an enormous need for ongoing and regular learning support and technical help. Ma on the other hand often felt embarrassed by
her lack of function when the only thing she could do was to wait until her energy levels increased.

Accessibility to the disability services, most importantly for Ma, was determined by the way she experienced her first inquiry. She went to the disability office to inquire about receiving help for her learning issues and was given the option of dyslexia screening; however, she believed that was not her issue and there was no further discussion. Also there is a lack of integration of services. The range of student services did not easily work together; for example, any paper work is kept confidential when seeing a counsellor, and therefore is inaccessible to other services, requiring the information to be provided only by the student or counsellor. While confidentiality is important, a more efficient mechanism for conveying relevant information would contribute to a reduction in stress for the student.

Structures that help diverse learner, such as the schools, the learning support unit and the disability and equity services, have limited communication. For example, even with the best of intentions from the psychologist, disability support and learning support, there was little attempt to coordinate support for a person with dyslexia and PTSD. It is difficult to know if these services assumed that the school was taking care of Ma’s special needs. In her school the message she received was that funding help was available for Indigenous students only. Possibly there could have been funding available from the school’s perspective; it just has to be accessed. How does the student access this help? It was not made clear to her from any of the services. In another example, my interview with AD, a person diagnosed with dyslexia struggled for seven years part-time to complete an undergraduate degree. When I met her she was still highly motivated, was working extraordinarily hard and was two subjects off completion but her health was deteriorating and she was becoming very fatigued. These last subjects she feared most because of the amount of reading needed and felt she would not cope. She could access a note taker for lectures, but different people assisted her and some she found difficult to work with. AD believed she needed to have consistency in note takers. I have been unable to contact her since, and she possibly did not complete her degree (Private communication October 2008).

7.3.4 The Action Learning Experience.

7.3.4.1 Co-researchers.

Initially I was disappointed in the action learning experience, as the co-researchers’ learning outcomes were not as I had expected. The shift to a self-study approach meant the dynamic of the research swung more to include my learning development and action learning and my
perception was the co-researchers’ learning outcomes became more internal and individual, rather than focused on the external structural and environmental change.

Some of their learning strategies were convoluted, and made information processing slow. These inefficient ways of learning were most likely a compensatory strategy to deal with early learning issues. Gm came very close to what she called dissociation and experienced losing all sense of how to write when the academic feedback was the source of great conflict. Ma was limited by how much writing she could do because she often had a “perpetual [brain] fog”.

Ph did not talk much about writing, other than to say that in his three years of undergraduate studies he never shared any writing with anyone in his cohort. For him it took so much time to draft and redraft that he did not want to risk losing more time by giving his work to anyone else others than the supervisors. After I strongly challenged him for his lack of active communication and feedback I was surprised by the depth of his inner reflections that he emailed to me. It seemed to by a turning point to enable him to reach out by email for example to question his lecturers appropriately. Gst wrote creatively within the Health Group structure; early learning stories and his history of his experience of health and stress.

Gm found an openness to explore how the integration of visual/auditory issues can affect both writing and personal listening issues. She gained listening awareness, confidence and the ability to focus, a direct result of exploring her auditory processing issues through practical action learning. She had previously no understanding that reading and comprehension issues related to auditory processing and influenced learning. She learned through experiencing an auditory processing demonstration program, *Brain Fitness* (Posit Science, 2012), which enabled her to become an active inquirer into her reading and listening habits. For example, when she read aloud in a meeting, she caught herself missing words and this led to her understanding her listening issues. Previously she thought of her listening issues as “I knew I kind of misheard people or maybe I’m a bit deaf” (Section 4.5.2.2.1).

She also gained understanding of why she used to stare at people as a way of concentrating to listen. This is like when someone says “I listen better with my glasses on”. Gm called this her vigilant look. This was a clear indicator that the visual mode was her leading mode over the auditory, which is expected with dyslexia (Reid & Peer, 2002). By the end of the research she had acknowledged and accepted the auditory processing issues and was beginning to confront the feelings associated with it.
Jas learned about the health/learning link. In particular she learnt how sensory issues from childhood may contribute to her chronic ill health. She improved her awareness and understanding of affect regulation, audio laterality, the value of using mind mapping in the workplace, and reflection. She began to recognise and accepted her cognitive limitations and could then move to intuitively solving issues.

Gst shared his creative writing on prior learning and perceptions of health. He helped my understanding of how writing on such issues can benefit students, particularly when their vulnerability is high.

Ph enhanced his learning by developing auditory processing awareness, the value of communication as a sustainable two-way dynamic process involving feeling and reflection. He learned that excessive study behaviours could become a form of dis-regulation unless he intervened more effectively in his own process even study was perceived as enjoyable. He expressed a felt shift in perception and came to an understanding of having an internal locus of control.

The Health Group gained an increased understanding and awareness of diversity, inclusivity and social cohesion.

Ma learned from my support and from using conversation as a sounding board to develop experiences of action research. She could more easily compare her prior experiences to her present experience which helped her work with her issues of self-esteem, identity, her ongoing chronic health and writing issues. Her trust increased and she took actions to ensure that she completed her course.

Supa’s honesty and flexibility allowed her to take the risk of sharing the depth of her learning issues with writing and her ongoing health concerns. Above all, it was her willingness to ‘have a go’ at any action plan we devised together. She also took action that enabled her to complete her course.

Both Supa and Ma completed their programs of study despite the health and learning issues that troubled them. This determination to succeed is reflected in research by Drury, Francis, and Chapman (2008b), who argued that, while mature-age students can face enormous challenges when undertaking tertiary studies, they demonstrate high levels of tenacity in managing these challenges and continuing with their studies.
7.3.4.2 Facilitator/researcher.

I created a learning environment that acknowledged the co-researcher as a whole person. This encompassed their emotional as well as physical well-being. Co-researchers’ views were respected and feeling states embraced. I provided an alternative knowledge structure on auditory processing, self-regulation and dyslexia. I came from an ability stance rather than from a deficit model of disability. Above all, I listened to the co-researchers and attempted to present options which we could act on together as action learning strategies.

With all co-researchers I used the action research cycle model by Kolb as the structure to begin the communication process of listening to self and body. To introduce the research context prior to the first meeting with co-researchers I sent the two checklists: Auditory processing/Listening and Characteristics of dyslexia. My intention was twofold. I wanted to explore dyslexia and listening issues and to be up front concerning my valuing a holistic view of listening; as both body and mind.

The AR cycle of think, feel, see, do was also useful to introduce the notion of a balance model of bodymind learning. I set about communicating and demonstrating these aspects, and exploring those aspects being underused by co-researchers. With one co-researcher (Ph), I was initially reluctant to use the feeling state, either directly or by inference. The Kolb learning cycle established the structure and identified concepts for the meetings, and was also useful to develop trusting relationships in both group and one-on-one meetings.

From the feedback of AR1 and the discussions with my supervisors, I began to understand that the label dyslexia had an invisible quality, which may have been the reason why the uptake by co-researchers was low. I had intended to use a participatory AR in groups but needed to change the methodology. I also moved my focus from dyslexia to diverse learning in order to broaden my conceptual framework by exploring the notions of equity, inclusion and diversity. AR2 became the transition cycle, as I changed to focusing more on how I was working. This had become self-study AR, rather than just the focus exclusively on the co-researchers. It became a time of trying out reflective methods using writing, metaphor and imagery as action learning strategies. The co-researchers in the AR2 cycle were in a relationship; one was dyslexic. One was engaged and willing to work while the other I felt lacked engagement and had some resistance to working with her learning issues. I had little reflective feedback and agreed activities were not always forthcoming. It felt like an awkward triangle. We met four times and then the cycle was abandoned.
Reflective writing was used in AR3 as my action learning on how childhood learning stories reflected in adulthood and their consequence for diverse learners. I learned how diverse learners used a variety of compensatory strategies and habits to move beyond their earlier learning issues. Jas experienced a childhood as an isolated country child, became an avid reader and later a competent writer despite having present-day sensory/somatic issues such as allergies, pain, fatigue and memory. I used reflective listening skills with co-researchers, as their learning strategies were often hard to grasp and work with.

My first use of I-poems was to explore the ‘invisible’ level of communication, the space between the researcher and the interviewer (Gilligan, et al., 2006). I used my own writing to make an I-poem and had two critical friends reflect back using the questions I had devised (Section 7.6.3). Their interpretation of the I-poem reflected surprising accuracy on my feeling state and accurately read my perceptions. This feedback encouraged me to start a second stage of reflexivity. I decided to find opportunities with my co-researchers to use I-poems and interpretations as part of the data (Section 7.6.3).

Gm was the first co-researcher to use I-poems. I asked her to write early learning stories and her story of the struggle with the academic staff. This writing was done in two stages. The first stage was prose, which I sent back in the form of an I-poem. When she sent the second stage prose, she had adopted the idea and it was in the form of an I-poem. The following meeting she read the second stage I-poem aloud and had enormous satisfaction with this process. It restored her mental balance and affects regulation; it also brought her to a more focused position to be able to continue with her writing.

The Health Group of AR3 were interested in exploring the health/learning link. I believed this would achieve an improvement in the relational aspects of the group. These co-researchers were sent a series of prompts to write on early childhood memories and health (Appendix 7). Both Gst and La completed the task and answered all questions, while Mt and Ma chose to provide a just a few powerful lines of prose. The sharing of their chosen prose in the group was a time of connectedness that had not been present prior to that exercise.

The prose that Gst wrote during the Health Group was clear articulate writing and showed me a stark contrast to my first encounters with him in the AR1 group, when sometimes his mumble, jumble interactions could send me into a reactive confusion. Having heard his early learning stories, I understood his need to make his learning active by seeking interaction with teachers. Not liking reading happened early and continued up into higher education; however,
by then he was competent in writing. But his visual processing issues continued and somatised into constant headaches and chronic fatigue.

7.3.4.2.2 Auditory processing strategies.

a) Reading aloud

Reading aloud was a very successful strategy for most of the co-researchers, including the Health Group. Only Jas and Ma did not do this exercise. Different opportunities presented, but the overall intention was to attend to self-listening to help focus internally and thus help the integration of the whole person. This shift from outside listening to an inside locus of control is fundamentally important for developing voice/ear/brain regulation and resilience; that is, the linking of inner and outer through support programs which value well-being and which listen to students to gain understanding for both teacher and student (Chanock, 2007).

To those co-researchers who did an action learning process of reading aloud (Ph, Gm, Supa), I showed a picture of the research results of brain scans which demonstrated that for people with dyslexia the left brain, where the Broca language area is, is less stimulated when reading (Marshall, 2003). Reading aloud produces sound stimulation to the Broca area and potentially can improve comprehension. A noticeable result happened when Supa read aloud: her focus was easier as she had gained some control over her listening. For the first time she started to edit her own writing as she read aloud the paper that she was working on. For Gm the reading aloud of her written prose about the process of the conflict with her lecturers also had an effect. It gave her a new perspective and increased her confidence to continue with less emotional overlay. For the Health Group, reading aloud was a contrapuntal turning point, when co-researchers each read aloud their chosen prose and received reflective feedback from the other members of the group.

With that success I introduced reading aloud further in the group to explore awareness of disability, diversity and inclusion. We then discussed notions of disability and how co-researchers managed their own disability.

Ph read aloud his son’s written story. This clearly revealed a compulsive side to his (Ph’s) reading habit: premeditated analysis of what is being said, without listening. On another occasion he read aloud from one of his text books, where he was familiar with the concepts. I wanted to see if he lost comprehension and was confused, as when he had read aloud earlier. This time the exercise brought a new confidence to his understanding of auditory processing. He had been unclear about this previously. He went on to give me a confident, free flowing
conceptual understanding of the wider concepts involved in the material he had read. He seemed animated and empowered.

Can the integration of the visual/auditory processes be helped by reading aloud to focus self-listening? Supa’s need as a dyslexic was more than just reading aloud, as she was in difficulties with her writing and reading for comprehension. Yet with greater input of sound energy going to the language side of the brain via the right ear circuits, her improved comprehension was possible using the theories of right ear advantage (REA) (Hugdahl, et al., 1998) or the concept of the right ear as the leading ear for language (De Jean, 2008). The difference was in her animation and that she started to self-correct what she was reading—her own writing. She continued to use this method in the following years and often remarked what a help it had been.

b) Technology programs

Following using the Brain Fitness program, Gm developed listening awareness. At home she began to listen to the vowels and slighter sounds, and shared with me how she had got ‘fish’ and ‘dead’ mixed up. She perceived the connection between the visual and auditory modes and why as a child she was constantly vigilant (Section 4.5.2). She then progressed to thinking more about what she called a “verbal faux pas”, when she misperceived certain verbs. Ph used another technological program to bring awareness of the power of auditory processing. The intention and the result of the exercise were different. He gained information about ear laterality when he placed the headsets on the wrong side and became confused by the sound input. This tested his problem-solving ability, as he could work it out and correct the situation. We had a productive discussion on ear laterality and its link to stress. As aids to develop perception I introduced the idea of mind maps, music, and Dragon Speak to co-researchers.

c) Managing learning styles

I used a sensory learning style model of visual, kinaesthetic and auditory senses to identify the individual learning style. Each mode suggests different actions may be required for each co-researcher. This approach enabled co-researchers to identify their own learning style and to make any necessary adjustments to enhance their predominant style, leading to flexibility in communication and learning. Further, this approach assisted social communication by building rapport.
7.3.4.2.3 Insights into student vulnerability.

The majority of the co-researchers were mature-age women: one was a staff member, one an undergraduate student, and most were undertaking a postgraduate degree. However, many of the concerns raised by mature-age women in the postgraduate program reflect the findings of the research by Drury, et al. (2008b). Their constructivist grounded theory research was conducted with mature-age women undergraduate nursing students in two rural universities in Australia. The research found that mature-age nursing students experienced difficulties with the student role, with finding suitable mentors, and with feeling emotionally threatened because of poor grades and loss of confidence. The establishment of informal peer support was considered to be a significant factor in their remaining in the program. Therefore, it could be considered that being mature-age women in tertiary education, experiencing health and learning concerns within an environment that is unsupportive of diverse learners, creates a high risk for vulnerability to further negative effects on health and learning. One postgraduate co-researcher undertaking a course in the flexible learning mode experienced difficulties with technology and lack of academic support that decreased her confidence and increased her vulnerability. Research by Lynch and Dembo (2004) found that success in this mode was dependent on several self-regulating skills, such as competence in using the technology, confidence in the ability to carry out learning tasks, and having well-structured and planned time management, a high level of help-seeking behaviour and a supportive study environment. Lack of or a decreased ability to use some of these self-regulating skills was experienced by co-researchers in this research project, placing them in a high risk category for lack of success in this mode of learning.

The diverse learners in this study all had hidden difficult vulnerabilities regulating their stress levels. The factors causing this situation varied; for example, three co-researchers had previous traumas, three others had chronic health issues and two had known unresolved learning – dyslexia. With the exception of two co-researchers, the rest had overlapping factors, which were important not to ignore because this meant a greater compromised self-regulation and added stress.

The factors which helped to improve the self-regulatory ability of co-researchers were making the connection to the bodymind by improving communication and connectedness. Affect regulation was enhanced by developing reflective practices and acknowledging feelings; auditory processing was enhanced by directly working with techniques. Recognising strengths from prior learning improved self and affect regulation and led to small moments of empowerment experienced by co-researchers. For example, Supa commented: “How you
questioned me in the reflection that [was] the power. I remember to do that for others. You’ve embodied it”. Both Supa and Ma took actions that enabled them to complete their course of study.

When I told Gm my “Honours year fail” story she acknowledged a similar process and could relate to my story. This coming to common ground was a moment of empowerment as she understood that the ‘blanking’ feeling of disorientation could happen to others. I had normalised an experience, perhaps un-expressed before, and we could build our knowledge of ‘perceptual confusion’, away from the deficit medical model.

These factors are represented diagrammatically in Figure 7.2.

![Figure 7.2 Factors leading to vulnerability and moments of empowerment.](image)

a) Inclusive practice, diverse learners and disability.

My experience of higher education confirmed for me that those with a disability are treated as separate or different from the main student body. Of major importance in relation to attitude about disability, particularly invisible disabilities, is the acknowledgement and support of those differences in appropriate ways, such as the implementation of inclusive practices. These can result in more successful outcomes for the students and would ultimately benefit the institution.

I used the term diverse learners to bridge the gap between institutional guidelines on disability and the practical understanding of the disability and what type of help can assist. The higher education experience for the co-researchers was not a proactive process. It was left to the
individual to be aware of the opportunities available, such as information gathered by talking with others and through the student associations. By word of mouth I found I could be eligible for a disabled sticker because of a foot problem for parking near the hill top library. I required a letter from my doctor. The question I asked myself was; am I really disabled or differently abled? When students are vulnerable it can be difficult to know even what to ask.

Another excluding practice in this institution is a mentoring program available for undergraduates but not for mature-age students. I was told ‘they are too far from the experience of first year study’. While there was no mentoring program for postgraduates, introductory courses for researchers were held regularly where the postgraduate association representative would speak on equity and diversity issues.

All my co-researchers had, at some time, unmet needs for basic information regarding equity issues. For example, Ma delayed asking for assistance with learning because her chronic health issue left her unable to assert her needs within her own school.

The federal government initiative and the current policy of inclusion linked to direct funding will expand in an exponential way to target specific equity groups. Therefore, it could be expected that there will be a substantial increase in the number of students needing to receive extra help. However, it means those categorised as minorities – the Elusive Others: dyslexia, diverse learners, and mature-age learners – could continue to be invisible.

A solution to this issue suggested by Willems (2010) argued for a simpler model to classify disadvantaged students in tertiary education with what she called an Equity Raw Score Matrix which was proposed:

as a multi-dimensional indicator to identify potential disadvantage, created for the specific purposes of diagnosing the complexities of disadvantage and for the creation of pre-emptive strategies for the participation, transition and retention of affected students in education (p. 1).

The matrix is composed of equity groups: students who are Indigenous, non-English speaking backgrounds; disabled, isolated and rurally situated; or those who have a low socio-economic status. These equity groups are then matched and given a score against equity subgroups and includes the characteristics identified in the co-researchers in the present research, such as: chronic illness, social isolation, anxiety/low self-esteem, learning difficulties, reduced language proficiency, low technology skills and mature-age. I agree with Willems (2010), who argues that, without consideration of the complexity of classifying equity groups, the Australian government’s equity targets for higher education may fail.
b) A higher education vulnerability spectrum (HEVS)

The themes that emerged from the data led me to a concept of a higher education vulnerability spectrum (HEVS). This potential tool could be used as a way of improving communication across the student services and of starting a process of understanding the needs of diverse learners. I suggest the vulnerability of the co-researchers is related to the common themes of students’ experiences: the entry process of the student, prior learning, identity, health and well-being status, and the teaching and learning experience. These are all factors that students experience in higher education, could be points of vulnerability which would depend also on other external individual circumstances.

The greatest impact that was revealed by the research was how the co-researchers did not connect their vulnerability to the issues of prior learning, health and well-being. A level of ‘invisible’ or tacit learning would exist in all students; however, I believe mature-age students (over 40) are more likely to have a higher propensity to recognise emerging health issues than school leavers.

Figure 7.3 summarises the notions of vulnerability protective factors and vulnerability enhancing factors. For example, one co-researcher of mature-age left school early, was a practical person with a high level of problem solving ability, had a sense of self-worth and was physically fit. At the beginning of our meetings he would have started just below 5 on a vulnerability spectrum (0–10). With additional institutional factors, for example, a teacher with a teaching style that favoured ‘independent learning’ delivered in a non-contact structure, could lead to the student becoming isolated and stressed. Over time, such a student may move higher on the HEVS.

The experience of Ma as a mature-age student is an example of someone with well-developed informal learning strategies that was hampered through her re-traumatising experience and resultant health issues. This meant her prior learning, and self-confidence could not be sufficiently accessed. Informal learning has gained status and recognition by the OECD (2010), which defined it as having upcoming importance and value in international cooperation and lifelong learning. The concept of informal learning was initiated John Dewey (as cited in Knowles, 1990), and later by Knowles (1990). Whilst it is difficult to quantify informal learning, it is now considered to be critical in enhancing social and cognitive development (OECD, 2010). Younger students may have less experience of informal learning and it may become necessary for teaching and learning in HE to provide opportunities to activate self-directed learning to prevent early leaving. For example, mature-age students (over 25 years old) “reported more positive attitudes and experiences than school-leavers.
School-leavers appeared to be a problematic group” (Krause, et al., 2005, p. 2) and are the students likely to withdraw from their course and succumb to negative behaviours or exacerbate earlier health issues.

Figure 7.3 A higher education vulnerability spectrum (HEVS).

Gst had two undergraduate degrees, no formal evidence of learning issues, and was registered as having a chronic health issue. From his prior learning profile, visual stress was recognised and represented as one factor in a larger sensory learning issue. Through his life experience of creative problem solving, he knew he learnt best from a one-on-one interactive learning method which he had worked out for himself, thus indicating the importance of valuing informal learning. Channelling diverse learners down the same pathway will disadvantage significant numbers, and individual learning styles will continue to be unrecognised. Despite knowing his most favoured learning style and ongoing chronic health, he remains vulnerable. I would consider him to be high on the HEVS and similarly Ma, Supa and from the Health Group, La and Mt.

Other factors affecting students in university involve, for example, struggles with finances, or mental health issues, which can impinge upon study at any time. These could also be incorporated into this HEVS. However, when preventative strategies become part of the HE
culture, this could lessen further vulnerability. It is these unforseen, invisible factors as well as the informal learning issues that can be the deciding factors.

Students need space to make their issues visible and to consciously engage with other students in learning processes which invite and facilitates diversity. Student-centred learning needs to be imbedded in a habitus that encourages understanding and that enables actions related to the value of difference, inclusivity and prior learning experiences.

ESL and Indigenous students, like other groupings, have learning issues. Cohen-Machikawa (2007) found that there is very little knowledge base which combines English as a second language (ESL) with learning disability/difficulties (LD) in the International school (IS) settings. On the other hand, Indigenous students in Australia have access to funding and scholarships in recognition of their invisible learning issues. Neither Supa nor Ma could access funding for learning support through their school, despite their being in an Indigenous course with comparable invisible learning issues. Supa at times felt she was marginalised somewhere between Indigenous and non-Indigenous because of her Eurasian ethnicity.

It is incumbent on the Higher Education institutions and their schools to have knowledge and structures in place, together with some form of assessment that takes into account prior learning vulnerability. For example, I have outlined a possible Likert scale tool (Trochim, 2006) that could form the HEVS. This could be further refined to include acculturative stress, which would be more inclusive of Indigenous, ESL and diverse students (Nho, 1999). In a similar way the Equity Raw Score Matrix (Willem, 2010), could be adapted to provide a vulnerability score. The use of such instruments in teaching and learning could initiate a conversation on diversity and vulnerability and could potentially be used to work towards a further preventative program for those who appear high on the spectrum. The students could come together with others and be in a position to implement self-maintenance stress reducing strategies. They would thus thrive rather than become non-coping students as their vulnerabilities unravel in their learning process.

When non-coping students spend time and energy negotiating access to services, they have to deal with their own internalised constructions of disability. For some co-researchers, their learning issues were perceived as a weakness and so they avoided talking about them. To assist such a change in self-perception requires the whole university culture to embrace a positive attitude to diverse learners that is inclusive and visible.
The commonalities and differences experienced by co-researchers as the elusive ‘others’ are summarised below in Table 7.1.
Table 7.1 Theme grid: Commonalities and differences of the co-researchers.

<table>
<thead>
<tr>
<th>Chapter:</th>
<th>Chapter 4</th>
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<td>Co-researcher/s:</td>
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<td>Ph</td>
<td>Health Group</td>
<td>Ma</td>
<td>Supa</td>
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### 7.3.1 WHAT THE CO-RESEARCHERS BROUGHT TO HIGHER EDUCATION

#### 7.3.1.1 Health and wellbeing

<table>
<thead>
<tr>
<th>Confusion; Disorientation; Dissociation</th>
<th>Chapter 4</th>
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<tr>
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<th>Time boundaries</th>
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<th>Self-regulation; Affect regulation; Dis-regulation</th>
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<tr>
<td>Self-regulation (laterality); Affect dis-regulation</td>
<td>Self-regulation; Dis-regulation</td>
<td>Self-regulation; Dis-regulation</td>
<td>Self-regulation; Dis-regulation</td>
<td>Stress and chronic ill-health; Re-traumatisation; Decreased memory</td>
<td>Self-regulation; Affect dis-regulation; PTSD Re-traumatisation;</td>
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#### 7.3.1.2 Life events, prior learning and learning style

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<th>Identity and self-esteem</th>
<th>Chapter 4</th>
<th>Chapter 5</th>
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<tr>
<td>Identity: stories of humiliation during schooling</td>
<td>Self-doubt, negative thoughts</td>
<td>Identity; stories of difference during schooling</td>
<td>Identity as diverse learners with health issues</td>
<td>Identity; Self-esteem issues affected self-doubt.</td>
<td>Identity; Self-esteem affected by trauma</td>
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<th>Invisible; Marginalised (IM)</th>
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<td>A story of isolation during schooling. IM</td>
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<td>Decrease in auditory regulation</td>
<td>Decrease in auditory regulation</td>
<td>Decrease in auditory regulation</td>
<td>Decrease in auditory regulation</td>
<td>Writing block</td>
<td>Learning difficulties</td>
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<td>Learning style (LS)</td>
<td>VKA; Dyslexic</td>
<td>KAV</td>
<td>KVA &amp; KAV; Visual stress</td>
<td>KAV,KVA</td>
<td>Kinaesthetic</td>
<td>VKA; Dyslexia</td>
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7.3.2 WHAT THE CO-RESEARCHERS EXPERIENCED IN HIGHER EDUCATION

7.3.2.1 Teaching and learning experiences

<table>
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<tr>
<th>Teaching/ learning support unit</th>
<th>Chapter 4</th>
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<td>Supervisory support</td>
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<td>Support from lecturing staff</td>
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<tr>
<td>Learning support from Disability Services</td>
<td>Registered early with Disability Services—received time concessions</td>
<td>Registered early with Disability Services—all somewhat dissatisfied with support</td>
<td>Registered early with Disability Services—was denied appropriate support</td>
<td>Registered late with Disability Services—learning support was inadequate</td>
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### 7.3.2.2 Health and wellbeing

| Confusion; Disorientation; Dissociation | Disorientation; Dissociation | Disorientation; Dissociation | Confusion; Disorientation | Confusion; Disorientation | Disorientation |

### 7.3.3 THE ACTION LEARNING EXPERIENCE

#### 7.3.3.1 The co-researchers

| Action Learning Activities | Creative writing | Reflective conversations | Initial conversations with little evidence of receptive listening. | Action learning support process, reflective conversation and writing, technology exercise and receptive listening activities | Early learning stories and group discussion to improve understanding of disability, and the health learning link | “An exploration, explanation, clarification and a review for you. This is a generative and a creative process” (Ma 2009). | Hand-held microphone, Kinaesthetic awareness techniques, I poems, reflective conversations, Imagery/ emotional work |

- **Action Learning Activities:**
  - Creative writing
  - Reading aloud
  - Receptive listening
  - Reflective conversations
  - Initial conversations with little evidence of receptive listening.
  - Action learning support process, reflective conversation and writing, technology exercise and receptive listening activities
  - Early learning stories and group discussion to improve understanding of disability, and the health learning link
  - “An exploration, explanation, clarification and a review for you. This is a generative and a creative process” (Ma 2009).
  - Hand-held microphone, Kinaesthetic awareness techniques, I poems, reflective conversations, Imagery/ emotional work
### 7.3.3.2 The facilitator/researcher

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<th>Co-researcher/s:</th>
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#### Writing prose
I used my own written prose and I-poems to enhance my understanding of the methodology, in particular the Gilligan concepts, and to start the process of using critical friends for reflective feedback.

#### Auditory processing
The centrality of listening from a position of empathy was an active process of exploration and I was challenged when I could not reach the co-researchers either through affect or conceptual communication. For example I found my tolerance to an empty silence challenging – I reacted by over-talking, which created more distance rather than less.

#### Managing learning styles: dyslexia
I used a sensory learning style model of visual, kinaesthetic and auditory to highlight the need to have flexibility in communication and teaching. Each mode suggests different action may be needed and helped me understand the individual experience.

#### Vulnerability
Ongoing self-esteem issues from childhood suggest diverse learners may have a vulnerability to later health issues. Attitudes and beliefs play a crucial role, rather than the level of learning difficulty. Both Supa and Gm had mainly unwavering beliefs about their capabilities, yet when their self-regulation was not optimal both had close encounters with mental health issues. Recent trauma and re-traumatisation and increased vulnerability were evident.

Note V=visual, K=kinaesthetic and A= auditory. The order in which this is represented in Table 7.1 in the category learning styles signifies the sequence of the individual co-researcher’s preferred learning style and is dependent on the learning context.
7.4 The Self and Research Reflexivity in SSAR

The following section explores the self-study aspect of the research, with a focus on the relationship between reflection, self, and research reflexivity. The discussion provides examples of tangible and intangible self-reflexivity that I used when I was at an unclear stage of the research, in order to refine my understanding and skill in the implementation of the activities in the SSAR.

7.4.1. The importance of self-reflexivity.

Alvesson, & Skoldberg (2000) have argued that to do critical theory well, the research process must include a level of self-reflection, which can happen at different points in the process. Similarly, Lipp (2007) believes that reflexivity is a deeper process than simple reflection, and that it needs to be equally valued in both research and professional development. She describes a number of different models to demonstrate the way cycles of interaction can exist on a number of levels. However, the main reflective model Lipp proposed was from Taylor (2006), as it took account of the concern that critical theorist Habermas (1972) had for the formation of knowledge into three modes: technical, practical and emancipatory. Lipp (2007) used this model to develop a framework of questions to encourage researcher reflection.

The ways that knowledge is actioned depend on the type of knowledge production. There are a variety of interpretations of reflexivity as Alvesson, & Skoldberg (2000) point out. I looked at three interpretations: the micro level, which represents the dynamic flow of self, the meso level, which represents the social/organisational, and the macro level, which is representative of the societal level.

The figure 7.4 below diagrammatically represents these concepts.
On the micro level, the individual level is the notion of self-reflexivity, my starting point to understanding new research concepts, in particular reflexivity; this is discussed in detail in the next section. Lipp (2007) cites research for three different reflexive typologies on the micro level: Freshwater and Rolfe’s (2001) “a deeper level of reflection”, Davis and Klaes’(2003) “immanent – confined to individual”, and Finlay and Gough’s (2003), “a self-critique and personal quest”.

My first example of a “deeper level of reflection” came through reflective conversations with critical friends, supervision meetings, postgraduate seminars, networking conferences and individual meetings with scholars. The “immanent – confined to individual” reflexivity was the objectives of my research and the knowledge I brought to the research from practice. For example, one of my objectives was to change the attitudes about dyslexia and reinscribe it as ability. However, I found that co-researchers with dyslexia were ‘invisible’ and to obtain help they had to come forward, firstly in an assessment process, and secondly through a label of disability. From my deeper self-reflections following an equity conference, new
understanding of the marginalised groups in higher education, along with feedback from the first AR group led to generalising the research target group to diverse learners. The construct of diverse learner had less emotional connotations and brought forward more people willing to discuss issues of stress, health, identity and learning style.

The second layer of reflexivity, on the Meso level the social/organisational. Davis and Klaes (2003) perceive as a specific situation where the input from other levels is reflected back to the researchers’ self-reflexivity (cited in Lipp, 2007). My example of this meso level was the Health Group meetings; when the co-researchers read their written prose they was the opportunity to reflexively use the themes of stress, health and learning to further develop my understanding of the diverse learners’ points of view. Sharing the prose in the group became a narrative of self-reflexivity. I became aware of my self-reflexive research activities as they each told their own story. The research at that point became “… as constituted by processes of social reflexivity and then of self-reflexivity as social process” (Steier, 1991, p. 3).

Finlay and Gough’s (2003) interpretation of self-reflexivity is described as a “self-critique and personal quest” (cited in Lipp, 2007). Commonly this type of research process may be thought of as simple self-reflection without action and outcomes. Then the emphasis would be on critique: the ensuing process can be developed sufficiently through an iterative process of self-reflexivity, of ‘bending back on itself’. This generates knowledge and is developmental for those involved.

Further, Finlay and Gough (2003) discussed different pathways that researchers could take to develop reflexivity: that is, “reflexivity as introspection”, by gathering meaning from the research. Most research would have this element within it (cited in Lipp, 2007, p.19). The second “inter-subjective reflexivity” has the potential to examine the structure of the relationships that both parties bring to the research, while a “mutual collaborative reflexivity” is where the role of participants changes to become that of co-researchers. This change means access to multiple and conflicting perspectives (cited in Lipp, 2007, p. 19).

This three level typology – macro, meso and self – is similar to what Alvesson, & Skoldberg (2000) depict as four levels of reflexive interpretation, where initially the meaning attributed to data is at a low or basic level. Gradually meanings are shaped by the researcher’s own constructions, with the next level being critical interpretation, finding meaning in social and political relationships. The last level of meaning is that found within voice and language.

In the research project I aspired to achieve a mutual collaborative reflexivity. While I cannot claim this was achieved across all co-researchers, there were moments when this was
achieved. For example, with two co-researchers we shared mutual early learning experiences and developed new understanding from the experience of group dynamics and cultural safety. While I tell the research stories through the co-researchers, by using the notion that self-reflexivity is a social process, my interactions can take on a sense of equality in the construction of knowledge and can gather a sense of my own self-reflexivity as a continual cycle of learning.

Taking reflexivity as a social critique refers to the imbalance of power and what the effects are on the researcher/co-researcher or researcher/organisation or researcher to the larger society. The strength of this approach is “the recognition of multiple, shifting researcher participant positions” (Finlay, 2002, p. 222). My example is when I challenged notions of dyslexia which, because of non-acknowledgement and invisibility, were not considered by equity services until they self-referred and went through a process of declaring themselves disabled in order access help. I wanted to empower myself and the co-researchers. I was seeking to develop a habitus of trust and cooperation where sharing, learning and moments of empowerment were possible.

I began the research wanting both the micro and meso level of emancipatory action to take place; I thought in terms of big outcomes. I have however learned that such reflexivity processes are incremental and come down to moments in time. To track these consistently is difficult, sometimes impossible, because of the dynamic nature of relationships. I knew from practice with children who have learning differences, particularly dyslexia, that despite good parenting and schooling there are issues of disconnection, shame, and low self-esteem. I had assumed this could be the same for adults who reached higher education and who had experienced the same background learning issues. I hoped to reach a point of awareness where co-researchers and I could come to mutual ease and add clarity to the processes of learning and health issues.

My major challenge to reflexivity was on the institutional level of being an outsider and finding the usual pathways I pursue in the community unavailable to me, of networking and casual discussion on a social level. Whilst I knew who the main stakeholders were, because I could not always have clear formulated questions, I could not take full advantage of the opportunities as they eventually became available to me. Only towards the end of the research did I feel more able and confident to take up a more proactive stance. The next section explores self-reflectivity in terms of the professional self and the self as researcher.
7.4.2 The development of the professional Self.

7.4.2.1 Using a critical reflective praxis approach in practice.

Contemporary practice offers opportunities for practitioners to motivate, to explore new options and to pursue new actions in new places with different people. I was keen to explore how I could utilise my practice learning in the HE environment. I chose to modify my emphasis on individual work practices, the focus of AR1 and 2, and focus the research on the social/educational environment. Co-researchers were seeking to understand their own learning, valued support in their learning, and had a willingness to change, which was not always been my experience of parents in private practice.

It is challenging, as although I am working with the perception of listening, parents often are in extreme stress when they come to my practice and this adds to the underlying dissonance with their child. Having the mother involved, listening to the same program as the child, gives me opportunity to work subtly with the parent. Experience has shown me that a high stress level can mean a (sometimes temporary) poor listener, which is the very reason the child requires help. Despite what I say, often parents do not hear that my work is a dynamic internal connecting of the ear and voice to the brain and it is not a ‘quick fix’, yet parents still harbour the desire for a ‘quick fix’. It is only when changes start to be noticed that parental attitudes change. In some cases the shift comes as the parent starts to sense things are changing inside the child but it’s not yet obvious to the outside world. One parent recently said on her third day with me in an intensive program, “I am hoping to wake up one morning and find that he’s talking normally” (RS, personal communication, 2009). The same parent at the end of the time wanted to continue immediately as she was “excited by the possibilities from the changes I’ve seen this week.” and went on to clearly list the changes (RS, personal communication, 2009). The mother was now ready to listen to herself and learn, making it then possible to believe that child could reach his potential.

The development of more critical reflective processes within my practice environment overflowed into the research, as I linked to it as praxis. In any practice discipline it will be possible to find issues and challenges needing to be worked through and confronted. For example, in my professional practice with parent and child, my aim in the first clinical program is to create an environment where the child and parent can maximise their ability to self-regulate. So my practice principle is initially non-interventionist, that is, I will only intervene when I hear or see evidence from the child that they are under pressure from the parent. An example from my practice was when a parent was talking in long sentences at a
three-year old child. The particular child was diagnosed with multiple sensory delays – his perceptions were in a state of confusion. The communication pressure this child endured was counterproductive. I initiated reflective comments and processes with her by introducing the tape recorder into our interviews. Sometimes these pressures originating from parents are un-integrated behavioural rules arising from advice from another practitioners’ frame of reference. In the above example, I attempted to espouse my values in relation to their concerns and to clarify my underpinning theoretical stance about the particular behaviour or an aspect the mother has concern about. I have a logic that I am acting on; the child has a reason for this behaviour, and I am reframing this away from “he’s being naughty and destructive”. This change in my way of communicating can be summed up as a reframing of the language of the situation to help broaden understanding. Kemmis & McTaggart (1988) agree that it is as important to listen to the language used as to the specifics of the action taken. Practice becomes praxis when there is a two-way iterative process between the practitioner researcher roles, with many dimensions. One researcher likened praxis to a picture which can show possible nuances; for example, shadows, individuality, dynamics, shades, illumination, ripples, patterns, complexities, and margins (Horsfall, 2005). While some areas of praxis were restricted to a time and place, they continued throughout the AR process. In my case the overall gain from the interactions with co-researchers was a deeper understanding of the culture and pedagogy of marginalised or diverse groups within the habitus of higher education. More substantial gains came as I began to perceive the research as a ‘grand’ narrative, with the purpose of continuing deeper reflections of an emerging professional self.

7.4.2.2 How did these reflexive processes “bend back” on my practice?

As indicated in the preceding section, I did not wait until the end of the research to incorporate my new knowledge into my practice. For example, I can talk more easily now about auditory processing (AP) that matches the other persons’ experience and understanding. The complexity of the theoretical underpinnings of my work has shifted as I have perceived the big picture of my research. A central focus of my learning has been on my reflexive responses to the nuances of the voice and the words the co-researcher used. I can be in resonance and empathise more quickly without being as overwhelmed by the stress of the other. A recent example: at the end of a program I asked a ten year old child about her observations when she had been reading aloud using the hand microphone. She noticed that when she had her feet on the ground she could ‘hear herself better’ through her whole body! Her statement surprised me, as this child had little inner awareness prior to this program.
‘Hearing herself better’ signified she was embodying sound and may begin to process more of what she reads. I had conveyed the value of reading aloud and my deep understanding of self-regulation.

7.4.2.3 A deeper level of understanding of auditory processing.

I had not realised that the methods I use in my practice were transferable, in particular the ‘reading aloud’ exercise. I had used this method in professional practice following a certain amount of sound stimulation and thought it would have limited application individually when people were in distress. Supa in particular showed me how she could use this method to focus herself and enhance her comprehension and writing by listening to herself read. The technique acted to focus and reduce her stress at reading print. That experience helped me be more creative with this learning tool, and I applied it with different aims for other co-researchers such as Gm. I am now convinced it is an excellent method for the development of understanding deep listening and the development of dialogue. I expect to develop these methods further into literacy, language development and critical thinking for people with diverse learning.

7.4.2.4 Technology improvements.

I believe that a practitioner’s ability to build rapport, trust and safety is essential for developing subtle body and listening interventions. As I moved more into the researcher/practitioner role, some of my beliefs have shifted. I now see the potential of facilitating these interventions to distant and remote students. I now have greater confidence that the methods used in the research, particularly the knowledge gained on reflective practice, can be utilised in the flexible learning environment with appropriate support. This means that I can now design programs and courses for distant education, as technologies to aid communication are readily available. For example, skype and simple voice recognition software are potential for those who are more competent with verbal skills than reading and writing. My practice and my beliefs about practice are more integrated, and I feel ready for the challenge of taking my work further to educational and community environments.

7.4.2.5 The effects of disorientation on health and learning.

Disorientation is a major cognitive response to stress and ill health and has a major influence on learning. It is dynamic and shifting, depending to a large extent on whether learning is perceived as hampered. I have demonstrated that the neuro-biological framework underpinning my practice can be applied to individuals and groups of students in higher
education to improve their self-understanding and study practices. Awareness of the nuances of stress is paramount, so the person can independently adjust themselves in the learning situation.

7.4.2.6 The researcher/practitioner nexus.

Using a critical reflective approach with co-researchers, I challenged the teachers and those steeped in the scientific paradigm. As well, co-researchers in the first AR cycle challenged how I was using a listening and learning focus and my valuing of dyslexia as a talent. I opened up discussion or questions about what and how the occupations of co-researchers contributed to their participation. When I linked my occupational practices and research practices in action I could then realise the close links between praxis, the critical research paradigm and writing.

Higgs, et al. (2009) point out that text is more than writing; rather, it is a communication of meaning and can take many forms. I have used a variety of texts which were at times interwoven. Text can be expressed experientially and there are many examples of this in the thesis, such as all the work on reflexivity above, emotional through the use of I-poems and the use of the learning cycles as a catalyst to gain greater efficacy in the feeling/reflection part of the cycle. Another type of text, biographical, is seen when I use accounts of practice or snapshots from my life story, the early learning stories of co-researchers and also text to give cultural or habitus meaning. Such texts of cultural meaning are open to interpretation and never ‘right’. Thinking of text as multi-dimensional has helped me to link back to my practice experience, then through reflexive writing to find new ways of thinking about writing and text in my research.

7.4.3. Reflexivity and the Self as researcher.

The practitioner skills I have developed, and how I work – a respectful, inclusive reflexive manner – have the potential to become knowledge generating. Lees (2001) argues that such a reflexive approach is ideal for practitioners and needs to be drawn upon to fill any research-practice gap, which is what this project targeted. I achieved a reflexive approach with most co-researchers, but had limited impact on the social and political contexts in higher education. Other methods of addressing the social and political networks from reflective practices include feminist research (Barton, 2004), auto-ethnography (Ellis, 2004), and ethnography (Stringer, 1997).
As discussed above, I experienced something of these notions of reflexivity before applying them in more depth in the study and further following up with new reflexivity practices from my own developing knowledge base. I could then experientially use the listening stages of the Listening Guide to determine if a piece of text could be treated as both tangible and intangible reflexivity. My action was to take text from my personal biography (Stage 1 – The Plot), reform the text into an I-poem (Stage 2 – listening for intangible reflexivity), and present only the I-poem to critical friends for reflective feedback (Stage 3 – listening for contrapuntal point). The contrapuntal point is represented in a piece of music as the time when there is a release or moments of empowerment or enlightenment.

Reflective feedback from the critical friends revealed that unspoken feelings were present: it felt uncanny that a ‘truth’ could be revealed. The I-poem was achieved by a process of reducing the words to an I-plus-verb poem. By next applying a meta self-reflexive process to the critical friends’ replies, I came full circle to stage 4 of the Listening Guide – “the pulling it together” stage, which became a form of syntheses using these aspects of intangible reflexivity as a method of analysis for my co-researchers’ journey and to highlight my inner processes as researcher.

My initial aim was to improve my reflective learning processes as I related to new concepts, and then to apply my experience knowledge of these methods in the data chapters.

7.4.3.1 Distinguishing tangible and intangible reflexivity.

A key element and focus in action research, compared to other qualitative research methods, is the use of some form of reflective practice to clarify, enhance the learning process, deepen interactions with co-researchers, and advise the direction of action (Brookfield, 2005). The simple reflective process of the Kolb cycle built a dynamic knowledge base for the co-researchers on the link between listening, learning and health. Additionally I further used AR cycles to develop my knowledge of the different types of reflexivities: tangible and intangible and combinations of both to the same text. The tangible reflexivity was gained by using a definition of dyslexia; I showed how a discursive analysis could generate new knowledge in the process. I also applied both tangible and intangible reflexivities to the same text, such as my use of a personal diary reflection to construct an I-poem demonstrating the ‘intangible’ aspect and then applied a meta-reflection, a more tangible reflexivity process.
7.4.3.1.1 Tangible reflexivity.

A tangible reflexivity process is a language-based discourse that primarily aims to explore cognition (Lucy, 1993). My experiential application was actioned by critiquing a definition of dyslexia, and then doing a meta-reflection on its meaning from my practice understanding of dyslexia and auditory processing. I used a definition of dyslexia which emerged as part of a large collaborative process with a number of European countries in the common market (EU) (Smythe, 2005). It was a more holistic definition, as part of a research project aiming to discover the needs of EU students in higher education with dyslexia through the use of information and communication technologies (ICT). The researchers and collaborators considered the definition needed to be sufficiently generalised, yet specific enough, so that professionals across disciplines and cultures could equally use it to potentially develop educational strategies and drive their curriculum. The definition that emerged is inclusive, has both symptom and causal components, and allows for language and cognitive differences (Smythe, 2005).

Dyslexia as a label has a history of being fraught by the development of many disciplinary definitions (Section 2.2.1.9), making it hard to justify the label from a deficit model or ethical standpoint. Australian education policies have ignored the label dyslexia, whilst in Europe dyslexia is perceived as a social phenomenon. For example in Hungary the word has been used since the early 1900s (Smythe, 2005). Whilst the definition below is generalised, what initially excited me was that it is inclusive and a genuine attempt to be practical across many disciplines and genres.

a) A new dyslexia definition emerges:

Dyslexia is a difficulty in the acquisition of literacy skills that is neurological in origin. It is evident when accurate and fluent [emphasis added] word reading, spelling and writing develop very incompletely or with great difficulty. It may be caused by a combination of difficulties in auditory and visual processing, working memory, storage and retrieval in the lexicon (word banks) and motor difficulties. The manifestation of dyslexia in any individual will depend upon not only individual cognitive difference, but also the language used (Smythe, 2005, p. 30).

b) A meta-reflection and critique of this definition.

Could this definition be useful as a common understanding of dyslexia? The EU study by Smyth concluded it seemed to confirm that dyslexia may not appear to be the same in all
languages (Smythe, 2005). A Hong Kong study acknowledges that Chinese speaking people with dyslexia had difficulties in two domains, the visio-spatial and the phonological, while their English counterparts had only a phonological deficit (Perfetti, Tan, & Siok, 2006).

The early research work from Tomatis showed links to learning a language and environmental influences. For example, opera could have different singing voices depending on whether the opera house they were singing in was near the sea (Tomatis, 1996). Building on this insight, he later showed that each language had a unique sound frequency map. He used these maps to work out the frequencies needed for a person to learn a second language. By using sound to mechanically give the ears an aerobic exercise, to be flexible enough to adjust to the language rhythms, Tomatis helped people to ‘tune in’ their second language frequencies to more quickly engage in the new language (Tomatis, 1996). It makes sense that in order to sound like a ‘native’ speaker, one has to embody the sounds that make up that language. A famous example of this method used for language learning can be read in Gerard Depardieu’s biography (Chutkow, 1994).

An important aspect of this EU research was finding that certain languages required different skills from each other for literacy learning. For students with dyslexia for the English language, the primary skill is sound discrimination, because in English there are many sound word exceptions to the rule, such as receive and chief, whereas in Hungarian the skill would be more learning phonemic awareness because the Hungarian language has near perfect sound letter correspondence (Smythe, 2005, p. 21).

The EU definition implies that if a person can read with accuracy and fluency, which is a marker of competence in literacy learning. I next give an example to show that to read or spell in Hungarian is relatively easy even when you do not know the language. Try reading out loud the following word: ‘diszlexiaveszelyeztetettseg’. How easy was that? Could you read it with some accuracy and fluency? It is not as difficult as it first appears, as in the Hungarian language there is near perfect sound correspondence.

Contrast this to learning the English language which has many ‘exceptions to the rule’ in sound letter correspondence, for example, ‘bear’ and ‘bare’. Fluency and accuracy will not be as possible for a dyslexic English speaker “who may compensate for a reading difficulty by becoming very adept at using context and tend to read for meaning” (Smythe, 2005, p. 56).

To take this example to another level of reflexivity, I asked a person born in Hungary, who has lived mostly in Australia but understands the language without speaking it, to pronounce the word ‘diszlexiaveszelyeztetettseg’. He looked up his Hungarian dictionary and found that
the word requires sound marks so the reader knows which sound to emphasise on which syllable. His opinion was that having a ‘good ear’ was as important as sentence construction in the Hungarian language, despite a very different word order to English.

The researchers concluded that a Hungarian person with dyslexia would need a very different skill set to develop literacy skills than their English counterpart (Smythe, 2005, p. 26). Taking the Hungarian example, the main priority in the development of literacy skill would more likely be phonological skills such as rhyming, so that the flow of the words was listened to. The priority for English language learning is that sound discrimination and auditory memory are needed to account for all the exceptions in English of sound/word correspondence. Auditory processing is important for all to master. The final word: “the manifestation of dyslexia in any individual will depend not only upon individual cognitive differences, but also [on] the language used” (Smythe, 2005, p. 26).

7.4.3.1.2 Intangible reflexivity: Using the Listening Guide stages.

I have used the ‘intangible’ reflexivity aspects in the study both to highlight my inner processes as researcher and to uncover and bring forward discussion aspects of the emotional life of some of the co-researchers.

As suggested earlier, there are four stages to the analysis using the Listening Guide: Listening for plot, the I-poems, contrapuntal voice, and summing up. Both the I-poem and the contrapuntal voice are distinct forms of intangible reflexivity: these elements have the potential to reach a level of understanding which is unseen, feeling, or abstract and inclusive. A discourse on what is not easily observed or non-verbal in nature, for example, music, or the quality of voice or feelings, are examples that could be perceived as intangible.

An I-poem is a form of intangible (or embedded) reflexivity that is used to perceive the nuances underlying something felt or seen or the words used in a conversation (Gilligan, 2003). It endeavours to bring to light the unsaid, so is driven not by language but rather by an unseen sense, like sound, colour, or a feeling. Many qualitative methods of analysis emphasise the use of language and story; while the Listening Guide is no exception, it also offers a relational and dynamic system of analysing data, placing emphasis on these intangible elements of reflexivity to make a richer, more transparent form of analysis (Gilligan, 2003).

To start my understanding of I-poems, I first created one from a piece of text from my personal biography, modified the writing by taking only the word ‘I’ and the following verb, which brings an intangible look, feel, or sound to the writing. The intention was to reveal something of my inner life. My next step was to send some starter questions with my I-poem
to critical friends. Their replies are displayed and bring a diversity of opinion to show, confirming that there is no one true answer, but rather trends. I then continue the process of reflexivity by doing a meta-reflection from their reflections.

a) A text example of Stage 1: Listening for the plot.

In this example I take a piece of text from my personal journal in order to demonstrate how even a story can reveal the underlying intangible feelings when an I-poem is constructed.

Coming into higher education can be a daunting process for many other than those with diverse learning needs. My own invisibility and identity was challenged last year as I worked to become comfortable with the practitioner researcher nexus. I believe being an independent private practitioner led to more feelings of isolation, similar to what I had experienced some years ago on my return to Australia from the UK when finding work seemed impossible; I was culturally ‘shell-shocked’ and despite having support, my application for membership of two professional associations which I judged were important - a social one and my therapy work – were rejected. My self-identity suffered as I strived to be a new ‘insider’ back in my home country. I enrolled in a Masters course at the same institution I had completed my Graduate Diploma. The stress and identity issues in this transition from England resulted in a health issue in my third year back. Since then I have learned that I need to continually shape and hone my ideas with people. My learning style demands I verbalise my ideas by having a person to bounce them off, and then extend the ideas into writing. A good, calm listener, someone who relates to my subject and can effectively summarise is crucial. My process is one of first attempting to articulate my understanding of the context, so that I can then better listen and self-critique. Is this what is meant by self-reflexivity? (Personal writings. 25/10/09)

From this text I took only the words ‘I’ and the following verb to create an I-poem.

b) Actioning the I-poem stage 2.

```
I worked
I believed
I had experienced before
I was culturally shell-shocked
I judged
I strived
I enrolled
I had completed
I have learned
I need
I verbalise
I can
```

Kay 2009

b) Actioning the I-poem stage 2.

From this text I took only the words ‘I’ and the following verb to create an I-poem.

b) Actioning the I-poem stage 2.

```
I worked
I believed
I had experienced before
I was culturally shell-shocked
I judged
I strived
I enrolled
I had completed
I have learned
I need
I verbalise
I can
```

Kay 2009

I wanted to uncover the underlying feelings. I sent the I-poem to two critical friends with the following questions marked (a–e) to answer. The critical friends’ comments are distinguished as (1) and (2). Their reflections follow.

c) Critical friends interpret the I-poem.
a. Make a comment on the overall feeling conveyed in this piece.

Feels like the normal rollercoaster of life that is my experience. (1) I’m confident, I believe in myself, I felt challenged, I kept going as I had older successes and I did it. (2)

b. How could you interpret these feelings?

Like a person who has gone through many seasons of life: starting out with a world view which gets knocked around a bit, struggling, having negative experiences. But rising to the challenge, meeting it but not always feeling as successful as anticipated, in fact, being aware probably in hindsight of behaviour which was not helpful, but nevertheless moving on and getting to a better place/new season with all its ambiguities. … by the end, having a season of serenity or appreciation for the essence, competence and achievements of self. (1)

c. How does this person speak to themselves?

Realistically – positively – honourably. (1)

d. What is the most important thing the person wanted to convey?

Growth through learning, persistence and meeting not avoiding challenges. (1)

e. What do you imagine the ‘cultural shell shock’ could be?

I took it as a generic display that an internal world-view and values which were held dear and as complete truth were challenged and shown wanting. (1)

d) My meta-reflection on the reflections from the I-poem.

My first reaction was wondering if these critical friends were just being nice as they know it is my work. I found the feeling reflection particularly encouraging as it has closely conveyed the cognitive process. The cultural ‘shell shock’ revealed to me that the most important issue was ‘the values held dear’ and the rejection of my professionalism. I was amazed that my I-poem could pick this up. This exercise gave insight into the value of using I-poems in order to reveal hidden feelings.

e) A meta-cognitive reflection: the value of critical friends

Early in my study, following comments and feedback from another critical friend, I reflected further and noticed my pattern was to agree with her first comment then getting a sense of confusion and immediately set about to reorder the structure, take out parts and categorise them. I realised I was tacitly agreeing with her without any further reflection on her comments. Later, I received another example of reflection from a critical friend, and I jumped all the previous steps and immediately spiralled into self-doubt. On re-reading the often cited Laurel Richardson (1994), I had insight when she said: ‘individuals are dependent on the discourses available to them” (p. 518) – I had plunged into an old pattern of ‘the other person is the authority and knows better than me’.
My reflective processes developed by writing to validate my thoughts, and became a method of knowing. At the same time, I recognised a deeper responsibility in weighing up carefully the other’s discourse in relation to my own. Reading and in dialogue with people I have both an obligation and challenge to take account of my context and take the person through step-by-step what I consider a new discourse. This writing reflection is a dialoguing with myself and begins to generate new knowledge: both cognitive and affective processes.

7.4.3.1.3 Another example of intangible reflexivity: A multiple voice technique.

An email from a critical friend (St January 2006) commented: “I might ask you to do another layer of reflection on your reflection”. This was in response to a previous email when I had asked her about self-reflexivity. She went on to ask:

St: As you read back your words how do you feel? How do you identify with the author of these words and to what extent can you move beyond this as well?

This was just what I needed and in my reflecting on these questions I experienced my first understanding of self-reflexivity. I challenged myself to dialogue with myself using two voices and revisited the text with her questions in mind, and the following dialogue ensured.

a) The two voices are myself (M) and Remote Voice (RV).

M: How do I feel? Surprised! Clearly there is a pattern in the writing. From my I-poem, I see a self-reflective part followed by an exploration of some new learning, a dyslexia definition and then some further self-reflections.

RV: All the way through the article there are concepts that may seem obvious to an educated reader that M seems to have just come to understand on another level. Is M applying embodied writing and auto-ethnography in this piece?

M: I believe there are small examples in the text, and there are empty places where the sentence structure got long or awkward.

RV: What M is trying to do with this definition of dyslexia, a central theme in her work, is exploring the cross disciplinary nature of dyslexia. This whole definition may open a global debate on whether to use the label dyslexia or not could be over! A new level of understanding of the holistic nature of dyslexia has been reached and I think will strengthen global learning. M tentatively brought forward specialist knowledge of language development and auditory processing. Although it seemed at first to be out of context, hopefully the bigger picture of the severity of literacy issues in the community and higher education are beginning to emerge and bring further action on an holistic level.

b) A reflection of the practice examples

Up until this stage I had little idea of what self-reflexivity was. These examples of intangible reflexivity sharpened my observation of myself in action as I made decisions.
7.4.4 A summary of the self and research reflexivity.

Patti Lather uses the term “embodied reflexivity” to mean a social transmissive model in which the researcher or facilitator deliberately “interrupts” when the lived experience is being compromised or not recognised (cited in Pearce, 2008, p. 48). Other ways of distinguishing the concept further as an “embodied self-reflexivity” (Pagis, 2009) are those studies of self that are not the usual discursive methods. For example using meditation, which is neither abstract nor discursive, can develop self-knowledge, and is anchored in the internal sensations of the body. Pagis (2009) contended that “body sensations can be used as indexes to psychological states, emotions and past experiences as a tool for self-monitoring” (p. 265). In other words an inclusive ‘intangible’ form of self-reflexivity.

The processes of deep listening embraced by ancient cultures in rituals and everyday life is an embodied reflexivity as both the contextual language level (social), and the level of inner reflection of voice or sensation (intangible) are embraced (O'Donovan, 2001; Ungunmerr-Baumann, 2002). Meaning can be found by seeking and developing our authentic and consistent voice(s) to help distinguish when, how and why internal or social ‘false’ voices are present. My example of an I-poem made from a page of text and part of an interview helped me to understand that any ‘intangible’ aspect will broaden an analysis, whether it is academic or self-writing, and has the potential to bring the researcher’s voice more into the process. Such practices create a process of embodied reflexivity as it can include aspects of both inner and social reflections.

7.5 Chapter Conclusion

This chapter has summarised the main issues that concerned co-researchers, as revealed in Chapters 4, 5, and 6. The co-research commonalities and difference within the learning stories were identified and summarised and were then synthesised to create themes and subthemes of what co-researchers brought to HE: their experience in higher education and their action learning experiences.

The co-researchers brought to the educational experience a range of health issues that for some co-researchers were triggered or exacerbated by traumatic life events. Negative early schooling experiences related to dyslexia or diverse learning became associated with the development of a particular learning style.

The experience in HE was punctuated by reoccurring health issues, both physical and psychological, which in some cases were directly related to the influence of life events. The
lack of learning support, inadequate supervision and inconsistent recognition of the nature of the disability all contributed to feelings of isolation, invisibility and marginalisation, resulting in varying degrees of vulnerability. For some co-researchers these factors negatively influenced their successful higher educational journey.

Awareness of the impediments that create marginalisation and vulnerability is the key psychological state that enables individuals to experience moments of empowerment. Taking action is the next step. The action learning experience within the research enabled co-researchers to re-inscribe dyslexia, to reduce stress and increase ability to focus on issues, and to increase confidence and trust. Also improved was the knowledge of the link between auditory processing, self and affect regulation, health and learning, the development awareness of their learning style, and the development of reflective skills.

Exploring the issues in a safe environment, telling stories of early learning and exploring feeling as part of the learning cycle, writing reflectively and linking back to their current learning situation were all reflexive processes that were a positive benefit to both myself and co-researchers.

Through involvement in the research processes and the resultant enhancement of knowledge and skills, all co-researchers were able to move through their different early and present learning and health issues, the lack of learning support, and the varying levels of marginalisation and vulnerability, to successfully progress through or complete their higher degree studies. In the end this demonstrated a level of resilience and determination to succeed.

Two results/experiences highlighted this research: first, my facilitator researcher action learning experience of the development of writing prose and I-poems to bring forward a more balanced approach to both the co-researchers and my learning and second, the development of listening auditory processing strategies.

The final section of this chapter explored the self-study aspect, discussed the theoretical underpinning of self and researcher reflexivity, and described the self-reflexive activities undertaken to enhance my understanding of the main concepts within the methodology. By using my own prose, from which I developed I-poems based on the Listening Guide, I enhanced my understanding of how to search for the tangible and intangible within the learning stories. I did not wait for the end of the research for my new understanding to influence my professional practice. The process of self-reflexivity has deepened my self-reflexive understanding and notions of the intangible have been incorporated into my
professional practice. The increased knowledge of the learning journey for people with dyslexia and diverse learning has also informed my professional practice.

The following chapter reflects on the research intentions; discusses the achievements, and benefits; reviews if there are any living contradictions remaining, discusses criteria to demonstrate the credibility and limitations of the research. Insights, implications and new directions for further research conclude the thesis.
Chapter 8.
Final Reflections

“researchers can expect that their work will contribute to their sense of being-in-the-world, to their praxis, and to the larger conversation regarding the topic under study as well as the process of inquiry” (Herr & Anderson, 2005, p. 70).

While my intention was to conduct an AR project to respond to local needs, issues and realities, my experience of the AR process was like “designing the plane while flying it” (Herr & Anderson, 2005, p. 69). This chapter draws together the process of inquiry. Firstly, the discussion reflects on the research intentions, the living contradictions and the benefits of the research. Secondly, the ethical and research rigour are discussed, including informed consent, privacy and confidentiality, and protection from harm. The credibility of the research is framed by three types of rigour: evaluative, procedural and interpretative. Thirdly, a section on insights and implications includes a discussion of the limitations of social communication and inclusion, and suggests ways forward in higher education and new directions for future research. The thesis is then summarised in a thesis statement.

8.1 What were my research intentions and were they achieved?

I wanted a larger conversation about dyslexia and began the PAR with that purpose in mind. This was in order to understand the learning experience of adults who have dyslexia. I wanted to know whether there were issues with teaching, learning and any concomitant psychological reactions that were not being addressed. My professional practice and the underpinning theories of auditory processing and self-regulation framed the research intention. As the PAR evolved to SSAR, the co-researcher focus changed to include diverse learners in higher education. My aim evolved as I explored and improved the listening and learning and also gained an understanding of the health impacts. As a self-study project, the second intention was to improve my self-reflexivity and reflective learning processes as I related to new concepts and applied this new knowledge in my professional practice.

8.1.1 Were my intentions achieved?

“Almost all researchers using PAR express doubts about the ‘purity’ of their projects; but it is important to remember that all research has limitations” (Herr & Anderson, 2005, p. 101). (my emphasis)
Two questions are relevant:

- How do adults with dyslexia or diverse learning manage in higher education?
- Did my practice experience support positive change in terms of increased efficacy for learning?

In relation to the co-researchers, I succeeded in answering the first of these questions: how adults with dyslexia or diverse learning manage in higher education. The research project identified themes of exclusion, stress and disconnectedness. At the same time, the co-researchers’ journey revealed a high level of resilience in managing their learning and health issues in a higher education environment that at times was less than supportive.

As all co-researchers were from a rural location and were mainly mature-age women, the research of Drury, Francis, and Chapman (2008a) is a relevant comparison. That study, of ten mature-age women entering nursing studies in two rural universities, identified a journey metaphor in five overlapping phases. The “initiating the crusade” (p. 1) phase prepares the ground for entry to university. “Engaging the force” (p. 1) is the time of recognising and acting to develop new learning skills. The third phase, “retreating and regrouping” (p. 1) is a contrapuntal point “when emotional integrity is threatened and involves students harnessing emotional strength through support from peers” (p. 1). When supports are in place, resilience may be experienced, which signifies the phase of “soldiering on…to keep going despite crises and conflicting role demands” (p. 1). At the end of the degree comes the “victory march” (p. 1).

In this research the third phase, “retreating and regrouping”, was significant during the individual work with Ma and Supa (Section 6.2. & Section 6.3), while the Health Group – Gst, La, Mt (Section 6.1) – appeared to be “soldiering on” with the future goal of the “victory march” in mind while seeking peer support, despite ill health and marginalisation.

My emphasis on developing inclusive relational structures within the research was enhanced by the theoretical training which underpinned my clinical practice: for example that of whole brain listening and the understanding of affect regulation (Schore, 2002). I used a combination of methods that enhanced both the emotional and the cognitive aspects of learning in the context of the research relationship. This became a journey and demanded holistic bodymind thinking. The research process allowed action learning to be applied in the individual situations, as my reflexive thinking and actions focussed on affect self-regulation (Job, Dweck, & Walton, 2010), thus touching on the sociocultural and health aspects. The approach evolved, as together the co-researchers and I agreed to individualise action learning
methods to address the current issues we were facing. Some co-researchers were significantly helped by this approach, as stress-related issues and problems involving inclusion and engagement were activated and processed (Ma, Supa, Gm).

The change to diverse learners and SSAR influenced my learning and personal transformation as a practitioner researcher, as I moved to a theoretical and practical understanding of how to apply a strength model (Seligman & Csikszentmihalyi, 2000). In AR1, using the label of dyslexia and an outwardly directed focus may not have led to moments of empowerment. The methodology SSAR demonstrated how inclusive reflective practice could transform attitudes, beliefs and practices for diverse learners. A limitation of a relational interactive approach developed in the latter stages of the research as spontaneity made it more difficult to track the development of themes; my motivation was thwarted particularly when chronic health presented in the form of brain fog (Section 6.2).

8.2 Any Living contradictions?

I began the research with a worldview that a positive way to view dyslexia was as an ability rather than a focus on it as a disability. People with dyslexia are creative, talented in certain aspects and engaged in thinking “outside the box”. My early approach was that negative attitudes towards dyslexia could be changed and people could begin to see their dyslexia in a positive way, as ability. This implied that I considered that through “conscientisation” (Freire, 1970), that is, becoming consciously aware, it was possible to transform beliefs and thinking.

As the research progressed, it became clear that this was a difficult concept for those with dyslexia to accept, as their habitus of schooling had taught them they were different, with feelings of humiliation, shame and being ‘caught out’ ever present, even though as Rankin (2010) suggests, the new habitus of higher education can be liberating for some people with dyslexia.

This was a living contradiction, a disconnection between my own values and the values of those who joined the PAR, and this influenced participation in the AR1 cycle. In preparation for the AR3 cycle, I explored the writing and practices of educational researchers who addressed their professional values (McDonagh, 2006; Pearce, 2005; Roche, 2007). These researchers helped to connect my beliefs to behaviour and action, and I gained a new understanding as my embodied values emerged. I began to feel the tension between my therapeutic practice deficit thinking and a social constructivist thinking which had underpinned the inclusive practices I experienced in the research context. For example, the Health Group (AR 3) co-researchers began to develop reflective practices. This created an
opportunity for them to perceive themselves differently from their cultural label of ‘disability’, although they remained invisible in higher education. This group transformed in four meetings into what Driedger & Owen (2008) refer to as a temporary collaborative learning community.

8.3 What do I think were the benefits of my Research?

All good research is for me, for us, and for them: it speaks to three audiences… It is for them to the extent that it produces some kind of generalisable ideas and outcomes… It is for us to the extent that it responds to concerns for our praxis, is relevant and timely… It is for me to the extent that the process and outcomes respond directly to the individual researchers’ being-in-the-world (Reason & Marshall, 1987, pp. 112-3).

I have taken this quotation as a starting point to look at the benefits from the suggested three perspectives – me: what I gained from the research?; us: as action researcher practitioners with the concerns of praxis; and them: the co-researchers and generalised ideas and outcomes.

8.3.1 Me: What I have gained from my lived experience of the research.

From the quotation above, good research is for me ‘to the extent that the processes and outcome respond directly to me being in the world’. The research process contributed to my lived experience by revealing the effect of the hidden attitudes. Driedger & Owen (2008) state that people with disability do not want to be seen as sick because it devalues the individual and gives them the social construct of a needy person. However, the medical model values sickness in order for the individual to receive appropriate assistance.

When a person expresses how it feels to be managing their invisible disability, members of the community respond: “But you look so well!” I experienced this attitude first hand after the development of my own health issue while writing my thesis. I discussed my context before coming to the research as having an uncomfortable living contradiction from my practice experience (Section 2.3.1). I began the process with fixed beliefs from a practice experience of self-regulation, auditory processing, dyslexia, and ideas about how I learn best. What has developed for me is a broader and deeper understanding of all these processes, and more flexibility in the way that I learn. I am more patient with myself, particularly in situations when I cannot see the way forward, when I feel that I am expected to answer, and when I cannot find a way into an answer.
Sometimes, I can communicate this more readily in private practice. On the other hand, in my writing times I can stay with the discomfort longer, experience less avoidance and I have found novel solutions. For example, if I had no one to talk it out with, I talked into the audiotape, which is a technique I continue to develop.

My views have changed, particularly in my private practice. In comparison to what I did before, I now place more importance on communication with the mothers who come with their children. They come as the support person, and although they take part in the program, the focus is on the child. At first my aim is focussed on the mother–child interaction. I mainly observe and will intervene only when, for example; I see subtle facial reactions from the child to something the mother has said.

I communicate more through acknowledgement and praise, and some of my most reticent mother relationships have improved. For example, a mother told of her headache because of a decision she had to make which meant choosing between care of her eldest or of her youngest. This communication was possible only because our relationship has reached a level of honesty and confidence.

**8.3.1.1 My relationship with supervisors.**

I have developed a tolerance for ambiguity in cognitive methodological discussions; also, more capability to integrate information into my own developing theoretical framework. This process was helped by always recording my supervision meetings, and particularly as I re-listened and made notes following meetings. This became an auditory diary as I would then critique the issues and the readings to match up experience and my conceptual understanding. The other aspect was my affect regulation in meetings. I recognised that my perceptions of events when I was challenged could be quite different on listening back to the audio recordings. Many meta-reflections could change my interpretations and move towards interactions from a growth perspective. I would take action if needed rather than feeling disconnected or caught in a potential emotional cycle.

By AR3, my new learning from my supervision was flowing over into the relationships, in particular into the work with Ma and with Supa, now a longer process. In contrast to my previous practice, I was more able to let go and be concurrently in the confusions, the fog, without an agenda, and to have the patience to wait for issues to emerge. I re-experienced staying in the moment many times with comfort, even when there was little outside action. The willingness to act on using practical techniques, for example to revisit any ‘blocks’ to writing, were now undertaken in their own time frame. I had the opportunity with some of the
co-researchers to indirectly revisit my therapeutic affect regulation roots in the learning context.

8.3.2 Us: As practitioner/researcher.
“responding to the concerns of the practice is relevant and timely.”
(Reason & Marshall, 1987, pp. 112-3). (my emphasis)

The transformation in methodology from participatory action research (PAR) to self-study action research (SSAR) meant a substantial shift in my thinking, both as I became more focused to Self as researcher (Section 3.3.4) and in my relationships with the co-researchers. This happened particularly as trust, rapport and better listening meant that we became more as equals – as two co-researchers sharing. We could more easily explore the researcher practitioner role, based on insights gained from my own earlier behaviour. This allowed for greater opportunity for empowerment, as my focus shifted to be ‘in the moment’, a self-reflective stance, rather than a planned and structured approach of the earlier ‘helping’ researcher model that I had fallen into during AR1.

The six basic intentions or categories of intervention analysis for practitioners working with people (Heron, 1986; Heron, 2001) were relevant in describing my process of facilitation with the co-researchers. For example, consistent with my style and behaviour in the first phase of AR1, where the habitus was unfamiliar, I used a more authoritative intention/style that was prescriptive, information giving and, in some ways, confrontational. In AR3, as I moved towards a SSAR model and an inner focus on my learning, my facilitative style sought to encourage feeling awareness and self-discovery, to focus on the lived experience and on being supportive. These qualities resonated with my practice development of reflexivity and reflection.

Heron (1986) perceived interventions as composed of intentions and sub-intentions that are characterised by specific behaviours. He proposes that his model exemplifies the intent to understand client behaviour, is flexible and is applicable to many different types of clients and practitioners (Heron, 1986). My being cognisant of this model and its practice from earlier work in the United Kingdom means that it has formed part of my embodied experience and action.
8.3.3 Them: The co-researchers.

“for them to the extent that it produces some kind of generalisable ideas and outcomes”
(Reason & Marshall, 1987, pp. 112-3). (my emphasis)

8.3.3.1 Co-researchers with dyslexia.

The SSAR approach particularly suited the two co-researchers known to be dyslexic, because of the many opportunities for them to learn from experience, and because they had a strong commitment to gain and act on the skills they developed from our meetings. Understanding the link of stress and body awareness to auditory processing procedures was an important development for some of the co-researchers. Those already receiving help from student services were caught up with their literacy issues, for example dealing with spelling and sentence structure issues. This left me able to use creative methods to assist with the development of both written and verbal reflective skills. The focus was on developing their inner processes by reflecting back to themselves and developing cognitive understanding before becoming enmeshed in the detail, thus making it easier to comprehend texts.

8.3.3.2 Diverse learners.

Two co-researchers shared and explored their ideas and stories from earlier school learning, particularly where experiential approaches were a part of the curriculum. Past ‘learned helplessness’ (Seligman, 1972), which was tied up with their beliefs about their identity, surfaced (Dweck, 2000). When in their learning groups, they found difficulty in expressing their reflections and needs to their group members and to me.

This flexible way of working together by sharing prior learning and past experiences using experiential learning and action research methodology helped some diverse learners increase their understanding of their role as student researchers.

Email and phone contact between face-to-face meetings was offered to all co-researchers and was taken up only occasionally. My email contact was limited to encouraging reflection and for suggesting times for face-to-face meetings. However, with one co-researcher, a verbal conversation about limited contact and feedback led to reaching an agreement about email reflections. This agreement was kept and a large change occurred with the co-researcher, enabling the person to share thoughts verbally and by email with the lecturers, something previously not undertaken.
8.3.3.3 Health benefits.

The awareness of how health related issues impacted on learning was addressed by using the concept of disorientation of the senses; as well, its relationship to dissociation was explored with some co-researchers. This exploration brought new experience and ideas about how to manage pain and a lack of focus. The development of concentration through the use of mental brain processes was also supported. However, the limitations of working with talking methods when faced with chronic health issues, and with the co-researchers in heightened states of anxiety or fatigue, meant at times waiting for a new affect regulation to be initiated. Many benefitted from dialogue, my listening and their action from listening. For others there was an openness to work with the ‘dynamic of the moment’ by using mindfulness strategies so that change could occur.

8.3.3.4 Learning from experience.

When the work was experiential, co-researchers found it was enjoyable, which sometimes made it possible to get to their ‘you’, on the second-person participatory level (Reason, 2001) and explore the cognitive understanding of the experience. In other words, reflecting on experience would occur more easily following an experience that we could share in a group situation.

On the individual level, gains were made when suggested experiences were coherent to the co-researcher, although it may not always have been on a verbal communication level. For example, the information was given cognitively and the suggestion made come from an intuitive or intangible level. I believe that trust can be built when openness to talk on different levels is accepted. This particularly applied to those co-researchers who were reticent or who lacked cognitive/affect balance, and from a health perspective for those with ongoing chronic health issues. From a learning perspective, for those co-researchers who had focus issues that related to their current levels of stress and disorientation, it was imperative that more intangible methods were implemented in order to improve our communication. A better approach would have been to commence the ongoing experimental tasks earlier rather than starting with the cognitive aspects, as I had initially done in AR1.

8.4 Ethical Issues

My personal ethical code-of-practice focus has been to ‘make friends with the resistance’, a non-confrontational accepting style, and to listen and value all contributions without
judgement. I also adhered to three fundamental ethical considerations when starting the research:

(i) Ensuring that I had informed consent from potential co-researchers,
(ii) ensuring that privacy and confidentiality were maintained, and
(iii) ensuring that protection from harm was in place.

8.4.1 Informed consent.

By informed I meant that potential co-researchers understood what the project was about. They were sent an information sheet when they first stated/indicated that they were interested in participating (Appendix 1). By consent I meant that they could make up their own minds to participate, without force or persuasion.

The research was both personal and cognitive, working with both my experiences and those of the co-researchers, and trying out new ideas related to both learning and institutional issues. For example, we explored thoughts, feelings, aspirations and learning histories. I was aware of the possibility that the co-researchers’ perception of me was as the power and authority, so and I was vigilant to address any issues if they occurred. For example this was an early issue in the initial interviews with some co-researchers and again in the AR1 group meeting. This was not as I had envisaged the project. I saw my role “as facilitating reflective practices to help personal and professional learning teaching” and I developed my facilitation strategies to minimise this affect.

8.4.2 Privacy and confidentiality were maintained.

In the consent form signed by co-researchers, the disclosure statement stated: “Any information that is obtained in connection with this study that can be identified with me will remain confidential and will be disclosed only with my permission” (Appendix 1). I kept to this strictly by de-identifying as much as possible any features that I thought may be traceable to the co-researchers. When I had one co-researcher who verbally told me that I could use her real identity as she was proud to have been part of the research, I said I was unable to do that because of the privacy agreement she had signed.

8.4.3 Protection from harm.

One of the university’s ethical principles related to ‘doing no harm’ concerns any work with people that can potentially cause emotional disruption. It was my responsibility to ensure that this was monitored. I did this in situ by acting immediately, using my knowledge of self-regulation and my skills as a body psychotherapist. I also followed up with emails and phone
calls if needed. However, part of my process was always to have 5 to 10 minutes of reflective feedback at the end of a meeting, thus minimising the chances of reactivity. However, an example did happen on my very first night of the AR1. A co-researcher felt challenged when asked to give verbal feedback in a group of four and went into a state of high anxiety. She described the bodily symptoms she was experiencing, and she then followed my ‘grounding’ instructions to calm her. She was able to talk about the reaction as being something from her past learning in school. She had previously had a mental breakdown during her first attempt in higher education. This experience demonstrated to me that sufficient trust had developed both in the group and between us, such that she could be so honest and open at our first meeting.

Although this was a situation where a less experienced facilitator may have exacerbated the issue and risked doing harm, I was able to call on my practice wisdom to help her come through her anxiety in a positive way. I believed I had the insight and skill to protect my co-researchers from inadvertent harm.

When I began to have several co-researchers drop out of the project because of feelings of being overburdened by their workloads, I did not pressure them to continue, despite it having an impact on my research.

8.5 Information given to co-researchers on joining the three AR cycles.

The following information was given to co-researchers when they were considering joining the AR cycles: the informed consent form, the plain language statement and two checklists, one for listening and one for dyslexia characteristics (Appendix 1). Additionally in AR3 there were specific instructions for co-researchers on how to use the Listening Checklist to focus on what resonated regarding their own listening.

8.5.1 The Plain language statements: AR1/2 and AR3

The difference in the plain language statements between the AR cycles 1/2 and AR3 included acknowledging the shift of focus from dyslexia (AR1 and AR2); changing the wording to learning diversity or learning differently (AR3); and changing the boundary of expected meetings to a maximum number of meetings. The feedback from earlier cycles had been that it was too big a commitment of time. Flexibility in AR3 for individual co-researchers meant that I envisaged a maximum of four face-to-face individual meetings and one group meeting at completion of the study, with follow-up between face-to-face meetings using phone calls and email.
Common to all cycles was the expectation that co-researchers would maintain a journal and that any non-confidential parts were expected to be shared should meetings be held. The journal idea was not taken up.

8.5.2 Checklists: auditory processing and the dyslexia characteristics.

In AR1/2 the checklists were used to start conversations within the group. The idea was to choose a listening concept, write about it from their experience and then share this in the first meeting as a direction for our joint interactions. Details were sent out with the consent form for this to be completed as a preliminary exercise before the first one-on-one meeting.

8.6 What criteria did I use to show credibility?

This section sets out to answer whether my research methods were thorough and appropriate. I have followed the criteria suggested by Kito (Section 3.8), using the three levels of rigour – evaluative, procedural and interpretive – to briefly describe my choice of methods and actions.

8.6.1 Evaluative Rigour.

The criteria for evaluative rigour are summarised in Table 8.1; discussion follows.

Table 8.1 Summary of the evaluative rigour.

<table>
<thead>
<tr>
<th>Criteria</th>
<th>When and where?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Were the appropriate stakeholders consulted?</td>
<td>I gained insight into the context of higher education by consulting and developing networks. I consulted with Director of Equity (early and end of project), Director of Teaching and Learning (end) and two staff members (middle), Head of Students Health Services and disability officer (early in project). The community project in AR1 concurrent with the university AR1 project had reduced effectiveness because of poor attendance and shift work load. This community project was not reported in the thesis. Meetings with the following scholars to discuss their approach and my work: Australia: Dr Jane Pearce (2010), Dr Kate Chanock (2008) UK: Irish PhD’s SSAR Caitrionne McDonagh, Mary Roche (2009), Specialists in dyslexia/teaching higher education such as Sandra Hargraves and David Pollak (2009), Canada: Holistic Educator author Isabella Colalillo Katz, Paul Madaule Listening Consultant and Roland Vriesinga (2009).</td>
</tr>
<tr>
<td>Identified innovative scholars: learning: dyslexia, diverse learners and equity.</td>
<td></td>
</tr>
<tr>
<td>Ethics approval carried out.</td>
<td>I followed the ethics approval in all aspects; throughout the project I was cognizant of respecting confidentiality and acted when there was an imminent breach. For example, Supa (Section 6.3). All co-researchers signed and agreed to the terms of the informed consent form. I de-identified all names, stored the data appropriately.</td>
</tr>
<tr>
<td>Revisited the action of the co-researchers and myself. Is the view accurate?</td>
<td>In the latter part of the process with each co-researcher, through on-going reflective processes, discussions were held to acknowledge their contribution and the conceptual understanding coming from the work. For example: Jas (Section 5.1)</td>
</tr>
<tr>
<td>Ensuring accurate view with critical friends and supervisors.</td>
<td>Throughout the project I involved a variety of critical friends who supported my development. A fellow PhD student was a critical friend and we critiqued each other’s writing (2009–2010). I had short-term help for specific issues from experienced colleagues. As the ideas developed both supervisors’ input was valuable to check for accuracy, clarification and motivation. All interviews were recorded for later reflections and development of my understanding.</td>
</tr>
</tbody>
</table>

### 8.6.1.1 Consulting, networking and conference presentations.

At first I found it difficult to consult with the key stakeholders in the university. Action research comes with an element of not knowing where you are heading in the research, and people are often too busy to meet. This reconnaissance phase was when I had a level of ‘ignorant curiosity’, rather than having clear questions for the stakeholders.

My first internal university conference was an equity and diversity in 2008: I gained an understanding of these issues in teaching and learning in the university. Following that conference, in November, 2008, I facilitated a session on my research at the graduate education course. From 2006 to 2009 I presented at seminars in my school and in the same years to the postgraduate association annual seminars.

My first presentation directly to do with the research outside of my university was a paper on dyslexia at the first year in higher education conference in Tasmania (Distel, 2008). As a result I further understood that one of the motivators for change in higher education was the need to have higher retention rates. From networking following my first conference, I went to the *Pathways 9* conference held bi-annually, sponsored by the Australian Disability Clearinghouse on Education and Training (ADCET) in Melbourne (2008) and met with Kate Chanock. Her presentation at that conference, on assessment for people with dyslexia in
higher education, deepened my understanding of these issues. I went on to present at the next ADCET conference *Pathways 10* in Brisbane (2010) on the equity issues of my research. Keeping up my practice commitments, I attended and presented at two of the three joint community disability conferences in Brisbane (2007, 2008, 2009), where I networked with teachers and was able to form a small group project at a school. I presented an experiential workshop on social inclusion at the bi-annual equity practitioners in higher education Australasia (EPHEA) conference in Sydney (2009); In the time of the research I attended and presented at action research conferences: three national action research conferences (ALARA) and the Melbourne international action research conference (2010); attended a community learning difficulties seminar sponsored by the peak bodies for learning disability (ALD, Auspeld) where the guest speaker was Sir Jim Rose from the UK spoke in support of the initiative taken in Australia of Dyslexia Literacy Report (2010). Following my attendance and contact at the Association for Academic Language and Learning (AALL) Brisbane conference (2009), I attended a day seminar held by AALL on inclusion in higher education in Wollongong (2011).

All these activities deepened my understanding of the context, the roles of the main stakeholders and built networks through meeting with practitioners from other universities.

### 8.6.2 Procedural rigour.

A key value of procedural rigour is transparency. My starting point for the research was not so ideal because I had initially applied a process of participatory AR, which is considered to be a type of second-person approach (Reason, 2002). As numbers dwindled I evolved to a more directing/observing role with co-researchers. This was my first research living contradiction, as my initial aim to value co-researchers and listen to their stories now felt unachievable (AR1). When I had only one person attending, I let go the structure and focussed on the dialogue.

In the ethics approval (ECN 05-147), I outlined a number of issues expected to be discussed with co-researchers (Section 3.7.1.2). When revisiting this list I discovered that by the end of data collection most of the issues had been covered, particularly the identification of roles and whether learning needs and accessibility to welfare services had been met. So while I was not deliberately examining for these with co-researchers, these themes emerged. The ethics application seemed at least to represent the issues facing the diverse learners I worked with in higher education.
8.6.2.1 The value of openness, transparency, trust and rapport.

Transparency was demonstrated when directly working either with the group or at individual meetings. These meetings always included building rapport, reflective practices and background information on listening and learning issues which were either presently experienced or in childhood. An example of my feedback to participants following the initial information meeting at Association of Community Education (ACE) shows these qualities (Appendix 4).

Openness and transparency were articulated in the goals set in the ethics document, for the meetings to “further develop the collaborative spirit, which is expected to deepen over time. Reflective practices, feedback, and group-negotiated activities between sessions will become part of the group culture” (ECN 05-147). A collaborative spirit most certainly deepened in the processes for two of the individuals (Ma and Supa). This was evidenced by the level of trust and rapport that developed as our roles merged and we became co-researchers rather than facilitator researcher. The student role was background and the research became a mutual endeavour. This was helped by familiarity, as the meetings carried over nearly three years. Both valued the help, as expressed in their feedback. Although with one co-researcher, action between meetings was not forthcoming, rapport was high and I accepted that action in any sphere was limited in part because of her health issue. The actions that happened in meetings were often being carried into their work and life. At different times co-researchers helped my reflective processes of knowledge building, whereas the meetings with Gm over the shortest length of time – four months – were different. Rapport developed because of my practice knowledge of dyslexia and led to facilitating learning processes appropriate for her level of stress. As a result this meant that she began to reflect on her conflict and take back control of her writing processes.

8.6.3 Interpretive rigour.

I constructed the analysis using an extended theoretical framework starting with auditory processing based on particular theories, affect regulation and learning theories (Chapter 3) The methodological framework started with PAR and developed to self-study AR, adapting the Listening Guide framework (Gilligan, 2003) to underpin my values and drive the interpretation of the data. Table 8.2 describes the features of the interpretive rigour and provides examples.
### Table 8.2 Interpretive rigour.

<table>
<thead>
<tr>
<th>Criteria</th>
<th>When and where?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Multiple methods of validation</td>
<td>Multiple opinion of a featured prose ‘I was angry’ (Section 5.2.1.1)</td>
</tr>
<tr>
<td>Theoretical framework</td>
<td>Sound discrimination Ph (Section 5.3.3)</td>
</tr>
<tr>
<td></td>
<td>Self-regulation and laterality Jas (Section 5.1.2.2)</td>
</tr>
<tr>
<td></td>
<td>Listening Gm (Section 4.1.1.1.1)</td>
</tr>
<tr>
<td></td>
<td>Boxes 1-5 (Sections 4.3.1 to 4.4)</td>
</tr>
<tr>
<td>Extended triangulation</td>
<td>Obtaining feedback from two independent CFs using the same data (Section 7.4.3.1.2).</td>
</tr>
<tr>
<td>Identifying negative feelings through I-poems</td>
<td>‘My Perfect Example’ Gst (Section 5.2.3.5)</td>
</tr>
<tr>
<td></td>
<td>Anxiety Supa (Section 6.3.5.7)</td>
</tr>
<tr>
<td></td>
<td>The Vipassana experience Supa (Section 6.3.5.1).</td>
</tr>
<tr>
<td>Feedback from critical friends on my self-reflexivity</td>
<td>Used to deepen understanding of new concepts I was developing through practice e.g. reflexivity (Section 7.4.3.1.3).</td>
</tr>
<tr>
<td>Teaching and learning strategies</td>
<td>Mind mapping Ph (Section 5.3.1)</td>
</tr>
<tr>
<td></td>
<td>Creative writing Gm (Section 4.4.2.1)</td>
</tr>
<tr>
<td></td>
<td>Reading aloud Ph (Section 5.3.8)</td>
</tr>
<tr>
<td></td>
<td>Use of technology Ph (Section 5.3.7)</td>
</tr>
<tr>
<td></td>
<td>Reflective conversations Gm (Section 4.5.2.2.1)</td>
</tr>
<tr>
<td>Using my self-reflexive processes as data</td>
<td>My construction of dyslexia using a holistic interpretation (Section 7.4.3.1.1).</td>
</tr>
<tr>
<td>My stories, metaphor and drawings from life experience and practice</td>
<td>Used as illustrations to give understanding e.g. affect regulation: ‘The dog has a bone’ (Section 5.3.9.3) The ‘Biggles’ story (Section 4.3.3)</td>
</tr>
<tr>
<td>Meta-reflections in practice</td>
<td>Co-researchers: Various topics</td>
</tr>
<tr>
<td></td>
<td>Gm (Section 4.6.6.1)</td>
</tr>
<tr>
<td></td>
<td>Gst (Section 5.2.3.3)</td>
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<tr>
<td></td>
<td>Ph (Section 5.3.1.4)</td>
</tr>
<tr>
<td></td>
<td>Supa (Section 6.3.9)</td>
</tr>
<tr>
<td></td>
<td>Kay: Meta-reflections from critical friends (Section 7.4.3.1.2)</td>
</tr>
</tbody>
</table>

### 8.6.4 Limitations of the research.

The way I applied PAR in the first AR cycle in the community and in higher education may not have been the most suitable way to encourage people to come forward to explore the
invisible hardly discussed label of dyslexia. The first meeting was semi-formal and the planned structure aimed to develop an understanding of the process of action research. We planned our agenda each meeting. I suggested exercises in pairs and then to learn reflection by first reflecting in a micro-group (two people) and then to come back together to do the same reflections but now on the macro level of the whole group. This step-by-step process, a seemingly safe structure, was challenging for the most vulnerable of the co-researchers on that first night. One participant found that to speak and reflect back to the whole group was daunting; it triggered memories of struggles with early childhood learning encounters. The individual issues that arose in that first meeting were aired. In the start-up, participant information had been read and discussed. I learned that night that this participant had previously experienced a mental breakdown and she was on her second attempt at university. In hindsight that person required a face-to-face interview to help her to become comfortable with the process of working in a group. She came to one other meeting before she left her course and the university. Although I did experiential exercises in that first AR1 meeting, I did not allow enough time to build the group from their perspective. I would use an SSAR approach with any further action research I undertook, as I now understand that exclusion is subtle. It is important to value first the development of the relationship and then to work towards the bigger notions of the institutional habitus (Pearce, 2005) and inclusivity.

In a future project when the intention is to work in groups, I would build in a longer reconnaissance phase (Hill, 2008), and use the initial research questions more as a guide to establish the co-researchers’ goals and enhance motivation. I would plan to meet with all potential participants individually or in small group meetings, to ascertain their issues, and to establish a cooperative habitus before starting any action learning cycles. I would use semi-structured interviews and focus on mutual learning needs and their perceptions of their educational experiences of each.

If potential co-researchers were new to higher education, then more time would be spent exploring their aspirations and finding out how a supportive learning group could be of value to them. Following the interviews, I would collate the information, send out a report to the people interviewed and call an online meeting to discuss the outcomes and plan further meetings based on group needs. Finally, the length of time and changing nature of my research made it difficult to be as orderly with my notes and records as I would have liked.
8.7 Insights and Implications

A most important direction to come from the research is the need for institution-wide awareness and understanding of the access issues of diverse learners, so that they can be less marginalised during their learning experience. Another direction is to develop engagement in a socially, collaborative way to counterbalance the perception and practices of the deficit model approach. In higher education some practices have been exclusionary, such as Supa not being able to access resources available to others in her cohort, because she was not Indigenous. By implication, an inclusionary policy requires approaches that reduce the perception of individual difference and diversity and that address entrenched social and institutional excluding practices. Examples are found in the early learning stories of Gm, for example the Periodic Tables test (Section 4.2.1.2), and in Gst’s experience of undergraduate studies (Section 5.2.4).

Despite the Federal Disability Discrimination Act (DDA) being twenty years in existence (1992), with policies offering funding for equity groups, the exclusion of the invisible ‘others’ is still present in both higher education and the community. For example, in the community, a dyslexic advocate sought to meet the Victorian Premier to discuss legislative changes that he had successfully advocated for and that had been implemented by the NSW government. In this ‘high’ office, he experienced humiliation by the Premier’s staff, who insisted he write a letter to arrange an appointment with the Premier and refused to help him write it. He took this discriminatory action to the High Court and had the satisfaction of an apology from the department (Nolan, 2010). This example is evidence of continuing discriminatory practices, even in a government department. One co-researcher had a similar experience when having an interview for a job (Gm); then AD, a potential co-researcher in AR1 – was also humiliated by the lack of belief by lecturers that she had dyslexia because she ‘was so articulate’ (Meeting. September 2006). Humiliation and shame, characteristic of a diverse learner’s journey, often exist in the background in a society that marginalises invisible disabilities that are socially constructed (Driedger & Owen, 2008). It is time for the society, through educational institutions, to be more inclusive and to be aware of the invisibility of such individuals and groupings.

Some progress has been made since the Australian Dyslexia Report (Coltheart, et al., 2010), with its raft of recommendations to identify and develop a dyslexic profile in Australia, was sent to the Government Minister for Disability, Bill Shorten in 2010. A new not-for-profit association has formed in Australia. The Australian Dyslexia Association (ADA) has taken up a political activist role in the education of teachers (2010) and is affiliated with the United
States International Dyslexia Association (IDA). Importantly, one state education department (Queensland, Australia) now has a fact sheet issued on dyslexia.

8.7.2 A limitation of social communication and inclusion.

As humans intrinsically learn through relating with and listening to each other, the ability to listen and communicate effectively is an essential skill that needs to be understood in relation to affect regulation, health and learning. The assumption is that both students and staff have naturally developed social communication skills; however, when auditory processing issues are compromised, these natural learning pathways are decreased.

Minority equity groupings will tend to have issues regarding social isolation; coming from diverse backgrounds, cultures and incomes, many are not book people, but rather practical hands-on learners. If learning literacy is limited, learning style may be inflexible, and new ideas and practices will become difficult and stressful despite high intelligence. Stress is subtle and can build up in new learning environments, particularly if there are no spaces and structures to help social communication.

An understanding of affect regulation and social communication becomes essential in an environment developing new curricula involving a balance model of learning: one that embraces both student-centred and direct teaching and learning methods. A student who has a visual strength but overuses it by sitting at a computer for hours and hours may compromise the development of balance in the sensory system. An over-dependence on visual processing, where the consequence in the long term is some form of visual stress, leads on to other health issues (Section 5.2.2.2.1). On the other hand, improved hemispheric balance occurs through using body and voice enhancement, for example in discussion groups. This allows and values feeling and expression, as well as body mindfulness practices which can improve the affect-regulation balance.

Listening closely to the extremes in voice tonality, which can be expressed as an under- or overuse of voice, can detect this stress indicator. Co-researchers Ma and Ph tended to underuse their voice, being more quietly spoken, while “the merciless questioners” Gm and La both overused their voice and both types of voice behaviour resulted in limitations in social communication; a restricted range of social voice parallels with less ability to take in information auditorily without being overwhelmed. Both underuse and overuse of the voice are examples which indicate a receptive listening issue, and invariably could affect aspects of literacy development and lead to stress building up.
It was from experiencing extremes of voice use with co-researchers that I understood why my research has significance. As inclusion and diversity become central in equity policy in higher education, there is a natural swing towards learner-centred and relational methods becoming more acceptable values of teaching and learning. The co-researchers were living examples of students with invisible disabilities who experienced non-inclusive inequitable practices in their learning environments. For example, learners experienced such behaviours from university staff, from silence when an obvious learning issue was present, to hostility and avoidance (Supa, Gm and Ma). Learning difficulties, particularly dyslexia, and consequential mental health issues are hidden, and illusive. Through ignorance, a lack of engagement can develop that can accelerate deeper health issues, forcing the diverse learner to become a categorised disability within the equity group of students.

8.7.3 Suggested ways forward for higher education.

8.7.3.1 Develop diversity, inclusion and difference in university

8.7.3.1.1 The admissions processes.

University admission procedures that can clarify a student’s equity status could be improved and need to be able to initiate discussions about learning difference where relevant. Most universities require that students reach the disability services by self-identification (Reupert, Hemmings, & Connors, 2010). This may be initially done on entry by ticking an equity status box that is used for statistical purposes. If I was just commencing tertiary studies, I would expect that if I ticked a box there would be some official follow-up from the unit involved, be it disability, Indigenous or equity concerns. One of the co-researchers expected to have a follow-up conversation following her ticking the disability box, but there was none. Obtaining help occurs through a self-referral system. Her formal contact with the disability office was when she obtained a disability parking sticker. Towards the end of her degree she felt the need for writing help. The disability service offered her a dyslexic screening test, without inviting her to talk about her issues.

8.7.3.1.2 A whole systems approach.

To improve such a person’s experience, a more proactive approach on entry invites opportunity to bring questions of inclusion and difference to all students in a non-threatening way. A whole systems approach for teachers engaging with students is needed, rather than the student services passively waiting until a crisis in health has occurred, when the student would be at their most vulnerable and disempowered by their situation. Social inclusion
demands a more proactive approach. Understanding of a social model of disability or a more social ecological model would counteract this deficit model thinking. For example, a mature-age undergraduate working mother from a single household could take on university study. It is possible she may have learning issues, but would never consider herself as having a learning disability. Such a person would be unlikely to see the relevance of a voluntary orientation activity unless it was part of her study. The orientation activity envisaged would have an inclusive agenda without labelling, so that those who otherwise may become isolated and slip through the net are supported by a cohort with the potential to take empowering action and support each other to have their learning and health needs met through negotiation with university Schools and services.

8.7.3.1.3 Recognising prior learning and identity issues.

While information on prior learning and individual attributes is part of the higher education admission process, in reality that information is not taken into consideration for the development of proactive learning and teaching strategies. However, these factors are vital for inclusion approaches, in order to develop engagement through common experience, and to enhance and develop students’ self-understanding of how they learn best. An example would be embedding inclusive practices into an introductory course for student researchers. The fact that some postgraduate research courses do not have coursework may need consideration. My suggestion is that university research training units could consider that as part of their orientation. One Australian project had a 40-hour academic preparation program for international postgraduate students that explored the role of researchers using critical reflective practices. The students were empowered through learning activities which fine-tuned their academic literacy and their research interests, and which encouraged personal responsibility for research and learning (Jones, Farrell, & Goldsmith, 2009). Although targeting international students, this project could easily be applied to other groups.

Another suggestion for postgraduate students is a formal collaborative where writing circles (McKeowen, 2011) support learning together. This could lead to self-supporting validation groups as advocated and practiced by McNiff and Whitehead (2006). This strategy is an excellent way to create an environment of support, reflection and critical thinking and to support development of student dialogue and postdoctoral dialogue (McDonagh, et al., 2011). Such experience for students could be a way of developing a cohort of peer-learning facilitators within a discipline.
Learning support: Providing appropriate technology for diverse learners.

*Dragon Speak*, an example of appropriate technology, is a computer-based, voice-to-text package where the computer responds to verbal instruction. This can potentially enhance the efficiency of diverse learners; however, these learners have to know the technology and to know that help is available if they ask. Specialised training in technologies like this could be particularly important should a higher education student require help when an underlying disability has become apparent. An example would be someone with an acknowledged chronic health issue disability, who then manifests a language learning difficulty.

The importance of staff having professional communication skills, which should include knowledge of learning styles, voice and auditory processing, would enable them to recognise the needs of the student and to offer appropriate assistance. Of interest is that a later definition in the DSM (IV)-TR (First, 2000, n.p.) showed the need for auditory processing and phonics, was revealed in the data chapters for this research. “In individuals with reading disorder [which has also been called ‘dyslexia’], oral reading is characterized by distortions, substitutions, or omissions; both oral and silent reading are characterized by slowness and errors in comprehension”. As an example, one of the co-researchers described doing a distance degree course that involved listening to multiple audio lectures. Whenever she turned on the audios she would fall asleep despite her best intentions. She indicated the monotonous voice of the lecturer as the reason. In her youth, she was labelled as dyslexic. Through our discussions and experiences she discovered the importance of auditory visual integration. Her ongoing listening language issues meant that it was physiologically difficult for her to listen to a monotonous voice for any length of time, with the consequence that she was unable to even begin to gain understanding of the material. However, using *Brain Boy*, she became aware of how listening affects cognitive processing and communication ability, and that this was connected to her increasing level of stress, which was seriously impairing her auditory ability. Once she understood what was happening, she was able to take action and the situation improved. In this case, working with someone who understood her learning problem and was able to suggest appropriate intervention was the key to re-empowering this learner.

This story has implications for how to select the most appropriate solutions or technologies for diverse learners. Commonly, people do not persist with voice recognition programs where the focus is to train their own voice to perform accurate word processing. People with dyslexia have poor auditory processing, which affects receptive listening and the mastery of any literacy programs (Leopold, 2009), whereas expressive listening can be difficult because of limited voice ear control (Malloch & Trevarthen, 2009). It is commonly thought by
lecturers and members of the community that if a person speaks well, there is no issue with auditory processing (see page 159 section AD); however, research by Malloch and Trevarthen (2009) suggests that this depends on their audio laterality. If the person has little or no right ear advantage (REA), when there is too much sound input, the ear is under stress and will revert to left ear advantage (Malloch & Trevarthen, 2009). This will greatly reduce the efficiency of any auditory-based learning (Tomatis, 1978). In other words, whether or not the person has a dominant preference for either auditory or visual learning, it is the failure of these two modes to integrate which is the source of their learning issue (Gravel, 2004).

Most learners have some level of diverse learning style where the underlying issue is auditory visual integration or laterality (left right brain) imbalance (Maartensson, 2007b). In summing up, the understanding of this dynamic theory means having knowledge to understand the learner’s predominant perceptual learning mode; this is central to helping diverse learners function successfully. This is a critical factor that higher education support services should be challenged to embrace.

8.7.3.1.5 Integrate existing good practice for learning support.

A well-recognised model that brings together some of the approaches discussed above is now in place at Victoria University in Australia (Best & Supple, 2011). Although driven by collaborative processes over a number of years and developed to suit their particular context and perceived needs, this approach can be replicated with collaborative facilitation across disciplinary areas. This model used a variety of peer-to-peer group work mentoring strategies, ranging from peer assisted tutorials on an integrated approach to independently operating campus-wide specific units and courses. The project was cost effective. For example, they had only two quality experienced staff to facilitate eighty-seven mentors, who then directly worked with 1000 students. Such numbers could never be reached by one-to-one consultations (Best & Supple, 2011). The philosophy of the project included valuing students’ prior knowledge, which counteracted assumptions of student ‘deficits’ and a focus on the learning process. It had a positive impact on engagement and helped the student to become immersed in their higher education cultural identity and discipline. Such a model would make the transition to having academic literacy embedded in curriculum a possible outcome.

Such a project could be envisaged as a small-scale action inquiry project and could be included as an element within converged delivery projects. Such an inquiry would seek to answer the question: How could generic language competencies be improved in the FYE by using peer learning groups? If that question was answered positively, a further evaluative
question would be: Could this project be useful as a stand-alone project? Such an action research project could make available some of the generic language competency work that is being undertaken in the learning centres. A successful cohort of students in such a project could begin to expand into student peer support initiatives, if it were organised as a trial disciplinary research project with collaboration between learning and teaching, and equity. This would change the balance of time given to individuals as “off the street help” in learning centres, and would broaden their focus to the expertise needed to support such an initiative. Importantly, as some of the diverse learners’ needs become embedded in such a project, they may require less formal student support on the generic level. In the situation of initiating peer support within a FYE ‘trial’ program which has the purpose of maximising engagement and connection to staff, student learning centres would be able to take a more proactive role in the structuring of peer learning support developments across the university.

A learning centre in New Zealand is trialling a novel approach to note taking and time management issues experienced by first year students. They have set up same-year similar-ability peer learning groups in the Health Sciences (van der Meer & Scott, 2008). It involves electronic logistical support, and resourcing of groups by teaching collaborative work skills. Models of how to work with notes and time management involve past students who had previously engaged in peer learning (van der Meer & Scott, 2008).

8.7.3.2 Teaching support.

8.7.3.2.1 Australian examples of inclusive practices.

An early example of inclusive curriculum was that defined by the University of Western Australia (UWA), following the work at Victoria University. They had simple checklists which covered five areas: curriculum design, content, delivery, assessment and duty of care, as well as a parallel broader project on student services which developed into a diversity audit (Krause, et al., 2005). This self-assessment tool aimed to assess whether services are inclusive of all groups. I believe these simple tools would be a good starting point for higher education staff to develop an understanding of this group and of the needs of these marginalised cohorts of equity students.

In an Australian study that interviewed nine higher education lecturers who taught inclusive education to trainee teachers, the researchers concluded there was “an acute lack of insight regarding the broader dimensions of inclusive practice” (Reupert, et al., 2010, p. 130). Lecturers showed a narrow focus and depicted ad hoc ways of dealing with individual students. The concern was that these lecturers were approached as potential role models for
inclusive teaching. They were struggling with the role and talked a lot about the many barriers that stop authentic inclusive practices. The researchers concluded that all practices across all levels in universities had a need for training in inclusive practices that best accommodate the needs of all students (Reupert et al., 2010).

a) Recommendation: Collaborative action research projects to address diversity and inclusion issues.

I perceive a need for two projects to identify strategies to improve learning: one which addresses teacher training in inclusion and relational strategies, and a second one which aims to collaborate across disciplines with students with diverse learning needs.

The first project would address training in inclusion and relationship strategies for lecturers and professional staff who are developing inclusive curricula within their institution. Then when they have a level of competency, they could act as nominated catalysts for change across disciplines, in relation to other staff developing diverse learning strategies in their own curriculum.

The second project would follow the research of Herrington and French (2008), which is an exemplar of how to create relational inclusive practices with real outcomes for institutions and students. That project started at one university and led to collaboration across three British universities, working with students with dyslexia, to find what and how the university could help their learning needs.

Another example of collaborative AR which would be of value to the whole institution is the website initiated by David Pollak (2004) at De Montford University which serves as a place for information on inclusive practices for all brain or cognitive learning issues. The expression ‘neuro-diversity’ was suggested to indicate an inclusive way of acknowledging and including all diverse students, whether people with dyslexia, tourettes, asperger, dyspraxia or other invisible disabilities (DeMontford.University, 2004). This university became a leader in inclusive practices and gave opportunities for both students and staff to acknowledge their issues in a safe, positive, life-enhancing way. Following the support of a related website initiative, a conference and a book were published: compilation of best-practice papers from UK University practitioners who were working as tutors to support dyslexic students (Pollak, 2009).

b). Recommendation: an Australia wide-inclusive practices higher education website.

In Australia there is a website addressing practice issues on inclusion for secondary teachers, but that is taking into account the broader institutional issues envisaged from the UK. I would
expect a similar project to be initiated at one university. It would require reconnaissance to find a group of interested stakeholders who would first undertake a needs analysis to establish where such a project would locate in a university. Such possible departments could be in student services, disability, equity, teaching and learning, or in a disciplinary school. In keeping with the principles of inclusivity, the stakeholder group would make that decision.

8.7.3.2.2 Actioning ‘Good Practice Principles’ for language support.

A report by the Australian Universities Quality Agency (AUQA) (2009) offered ten good practice principles (GPP). Whilst acknowledging the appropriateness of the GPP, some practitioners were concerned about how to achieve these principles, as they mostly appeared to be simply common sense or broad ‘motherhood’ statements (Harper, Prentice, & Wilson, 2011, p. 40). The example given is principle 5, which states: “English language proficiency and communication skills are important graduate attributes for all students” (Harper, et al., 2011, p. 40).

Another critique of the inherent tension in these GPPs was the simplicity of how English language proficiency was defined: making use of the English language to communicate meaning both in spoken and written contexts while completing university studies (AUQA, 2009). This suggests the placing of language in a communicative paradigm that is developmental by nature, rather than the commonly held view of language as a formal system with rules of grammar. Thus language has to be applied to make meaning in a variety of contexts; the language of academic papers, for example, is quite different to the language of a presentation to a professional audience.

The Australian Association for Language and Learning (AALL) sponsored a symposium in Western Australia that endeavoured to explore these GGPs. It raised the following questions: What is good enough English? How to best help language development? and What constitutes a sufficiently proficient level of language, for example, for employment? All these questions need answering in dialogical processes in universities to bring about the desired change (Barrett-Lennard, Dunworth, & Harris, 2011).

From the exploration of the 10 GPP at the symposium, only two were perceived as easily actionable:

Principle 6. Development of English language proficiency is integrated with curriculum design, assessment practices and course delivery through a variety of methods.
Principle 7. Students’ English language development needs are diagnosed early in their studies and addressed, with ongoing opportunities for self-assessment (Harper, et al., 2011, p. 38).

The report used proficiency (Principle 3 and 6) and competency (Principle 1) (2009) interchangeably, which suggested that both could be quantified. But “both these words conjured up a reductionist view that this cohort is either proficient or they are not” (Harper, et al., 2011, p. 40). Next the word ‘diagnosed’ was used in Principle 7, but it represents “a reductionist pathological analogy” (Harper, et al., 2011, p. 40), suggesting that the students’ English language needs should be “diagnosed… identify some students as “literacy-needy” (Devereaux & Wilson, 2008, p.1) and “stream them into some kind of remedial support” (Harper, et al., 2011, p. 40).

Arguing from the English language proficiency point of view convinced me that the complexity behind these seemingly simple ten GPP needed further study by those involved in each university, if there was going to be any real consistency in how to proceed to embed language in all courses. The pathological analogy created a philosophical tension in the sense of inclusion and exclusion of students from an already increasingly diverse cohort. Murray (2010) identified three implied constructs of language competencies in language proficiency as being “generic, discipline specific and professional communication skills” (as cited in Harper, et al., 2011, p. 41).

This model by Harper et al. (2011) helped me understand the process one of the co-researchers had experienced. She had intermittent help on the level of generic language learning in the support unit and from friends. Alternatively, my facilitation was on the professional communication level, in particular the development of her reflective practices. In her last year of undergraduate study she experienced disciplinary literacy from one academic, who used an interactive learning style with her. She was deeply excited by this interaction, as she had recognised an academic who could fully understand her learning and writing, and this gave her more confidence to “soldier on”.

It is essential that students with diverse learning styles receive assistance in all academic language literacies. Unfortunately, I found this to be a rare skill in the teachers the co-researchers had experienced. When teachers can clearly promulgate language beyond the generic to a scaffolding of academic literacy with dyslexic students, they can change the course of those students’ higher education experience. An example of a scaffolding approach is the text pattern intervention (Ihle & Deshler, 2011). At the Pathways 10 conference (section 8.6.1.1), I attended a presentation by a postgraduate student with dyslexia who had
experienced such professional help throughout her study from Dr Kate Chanock, Associate Professor in the Academic Language and Learning Unit (ALL) at Latrobe University. It was inspirational to see the progress of this student, and I understood that the co-researchers with dyslexia in my research needed a more rigorous approach to academic literacy than they were receiving.

8.7.3.2.3 Developing and actualising graduate attributes.
Graduate attributes have become an increasingly important focus of higher education. No longer is mere intellectual knowledge sufficient: acquisition of a broad range of higher level life skills is expected as well. When discussing the development of curriculum, it is important that changes be based on the institution’s statement of graduate attributes. The actual curriculum then drives the development of the attributes, and student engagement reflects their experience of that curriculum (Marsh and Willis, 2007, in Bosanquet, et al., 2011). The graduate attributes stated in the Strategic Plan of Southern Cross University (2011a) are: “Intellectual rigour… creativity…ethical understanding… command of an area of knowledge … and lifelong learning” (p. 1).

a) Effective communication and social skills
SCU has the slogan A new way to think. What was the old way to think? What does it mean in relation to the attributes above? How are they embedded in the slogan? What are missing in the attributes are social inclusion, collaboration and diversity. These are important, as “the link between graduate attributes and social inclusion has not been well studied [and] in Australia policies generally reflect those found in social inclusion” (Bosanquet, et al., 2011, p. A73).

8.7.3.2.4 Effective communication and social skills: cultural awareness.
Integral to language proficiency and effective communication skills is the development of both active voice and active listening methods need to be part of the curriculum, then proficiency in meta-cognitive processes such as reflection on all aspects of collaborative methods can become possible. This suggests that social inclusion principles need to be high on the agenda for graduate attributes in our higher education institutions. The report in 2008 on social inclusion exclusion for the Social Inclusion Unit of the Federal government suggested that social inclusion must embrace an international perspective; have a commitment to equity and social justice, and have a sense of social responsibility and participation in the community (Hayes, Gray, & Edwards, 2008).
A comparative analysis of the last fifteen years of graduate attributes across the majority of Australian higher education institutes was reviewed. It studied policy statements in order to look at the values and beliefs embedded in their statements (Bosanquet, et al., 2011). Three periods of time were tracked (1996 to 2000, 2001 to 2005 and 2006 to 2009). The two graduate attributes which have increasingly been incorporated into policy papers are collaboration and valuing diversity had increased to 72% of universities by the 2006 to 2010 period (Bosanquet, et al., 2011). In practice there has been a major shift in language, away from individual exclusion, towards a sense of community (Bosanquet, et al., 2011).

How then does a rural and regional university work with these needs?

The SCU Learning and Teaching Green Paper (2011b) proposed valuing of community-engaged learning to activate students to “A new way to think”, the slogan of SCU. This would imply providing sustainable, diverse learning experiences through a range of methods, particularly group work, as well as thinking opportunities. Social inclusion and engagement essentially are addressing a learner-centred approach.

This university recognised that there was not a well-developed policy on graduate attributes and their step to rectify the problem was to distribute a discussion paper for comment (April 2012). The paper outlined four broad purposes for a policy of graduate attributes:

- To give a clear statement of what SCU values as outcomes for learning
- To prepare to life beyond university
- To frame course curricula and learning outcomes
- To comply with agreed national standards (Southern Cross University, 2012b).

The discussion paper centred on whether to embed the graduate attributes into existing threshold learning outcomes in disciplinary programs. I could not fully understand this line of argument as I was unfamiliar with the systems being discussed. It seemed to me that to support accountability there should include both curriculum and service practices.

The paper also proposed an additional graduate attribute: “Cultural Awareness – a global world view encompassing a cosmopolitan outlook as well as local perspective on social and cultural issues, together with an informed respect for cultural and Indigenous identity” (Southern Cross University, 2012b). This attribute goes some way to address a more global worldview but leaves a lot to be questioned. For example, what is meant by “informed respect for cultural and Indigenous identity?” How would it be developed in the student population? Inclusive practice means more discussion and involvement may be needed with all stakeholders before it can become an actionable attribute.
What I did not see in the paper was a clear valuing of student diversity and equity issues or of collaborative work and social justice, which the majority of universities (72%) have already embraced in their graduate attributes (Bosanquet, et al., 2011). If graduate attributes are considered secondary to threshold learning outcomes, as the discussion paper suggests, then how can the stated attributes be modified to incorporate the above values?

8.7.3.2.5 Peer-to-peer learning to improve engagement.

A new Journal of Peer Learning published by the University of Wollongong (2008) acknowledged two directions in the Australasia university context. Some Australian universities have put in place models such as peer assisted learning (PAL) and peer assisted study sessions (PASS) (University of Western Australia; Macquarie University). The models mainly help students develop an understanding of their university culture and how learning is transferable and developmental. A recent argument put forward in that Journal was to develop more emphasis on empowerment and critical thinking (Couchman, 2008) through the development of multi-literacy within the Framework of Supplemental Instruction (SI). The argument looks at understanding the dynamics of the class tutor role and the peer tutor – the potential power issues; the issue of self-disclosure and whether leaders are paid or voluntary (Outhred & Chester, 2010).

There is an opportunity for universities that already have a cohort of students involved in a mentoring program to move such a core group from a peer support model to develop as supplemental instruction (SI) leaders. Such student involvement could further strengthen the understanding of graduate attributes and leadership skills and could be incorporated into the Converged Delivery project (Southern.Cross.University, 2010).

8.7.3.2.6 Supplemental Instruction Leadership (SIL).

The idea of supplemental instruction leadership for First Year (FY) students is to construct a developmental pathway by offering supplemental instruction (SI) training for any student wanting to progress their learning by learning facilitation in group learning situations. This approach was first introduced in the US over 30 years ago as a collaborative process (Arendale, 2010). The early motivation for such a system was to halt the high failure rates (over 30%) in traditional courses. Since that start, SIL has adapted to changing contexts. For example, it has been used in distant education, across whole institutions in teaching-learning centres and within a themed learning community modular program, as well as in other educational systems of development (Couchman, 2008). All these different learning contexts did not change the structure of those initial generic courses. The main principle of the
supplemental instruction (SI) was a “faculty led initiative which operated out of class, with trained student facilitators in both content and learning skills mastery. They were also trained in peer collaborative learning methods, required to attend all lectures and read all course material but have no part in assessment procedures” (Couchman, 2008, p. 80).

The inclusivity of a voluntary attendance program such as outlined above has meant a proactive stance, with the students gaining understanding of what to learn, and the how of learning. It was perceived as a remedial approach, and thus had difficulty in sometimes getting sufficient numbers (Arendale, 2010).

Innovations in and understanding of literacy and literacy teaching have occurred in the last twenty years, but the SI approach has not caught up. It needs to have a critical theoretical base, as it does not yet have sufficient theoretical background (Couchman, 2009). For example, a voluntary trial project using a web-based social learning environment to engage with academic skills; in a peer-to-peer format; raised the question of how active cooperative learning can happen under a voluntary system. One solution offered by Couchman (2008) would be to have the SIL model embedded as a discipline-based socialisation model including “a theoretical base with research undertaken in what has become known as a pedagogy of multi-literacies based on new social practice definitions of literacy and ‘literacies’” (Lea and Stierer, 2000).

With increasingly diverse groups of students, policies of engagement, and student-centredness, as well as vocational training opportunities to work in groups and online in peer groups, it seems timely for discussions on SIL to begin in earnest across university campuses, not just in small projects.

4. Recommendation: Universities develop a core group of students to become supplemental instruction leaders (SILs).

Such a core group of students could become either disciplinary (SILs in their schools), developing other facilitative roles, or participate in a dedicated PASS program. For example, a disciplinary school could use this context to explore how graduate attributes pertain to their specialty. Within such a framework, the use of learning methods would further develop all learning and career aspirations. Overall, such involvement would mean both educators and students begin to understand the complexity of their individual differences and diversity.
8.7.3.3 Possible Equity support initiatives.

8.7.3.3.1 Invisibility of mature-age women as diverse learners in higher education.

The Council of Australian Postgraduate Associations (CAPA) recently called for acknowledgement of the mature-age postgraduate group, in the age range of 35 to 60, as a category (quoted in Woodward, 2012). This group is not statistically acknowledged or provided for in equity funding in higher education in Australia (Drury, et al., 2008a). This would bring more visibility and broaden the scope of equity policy; interest in funding research could follow.

The co-researchers in my study were all in the mature-age range that Drury et al. (2008b) discuss. Although these co-researchers showed concurrent health and learning issues, they have clarity and wisdom from previous experiences and are motivated learners. I believe mature-age postgraduate students make an ideal group to form a cohort and develop action to help further their welfare during study.

8.7.3.3.2 Establish a cross campus Diverse Learning Research Coordinator.

A Diverse Learning Coordinator role could be an essential part of a local equity policy to lead changes to help diverse learners within the university. While some institutions have equity liaison people, their role reflects an emphasis on legalities. This role could also be proactive and research based. The work would be to liaise with students, student services, equity, learning and teaching in relation to diverse learners. Initially the role could collate and disseminate information about the existing good practices on all levels within the university and local community, and also act to develop a network of staff and students. The aim would be needs identification, and to recommend ways to further extend and improve social inclusion options. For example, higher education facilitated support groups could be established for diverse learners across the range of disciplines. The aim of these groups would be to generate understanding of their learning and health issues, and of the barriers they face, as well as considering practical support strategies.

Why is this important? It is inevitable that, as funding follows the government policy (Bradley, et al., 2008), the numbers of LSE students, international students and other diverse learners will now increase. As Martin (2007) pointed out, the problem of improving equity access to these main equity groups, such as LSES, rural and isolated, has not changed significantly, despite outreach, mentoring, and other funded schemes. This suggests that any support engagement or inclusion practices may still be in a transitional phase in some
institutions. No longer should students be perceived as commodities; rather, they are individuals coming to a culture of student-centred learning (Denicolo, 1998). As teachers develop and upgrade their skills, and establish more communities of practice (Kimble, Hildreth, & Bourdon, 2008), there will be more and more accountability issues.

In this climate, there is a strong possibility that the needs of invisible disabilities and diverse learning issues will continue to be overlooked. I argue that, while this cohort may need specialised and often individualised help to succeed in reducing some of the disconnectedness, each need to be encouraged to share and be part of the group environment.

Strength is an unflagging motivation to succeed. If inclusion is taken seriously, then all involved in education will need to exercise their ability to collectively think and act and “imagine ways to move beyond boundaries, to transgress…[to] education as a practice of freedom” (hooks, 1994, p. 141).

I would hope that transgressing and ‘thinking outside the square’ could become normal practice and be more highly valued. Teachers and students alike need to become expert listeners and to develop professional communication skills, as group facilitators of inclusion who understand that “a new way to think” includes creative methodologies to facilitate empowerment and develop collaboration.

The dynamics of communicating an inner focus brings an holistic synergy of the bodymind connection. For example, if working to develop a preventative self-study strategy a question to ask those involved would be: How do I best learn? Such inner learning for students could make a difference in the flow of attrition rates as dialogue grows between student and staff. The qualities of flexibility, listening and taking action are needed in order to recognise and respond to the idiosyncratic nature of our individual learning behaviours. It is documented and acknowledged that when there is childhood or adult trauma, learning will be compromised (Atkinson, 2002).

By understanding resilience, as the bodymind’s ability to bounce back on the neurobiological level, means that affect regulation is restored to some degree following trauma. One suggested definition of resilience is: “tied to the ability to learn to live with ongoing fear and uncertainty … the ability to show positive adaptation in spite of significant life adversities and the ability to adapt to difficult and challenging life experiences (Meichenbaum, 2005, p. 4).

Resilience I believe can be viewed as a relational concept; it conveys connectedness without fear within family, schools, and community. In other words, it is a socio-cultural phenomenon that points to affect and self-regulation to understand the signs of vulnerability. Increasingly,
diverse learners become an important aspect for educators in higher education to take on board.

Although resilient individuals can become distressed, my view is that they are able to manage any negativity without becoming totally debilitated. The main work would be firstly to achieve cross-campus awareness of the learning issues for diverse learners. This would be an ongoing development process with all stakeholders involved: student services, schools, equity, teaching and learning. The aim would be to find ways to challenge cultural perceptions and habitus in order to support social justice through diversity and difference (Kift, 2009).

8.8 New directions for future research

My dream would be to undertake research that brings the needs of diverse learners more into the centre of teaching policy and practice, so that higher education institutions work more directly towards becoming an inclusive habitus.

An embodied learning curriculum is empowering, self-directed and helps to improve brain and body functioning. I envisage qualitative research based on quality listening to diverse learners as essential. Exemplary work on class and identity suggests a method within teaching (Pearce, et al., 2008).

A full involvement of participants in a mentoring project for diverse learners would address affect and self-regulation, develop resilience and improve the retention rates overall by improving the disconnected isolation that many students find themselves in. Mentoring programs in higher education have generally to date largely ignored and excluded mature-age and postgraduate students as being “too far away from the experience of first year studies” (DD, personal communication, 2012), which felt devaluing. The perception of two of my co-researchers was that this idea simply did not apply to them.

As the equity policies are opening the doors to inclusion of more minority and diverse students from rural, remote and LSE, a large social culture is emerging. There is a need for innovative ways to support and develop these students, ways that move from the dominant medical model to that of supporting a whole habitus approach for higher education.

8.9 Chapter Conclusion

Reflections on the research reveal that its intentions have been achieved, in that both the co-researchers and I came to an understanding about the educational experience for this
particular group of people. The co-researchers were supported through their learning journey by the learning actions implemented. All co-researchers successfully progressed in their studies and demonstrated high levels of resilience. There were positive outcomes for me in the self-study learning aspect of the research. My professional practice has been enhanced by a deeper understanding of self-reflexivity and the tangible and intangible aspects of social communication.

The living contradiction that emerged in the research was the different perceptions of dyslexia: mine and those of others in the community. I viewed dyslexia as ability rather than a disability. However, the dominant discourse of dyslexia as a deficit is discursively created through Australian education policy, legislation and medical diagnostic categories of learning difficulties.

The substantive theme of the research, the consequent learning stories with their emphasis on feeling (intangibles) and affect regulation meant that traumatic or negative experience was part of the reflective conversations. Some co-researchers were stressed and emotionally vulnerable. Whilst this is so, my researcher/facilitator skills, implemented during the research process, protected co-researchers from the negative effects of such conversations. Co-researchers gave feedback that the processes were helpful and contributed to their increased awareness of affect regulation.

The question of whether this research should be accepted as worthwhile is explored through the application of Kitto’s rigour criteria. The research was situated in a regional/rural university and the co-researchers were predominantly postgraduate students of mature-age. It is possible that the learning stories and outcomes of the research could resonate with a similar cohort of students in a regional and rural university in Australia.

The research has implications for changing the educational habitus to one of support, in which the image of people with dyslexia and diverse learning needs is reconstructed in order to balance the present deficit model. There are implication for the more comprehensive development and implementation of diverse, difference and inclusive policies, curricula development, and teacher training and practices. In order to create a whole-of-university approach, commitment is required in the following areas: positive changes in admission and orientation procedures; recognition of prior learning and identity; provision of learning support through appropriate technology; human and financial resources; different models of peer support; attention to graduate attributes; cultural awareness; and new equity support procedures.
My commitment to the future is to continue my work to help diverse learners come to new understanding of their affect regulation and to help transform their perceptions of learning and health. The knowledge I have gained from this experience could open up new creative projects in higher education social cultural practice.

8.10 Thesis Statement

This AR/SSAR project generated insights into the learning journey for higher education students with diverse learning and, for some, concurrent health problems. The relationship between diverse learning and health was explored and actions taken to decrease the impact that ill health and learning have on each other within the habitus of higher education. The co-researchers were living examples of students with invisible disabilities, the Elusive Other, who experienced non-inclusive, inequitable practices in their learning environments. In a habitus where there is a lack of inclusivity and recognition of diversity and difference, deeper health issues can accelerate.

Critical to a reduction of student ill health and academic vulnerability are improved auditory processes, effective self and affect regulation, and effective student support, in the form of appropriate higher education policy and practices that support diversity and inclusivity.

Regardless of the difficulty of the learning journey, all co-researchers benefitted from participating in the research. They spoke of increased awareness and new knowledge of their learning and health issues. All co-researchers progressed successfully in their course of study, due in part to the supportive research practices, coupled with their resilience and determination to succeed.

The self-reflexive aspects of the research have enhanced my understanding of and professional practice with people with dyslexia and diverse learning.
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SCU Action Research Cycle 1(AR1):
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Auditory Processing: How can listening be identified?
Are these Characteristics of Dyslexia?
The core Reflective Process: Learning as a Child/Stories about learning.
aspect of your participation in this research, you may contact the HREC through the Ethics Complaints Officer, Ms Suzie
Kelly, (telephone (02) 6628 9139, fax (02) 6628 9145, email: skelly1@scu.edu.au).
Any complaint you make will be treated in confidence and investigated, and you will be informed of the outcome.

Proposed dates for the research group meetings
August- December 2006

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List of Counsellors

The purpose of counselling is to provide debriefing, if required, following interviews that
may cause emotional upset. The following is a list of free counselling services:

Free Counselling Services:

 Lifeline: 1314 (all areas)

 Lifeline Face-to-Face Counselling: (02) 6622 4133 (during office hours)

 Northern Rivers Area Health Service: Free Counselling Services available at:
 Lismore: (02) 6620 2967 Evans Head: (02) 6682 4800
 Casino: (02) 6662 4444 Bonalbo: (02) 6685 1203
 Alstonville: (02) 6628 0849 Coraki: (02) 6683 2019
 Urbenville: (02) 6634 1319 Kyogle: (02) 6632 2598
 Nimbin: (02) 6689 1288 Ballina/Byron Bay: (02) 6685 6254
 Murwillumbah/Tweed Heads: (02) 6672 0277
Any complaint you make will be treated in confidence and investigated, and you will be informed of the outcome.

* * *

**Southern Cross UNIVERSITY**

**A new way to think**

**Informed Consent Form for participants in the Research:**

**The Language of Dyslexia: the experience and impact of dyslexia on learning: its social and psychological effects in the higher education context and community.**

You are invited to participate in research about facilitating reflective practice processes in people who are identified as having a Specific Learning Difficulties (dyslexia) and are learning or working in higher education, or are working in the community. The research is being undertaken by Kay Distel PhD Student School of Nursing Southern Cross University. This research will help you to identify constraints in your learning and to bring about improvements using action research and reflective practice. If you decide to participate, I (Kay Distel) will describe the procedures set out in the Plain Language Statement. Please ensure that you have read this statement and have received the verbal description before you sign this document. If you have any questions, please phone me on [07] 3355-7056 and I will happily answer them. You will be given a copy of this form to keep.

I ________________ (name) have read the Plain Language Statement Description of the Project: The Language of Dyslexia: the experience and impact of dyslexia on learning its social and psychological effects in the higher education context and community. I have also received a verbal explanation of the project by the researcher.

I understand that:

- the research is about facilitating reflective practices to help personal and professional learning;
- any information that is obtained in connection with this study that can be identified with me will remain confidential and will be disclosed only with my permission;
- the information will be used to improve understanding of SLD (dyslexia) in education and health;
- ethical measures will be taken to ensure my anonymity and privacy;
- I agree and am committed to keeping all confidential matters within the group;
- I am free to withdraw my consent and to discontinue participation at any time without any coercion or penalties;
- I can contact Kay Distel to discuss the project if I have any questions to ask or comments to make;
- I will be one of possibly eight participants students or staff at Southern Cross who identify with SLD (dyslexia) and wish to understand and improve their learning; or
- I will be one of possibly eight adults from the community interested in reflecting on their practice in order to improve it;
- I will meet fortnightly with the group for two hours to discuss my learning issues raised through various exploratory activities;
- I will be expected to maintain a journal of my experiences, the non-confidential parts of which I will be expected to share with my peers in the fortnightly group meeting.

I have read the information above and agree to participate in this study. I am over the age of 18 years.

Name of participant: ____________________________________________________________

Signature of participant: _______________________________________________________

Name of witness (Independent of project): ________________________________________

Signature of witness: __________________________________________________________

I certify that the terms of the form have been verbally explained to the participant, who appears to understand the terms prior to signing the form, and that proper arrangements have been made for an interpreter where English is not the participant’s first language.

Signature of researcher: _______________________________________________________

Kay Distel PhD candidate, School of Nursing and Health Care Practices Southern Cross University Lismore, NSW
Email: kay@acu.edu.au
Phone: [07] 3355-7056 Mob: 0425-242-123

The ethical aspects of this study have been approved by the Southern Cross University Human Research Ethics Committee (HREC). The Approval Number is ECN 06147. If you have any complaints or reservations about any ethical
Plain Language Statement

Title: The Language of Dyslexia: the experience and impact of dyslexia on learning: its social and psychological effects in the higher education context and community.

I am undertaking research for my PhD with people who are either studying or working in a higher education institution (Southern Cross University) or community members who identify with dyslexia.

The aim of the research is to uncover the experiences and concerns of those who know they have a ‘specific learning difficulty’ (dyslexia) and seek to improve their learning and adaptation in life. It also aims to suggest implications and strategies for future practice. I am particularly interested in your perspective.

The study uses action research methods of working in a group. It will be similar to meeting new friends or joining a community of researchers who use their everyday experience as the material of their research. It is envisaged that there will be a series of 10, fortnightly meetings. The meetings will be up to two hours each at the University or a community venue. I will request permission to take notes during the meeting. In addition, any transcripts inclusive of you in the meetings you participate in will be destroyed should you decide to withdraw from the study. No information given in the meetings will be made public in any form that could identify you. Pseudonyms will be used to protect your identity. Should you experience emotional upset, which we believe is only likely to be of a minimal risk, a list of available counselling services is provided at the end of this form.

Participation in the study is strictly voluntary and your confidentiality is assured. If you decide to participate, you are free to withdraw and to discontinue participation at any time. You may also elect not to answer any questions asked.

My research is being conducted under the supervision of Prof Bev Taylor and Dr Kierrynn Davis at Southern Cross University. If any issues or questions are raised as a result of your participation in this research please contact Prof Bev Taylor btbaylpor1@scu.edu.au Tel: [02] 6620 3166 and/or Dr Kierrynn Davis KIDavis@scu.edu.au Tel [02] 6620 3642

Name of Student: Kay Distel (Researcher), PhD Candidate School of Nursing. Southern Cross University Telephone [07] 3359 7056 Mobile: 0425-242-123 Email:kay@soundeducation.com.au

The Southern Cross University Human Research Ethics Committee (HREC) has approved the ethical aspects of this study. The Approval Number is ECN05147

If you have any complaints or reservations about any ethical aspect of your participation in this research, you may contact the HREC through the Ethics Complaints Officer, Ms Suzie Kelly, and Telephone [02] 6626 9139, Fax [02] 6626 9145, email: skelly1@scu.edu.au
Auditory processing: How can a listening problem be identified?

Tick those points which relate to you now. Take your time to reflect on the issues as they may not be familiar to you as associated with listening and learning. A tick on two or more of these characteristics may mean a listening problem.

1 Receptive Listening
   - This is outer directed listening which keeps us attuned to the world around us, to what’s going on at home, work or in the classroom
   - Oversensitive to sounds
   - Instructions have to be continually repeated
   - A tendency to misinterpret what is being said
   - Restlessness
   - Day-dreaming
   - Poor attention and concentration
   - Difficulty to follow and participate in a noisy environment

2 Expressive Listening - This is inner directed listening
   - Poor audio and vocal control - can’t sing in tune
   - Slow, hesitant, or poor articulation
   - Voice modulation is monotonous, eg difficulty in holding a group’s interest while making a speech
   - Reading comprehension is difficult - need to repeat read
   - Avoids reading aloud
   - Has poor spelling

3 Body Image/Motor Skills
   - Hard time to organize structure
   - Awkward balance and co-ordination
   - Excessive body movement
   - Poor posture
   - Mixed sidedness (some functions left and some right)
   - Poor spatial orientation and sense of timing
   - Left/right confusion
   - Messy handwriting
   - Fidgety behaviour

4 Attitude and Motivation
   - A tendency to withdraw or avoid communication
   - An indifferent, negative or antagonistic attitude to learning
   - Immaturity and/or immaturity
   - Poor self-confidence and/or self image
   - Low tolerance for frustration

5 Energy Levels - The ear acts as a dynamo, providing us with the energy we need to survive and lead fulfilling lives.
   - Difficulty getting up/tiredness at the end of the day
   - Habit of procrastinating
   - Hyperactivity
   - Tendency toward depression
   - Feeling overburdened with everyday tasks

6 Development Characteristics
   - Difficulties experienced during gestation; a difficult birth; presently disordered sleeping and eating patterns; and recurring ear infections. Any or all of these show a high possibility of a listening problem.

Are these Characteristics of Dyslexia?

Please read and tick 10 items which represent your top characteristics now. Prioritize them from 1-10 (1 means the characteristic you would like most to address, and 10 is your least preferred).

General
- Appears bright, highly intelligent, and articulate but unable to read, write, or spell at grade level.
- Labelled lazy, dumb, careless, immature, "not trying hard enough," or "behavior problem."
- Isn't "behind enough" or "bad enough" to be helped in the school setting.
- High in IQ, yet may not test well academically; tests well orally, but not written.
- Feels dumb; has poor self-esteem; hides or covers up weaknesses with ingenious compensatory strategies; easily frustrated and emotional about school reading or testing.
- Talented in art, drama, music, sports, mechanics, story-telling, sales, business, designing, building, or engineering.
- Difficulty sustaining attention; seems "hyper" or "daydreamer."
- Learns best through hands-on experience, demonstrations, experimentation, observation, and visual aids.

Vision, Reading, and Spelling
- Complains of dazzle, headaches or stomach aches while reading.
- Confused by letters, numbers, words, sequences, or verbal explanations.
- Reading or writing shows repetitions, additions, transpositions, omissions, substitutions, and reversals in letters, numbers, and/or words.
- Complains of feeling or seeing non-existent movement while reading, writing, or copying.
- Extremely keen sighted and observant, or lacks depth perception and peripheral vision.
- Reads and re-reads with little comprehension.
- Spells phonetically and inconsistently.

Hearing and Speech
- Has extended hearing; hears things not said or apparent to others; easily distracted by sounds.
- Difficulty putting thoughts into words; speaks in halting phrases; leaves sentences incomplete; stutters under stress; mispronounces long words, or transposes phrases, words, and syllables when speaking.

Writing and Motor Skills
- Trouble with writing or copying; pencil grip is unusual; handwriting varies or is illegible.
- Clumsy, uncoordinated, poor at ball or team sports.
- Difficulties with fine and/or gross motor skills and tasks.
- Prone to motion-sickness.
- Can be ambidextrous, and often confuses left/right, over/under.

Math and Time Management
- Seems to "zone out" or daydream often; gets lost easily or loses track of time.
- Has difficulty telling time, managing time, learning sequenced information or tasks, or being on time.
- Computing math needs to finger count or use other tricks; knows the answers, but can't do it on paper.
- Can count, but has difficulty counting objects and dealing with money.
- Can do arithmetic, but fails word problems; cannot grasp algebra or higher math.

Memory and Cognition
- Excellent long-term memory for experiences, locations and faces.
- Poor memory for sequences, facts and information that has not been experienced.
- Thinks primarily with images and feeling, not sounds or words (little internal dialogue).

Behavior, Health, Development and Personality
- Extremely disorderly or compulsively orderly.
- Can be class clown, trouble-maker, or too quiet.
- Had unusually early or late developmental stages (talking, crawling, walking, tying shoes).
- Prone to ear infections; sensitive to foods, additives, and chemical products.
- Can be an extra deep or light sleeper; bed wetting beyond appropriate age.
- Unusually high or low tolerance for pain.
- Strong sense of justice; emotionally sensitive; strives for perfection.
- Mistakes and symptoms increase dramatically with confusion, time pressure, emotional stress, or poor health.

© 1992 by Ronald D. Davis.
The core Reflective Group Process: Learning as a child/ Stories about learning.

Aim:
To introduce reflective practices - the art of dialogue and journal activities
To stimulate language regarding experiences of learning as a child
To develop the discipline of working together and developing trust

a  The Process
Nominate a speaker and a listener and give a drawing/picture to the speaker of the pair. The speaker then has five minutes with this person using this picture as a stimulus. The listener listens and attempts to help the dialogue develop. The speaker moves on to listener 2 for five minutes. The speaker moves on to listener 3 for five minutes. (If placed in groups of three people)

The roles are reversed and another picture is given to the new speakers.
Three different people will listen for 5 minutes.

b  Pause:  Silent reflection with the following questions:
You have been in both roles
Listen to feedback. How hard is it to listen without interrupting?
Speaker  How different is your story told by the third person? Any feelings to report?
Share one of the answers with one other person

c  Individual reflection
Write some words or draw a picture in your journal which reflects your experience.

d  Group reflection
Share further the answers from the previous exercise.
Add other reflections:
What was your theme? For example, is the theme about a teacher, student, your mother etc.?
What was the value from your story that you bring to the present day from this experience? Prompts: It makes me want to...
How would you have liked to improve the situation?

e  Debrief
What are your feelings, thoughts and observation about doing this process?
When we do this again what would help improve the quality of the experience for you?

f  Register in your journal your thoughts and feelings from the group reflection and debrief.

At further meetings progress other pictures will be used in a similar manner. Then auditory means will be introduced to stimulate the themes. For example, the theme of learning may be stimulated by a reading from the children’s literature.

Each process will be structured as shown in a-f above taking into account any amendments suggested from the debriefing (see “e” above)

Other possible examples of reflective processes are:

2  Reflections by Analysis:
The following checklists are used to focus the perceptions of the participants on their SLD (dyslexia) issues and to introduce a common framework to build new understanding through action to change their recognised situations.

1  Are these characteristics of Dyslexia?
2  Auditory processing – How can a listening problem be identified?

See Appendix 1 and 2 for these checklists

The process for introducing the checklists:
Appendix 2

Documents supporting AR1 2006

Meeting structure.

Task and Trust roles that support group functioning
Language of Dyslexia - Community and SCU Action research group  21/9/2006

Our main aim is:

* to support and share our learning experiences of specific learning difficulties (dyslexia)
* to develop using action learning/action research (which will)
* help improve our situations - whether at work, home or study

Proposed meeting structure for the two hour meetings:

- Check in / Reflections:
  - What's been happening / review of action taken / home work? 15 mins
  - Introduction: new people
  - Validation of the minutes of the last meeting 15
  - Matters arising - where are we now? 10
  - Pick out main issues and decide what we’ll do 10
  - Short group exercise on main issue / theme 30
  - Discussion or conceptual input 30
  - Final circle: What you’ve learnt and plan to do with this learning? 10

Document Information

Groups that generate information need to document it. Meeting agendas and meeting notes (1) provide a record of topics addressed, decisions made, and assigned responsibilities; and (2) serve as an information dissemination mechanism for people who could not attend the meeting.

There are many methods of keeping meeting notes.

One is to keep a running record of the discussions and decisions and then type and distribute the information. Having a laptop computer at the meeting has made this approach more efficient.

A more succinct method is to record only group decisions, individual responsibilities, and due dates. During the meeting, it is helpful if decisions are recorded on chart paper so all members can see the decisions and review them before the meeting is adjourned.

A “recorder” can then type the chart paper notes and distribute them to each member after the meeting (see Figure below a form that makes it easy to take notes on a meeting’s agenda items).

Your Notes:

Name:  date:
Task and Trust Roles that Support Group Functioning

Having team members focus on both trust and task roles has several benefits. Two obvious benefits are a higher level of trust and performance among group members.

A less obvious benefit is a leveling of the hierarchical structure inherent in the various roles of parent, teacher, and other stakeholders. This hierarchy is often unconsciously transferred to the collaborative learning situation.

By assigning members the roles of summarizer, gatekeeper, or recorder, a message is sent that all members are equally important to the group's functioning.

When a group is first "trying on" trust and task roles, members may decide to blindly choose the roles at the beginning of a meeting, or they may select roles that represent their personal style and comfort level.

Task Roles

<table>
<thead>
<tr>
<th>Information or opinion seeker</th>
<th>Requests facts, seeks relevant information, asks for suggestions and ideas</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recorder</td>
<td>Charts relevant information during meeting, restates group comments or decisions to ensure understanding and agreement</td>
</tr>
<tr>
<td>Timekeeper</td>
<td>Ensures each agenda item has a set time; keeps group aware of time (gives 5-minute warning); when 1 minute is left, asks group members if they want to allot more time to discussion or summarize and move on</td>
</tr>
<tr>
<td>Facilitator</td>
<td>Helps group set the agenda, assigns roles for meeting, keeps discussion on topic, reminds group of ground rules and norms, creates the space for action to occur in the meeting</td>
</tr>
<tr>
<td>Summarizer</td>
<td>Restates what the group has discussed, pulls together related ideas or suggestions, organizes ideas so group will know what has been said, checks for understanding and agreement</td>
</tr>
</tbody>
</table>

Trust Roles

<table>
<thead>
<tr>
<th>Gatekeeper</th>
<th>Ensures that all members of the group have an opportunity to share, asks for the opinion of quiet group members, encourages talkative members to be listeners, keeps communication flowing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Encourager</td>
<td>Is friendly, warm, and responsive to others; accepts and acknowledges the contribution of members; encourages others to speak</td>
</tr>
<tr>
<td>Compromiser</td>
<td>In the case of an impasse, clearly states the different ideas that have been expressed and asks group to look for common ground; offers compromises for opposing points of view; is willing to yield when it is necessary for progress to be made</td>
</tr>
<tr>
<td>Reflector</td>
<td>Senses feelings, moods, and relationships within group; shares own feelings with the group</td>
</tr>
</tbody>
</table>

Name:_________________________ date:_________________________
Appendix 3

Documents supporting AR2 2007

Language of Dyslexia research updates
Language of Dyslexia Research project Update March 2007

One of the main aims of the project is exploring social and psychological aspects of specific learning difficulties (dyslexia) as a way of gaining more efficient learning.

The series of meetings between Sept-December 2007 produced only a few people who could regularly come to meetings. This made Action Research a difficult methodology to justify. My hope for this second round is that with shorter commitment of time, participation may be easier for people.

Four activities will be held between May and August 2007 on three Campuses. Exact room locations will be advised closer to the time.

1 Individual ‘Mentoring’ sessions
The aim is to work together seeking new solutions for any of your learning, work or study issues you may have. An initial interview will be held face-to-face, then communication will be by email and telephone before a final face-to-face follow-up meeting.

Sessions at:
Tweed Campus: Thursday May 3 2007, follow up meeting Monday August 6 2007
Coffs Campus: Tuesday May 22 2007, follow up meeting Wednesday August 8 2007
Lismore Campus: Wednesday May 23 2007, follow up Friday July 20 2007

2 Learning Circle meetings
There are two attachments on this email: The Listening checklist and Characteristics of dyslexia. If you decide to come to the meeting, bring these checklists filled in, your results will lead the discussion.

Sessions at:
Tweed Campus: Thursday May 3 2007, 12-2 p.m.
Coffs Campus: Tuesday May 22 2007, 12-2 p.m.
Lismore Campus: Wednesday May 23 2007 12-2 p.m. OR Sat July 21 2007 10-12 p.m.

3 A Chat group linked to My SCU for those who have previously expressed ‘interest in dyslexia’. Topics/questions will be based on the feedback from the Checklists attached. You will be notified when the group starts. By emailing back your filled in checklists, this will act as confirmation of participation in the group. If participation is too slow or low, I may announce for further participants through the SCU network. I look forward to meeting you on-line!

4 A workshop: A whole approach to improving learning/study
Exploring the link between learning and health. If stress is a significant factor in our lives, then this hands on workshop will help reduce stress and get the best out of your unique learning style. With sufficient interest following this workshop, individual research at home using music and voice techniques may be possible.

Date: Saturday July 21 1-5 p.m. and Sunday July 22 9-12 pm
Session at: SCU Lismore

Please email any burning questions and give an indication as to which sessions you may be interested in attending, and at what time. For Coffs and Tweed Campus, I need three people committed to make my trip viable.

Sincerely,

Kay Distel Kdiste10@scu.edu.au or kay@soundeducation.com.au
Mobile:0425-242-123 (07) 3359-7056
The Language of Dyslexia Research project Update

April 2007

Last year I called for participation in a PhD project and you contacted me saying you were interested. This letter is to give you an update and invite further participation in the second round of the research. The research has as an overall aim to explore social and psychological aspects of specific learning difficulties (dyslexia) in order to gain more efficient learning. The series of meetings last year were encouraging despite the location of meetings and other time commitments meant many of you couldn't directly participate. I have enclosed: The Listening checklist and the Characteristics of Dyslexia checklist which I ask you to fill in and return quickly, as this data will become the focus for the second round of activities.

The second round will explore new solutions for any learning, work or study issues you may have. Following are the descriptions, times and locations of the four activities to be held May-August 2007. You can commit to just one or both activities in your area: the Listening Circle and Mentoring sessions and join the chat group. The workshop is only being held in Lismore.

A lunchtime Listening Circle

Bring your lunch, join a discussion on any identified issues and explore our common ground.

The checklists can be used as your guides to raise issues you want to discuss.

Tweed Campus: Thursday May 3 2006 12-2 p.m.
Coffs Campus: Tuesday May 22 2007 12-2 p.m.
Lismore Campus: Wednesday May 23 2007 12-2 p.m. and Sat July 21 2007 10-12 p.m.

Individual ‘Mentoring’ sessions

Two face-to-face meetings at the start and at the end of the time. Between times, communication will be by email and telephone. The first face-to-face meeting explores your issues, reaches agreement on a specific issue you will work on between contact. The end face-to-face meeting will reflect on the process and any lessons learned.

First meetings:

Tweed Campus: Thursday May 3 '07
Coffs Campus: Tuesday May 22
Lismore Campus: Wednesday May 23

End meetings:

Tweed Campus: Monday Aug 6
Coffs Campus: Wednesday Aug 8
Lismore Campus: Friday July 20

Choose one time for both mentoring meetings:

Either: 11 a.m. 2.30 p.m. 3.30 p.m. 5 p.m. 6 p.m.

Only five people per campus possible.

A Chat group linked to My SCU is for those on my list. If participation is too slow or low, I will see further participants through the SCU network three weeks after starting. The topics/questions will be based on the priorities of the group of participants who sent in their checklists. We will send details of the start as it comes on line.

A workshop: A whole approach to improving learning/study

Exploring the link between learning and health. If stress is a significant factor in our lives, then this hands-on workshop will help reduce stress and get the best out of your unique learning style. Come to one or both sessions.

Saturday July 21 2007 1-5 p.m. and then Sunday July 22 9-12 p.m

Workshop: Lismore area.

Take Action by phoning or emailing me in the next two weeks!!

☐ Send immediately both filled in Checklists to kaydiste10@scu.edu.au
☐ Choose a time for your individual Mentoring sessions
☐ Choose to come to your lunch time Listening Circle
☐ Express interest in joining the Chat group
☐ Will come to the Workshop

Kay Distel kdiste10 @scu.edu.au or kay@soundeducation.com.au
Mobile: 0425-242-123  (07) 3359-7056
The Language of Dyslexia Research project Update

December 2007

I am now in my contemplating my third phase of action research to start in January 2008 until May 2008.

The focus of this phase is to understand and improve my own learning processes in working with auditory processing/listening.

I am wishing to meet up with professionals, parents and community members wanting to develop action and learning in the subject of auditory processing/listening and it’s effects on learning.

You are receiving this letter/email because you have expressed some interest to learn further with support to take action on implementing these ideas with students or your child.

You may have met me either:
- in a learning session with your child;
- or a school information session
- or a private information session
- or know me and are interested in these ideas.
- or have been a private client (with child or on your own).

Participating means you would be ‘co-researchers’ in this exploration. Action learning/research means to me, being actively involved in exploring understanding and developing knowledge of the topic through listening and taking action in your unique learning situation.

As co-researchers we would act as a ‘sounding board’ for each other and the main thing I’ll be doing is listening and questioning, to encourage you to try out your ideas related to listening development, or behaviours associated with poor listening. The action plan formalizes our engagement to show how we intend to improve our learning and life situations.

This project is timed to run from January - May 2008. I expect we will meet no more than three face-to-face meetings and have ongoing phone and email contact in between during these meetings.

The starting meeting will clarify my involvement and support for your learning, and invite cooperative inquiry towards developing your action plan. As we carry out parts of our plans, we will reflect and learn from notes or ‘data’ which make sense of our meetings, thoughts and reflections on our action. This is what we share, either by email or face-to-face, before starting new cycles of action.

I will supply notes, checklists, and we will develop a mind map to help understand the process.

I would expect the initial face-to-face meeting will be no more than 11/2 hours and subsequent meetings will be one hour. Telephone and/or email contact is obligatory in-between meetings. Your timing commitment will be worked out on the first meeting.

Please contact either by email or by phone at soon as you can to express interest and discuss.

Sincerely,

Kay Distel
PhD Candidate
School of Nursing
SCU Lismore

P.S Formal agreement to participate will be given out and signed at the first meeting.

Kay Distel kay@soundeducation.com.au Mobile: 0425-242-123 (07) 3359-7056
Appendix 4

Start up documents supporting AR 3 2008.

A Call to Participate.
Informed Consent.
Plain Language Statement.
Reflective practice structure.
Notes on reflective practice
Examples:
  Reflective practice structure
Auditory Processing (AP) capacity building
Feedback received by email
Action Research Project:
Auditory processing/Listening - its links to health, learning and behaviour

* * *

Southern Cross UNIVERSITY
A new way to think

A Call to Participate        April 2008

I am using an Action Research approach to enhance understanding and practice of the central place auditory processing has on learning, health and well-being. I come from a holistic education and health perspective and my professional practice is working with adults and families and children with learning difficulties.

Although, the focus of my research is with adults in Higher Education, clearly there are increasing numbers of diverse learners in all educational establishments. I believe we need a more equitable system, which aims to meet the needs of all diverse learning styles.

The aspect I propose is to improve learning efficiency by developing listening capacity.

The intention for this phase of my research: To further develop, understand and improve my own listening/learning processes when working with people involved in working with people. I would like to meet with professionals, parents and community members who want to improve a learning situation in the workplace or at home.

Participating in this research is a two-way process and involves you as a 'co-researcher.' Together we will explore, understand and develop our knowledge on the topic, and work out ways of putting this knowledge into practice.

The main thing I'll do is listen and ask strategic questions to help you identify behaviours associated with poor listening, and encourage you to try out ideas related to auditory processing/listening. An action plan will formalise our engagement by showing our intentions to improve our learning and/or life situations. Each individual brings their own specific situation they wish to improve.

A minimum participation is up to three face-to-face meetings, with phone and email contact between meetings. The expected time frame will be first half of 2008.

I will give further details in our first meeting about my involvement and how I will support your learning. I plan to supply notes, checklists, in order to develop 'a map of understanding' of our process together. The formal agreement for the University ethics approval will be explained, and when agreeing to participate in the research, you will be asked to sign soon after our first meeting.

As plans are acted on, you will keep notes on thoughts and reflections in order to 'make sense' of the experience. This process will be shared together by email, phone or face-to-face, before starting further action cycles.

Please call or email me if you would like further clarification.

Sincerely,

Kay Distel  PhD Candidate,  School of Health and Human Services
Southern Cross University  Lismore NSW 2480

kay@soundeducation.com.au          Tel 07 3359-7056 or 0425-242-123
Informed Consent Form for participants in the Research:

Learning Diversity or learning differently: the experience, its social and psychological effects in the higher education context and community.

You are invited to participate in research about facilitating reflective practice processes in people who are interested in Learning Diversity. Participants may be learning or working in higher education, or working in the community. Specific Learning Difficulties (dyslexia) is of major interest however, it is not the focus. The focus is on the learning diversity which is seen as learning differently. The research is being undertaken by Kay Distel PhD Student School of Nursing Southern Cross University. This research will help you to identify learning issues and to bring about improvements in your learning using an action learning and reflective practice framework. If you decide to participate, I (Kay Distel) will describe the procedures set out in the Plain Language Statement. Please ensure that you have read this statement and have received the verbal description before you sign this document. If you have any questions, please phone me on [07] 3359-7056 and I will happily answer them. You will be given a copy of this form to keep.

I __________________________ (name) have read the Plain Language Statement Description of the Project: Learning Diversity or learning differently: the experience, its social and psychological effects in the higher education context and community. I have also received a verbal explanation of the project by the researcher.

I understand that:

- the research is about facilitating reflective practices to help personal and professional learning;
- any information that is obtained in connection with this study that can be identified with me will remain confidential and will be disclosed only with my permission;
- the information will be used to improve understanding of learning differently in particular the SLD (dyslexia) experience in education and health;
- ethical measures will be taken to ensure my anonymity and privacy;
- I agree and am committed to keeping all confidential matters within the group;
- I am free to withdraw my consent and to discontinue participation at any time without any coercion or penalties;
- I can contact Kay Distel to discuss the project if I have any questions to ask or comments to make;
- I will be one of possibly ten participants students or staff at Southern Cross who identify with diversity in learning and wish to understand and improve their own learning and understanding or
- I will be one of possibly eight adults from the community similarly interested in reflecting on their practice in order to improve them;
- I will meet with the researcher a maximum of four meetings and at a minimum of two meetings.
- One of those meetings is expected to be with other individual participants.
- Meetings will no more than two hours to discuss my learning issues raised through various exploratory activities with the researcher and as a group meeting at the end of the research time;
- I will be expected to maintain a journal of my experiences, the non-confidential parts of which I will be expected to share with the researcher and my peers should we meet.

I have read the information above and agree to participate in this study. I am over the age of 18 years.

Name of participant: ____________________________

Signature of participant: ____________________________ Date: ____________________________

Name of witness (independent of project): ____________________________

Signature of witness: ____________________________ Date: ____________________________

I certify that the terms of the form have been verbally explained to the participant, who appears to understand the terms prior to signing the form, and that proper arrangements have been made for an interpreter where English is not the participant’s first language.

Signature of researcher: ____________________________ Date: ____________________________

Kay Distel PhD candidate
School of Health and Human Services
Department of Nursing and Health Care Practices
Southern Cross University
Lismore, NSW
Email: kdistel@scu.edu.au Phone: [07] 3359-7056 Mob: 0425-242-123
Title: Learning diversity or learning differently: the experience, and its social and psychological effects in the higher education context and community.

I am undertaking research for my PhD with people, who are either studying or working in a higher education institution (Southern Cross University) or community members, who identify with the notion of learning diversity or learning differently.

The aim of the research is to uncover the experiences and concerns of those who know they have, or know others, who learn differently and are seeking to improve their learning and adaptation in life. It also aims to suggest implications and strategies for future practice. I am particularly interested in your perspective.

The study uses action research methods and will be run individually through phone calls, email and 2-4 one to one meetings with the researcher. There will be one group meeting towards the end of the study. This group meeting will be similar to meeting new friends, or joining a community of researchers, who use their everyday experience as the material of their research. Any meetings will be up to two hours each at the University or at a community venue. The meetings will discuss your learning/teaching issues raised through various exploratory activities with the researcher. I will ask you to maintain a journal of your experiences, the non-confidential parts of which you will be asked to share with the researcher.

I will request permission to take notes during the meeting. No information given in the meetings will be made public in any form that could identify you. You will be asked to keep confidential any issues raised by participants in the group. Pseudonyms will be used to protect your identity. Should you experience emotional upset, which we believe is only likely to be of a minimal risk, a list of available counselling services is provided at the end of this form. In addition, should you decide to withdraw from the study, any mention of you by your pseudonym in the transcripts in the meetings you participate in, will be destroyed.

Participation in the study is strictly voluntary and your confidentiality is assured. If you decide to participate, you are free to withdraw and to discontinue participation at any time. You may also elect not to answer any questions asked.

My research is being conducted under the supervision of Prof Bev Taylor and Dr Kierrynn Davis at Southern Cross University. If any issues or questions are raised as a result of your participation in this research please contact Prof Bev Taylor, bev.taylor@scu.edu.au Tel: [02] 6620 3156 and/or Dr Kierrynn Davis kierrynn.davis@scu.edu.au Tel [02] 6620 3542

Name of Research Student: Kay Distel, PhD Candidate, School of Health and Human Services, Southern Cross University, Lismore, NSW, 2480.

Telephone: [07] 3359 7056 Mobile: 0425-242-123 Email: kay@soundeducation.com.au

The Southern Cross University Human Research Ethics Committee (HREC) has approved the ethical aspects of this study. The Approval Number is ECN05147

If you have any complaints or reservations about any ethical aspect of your participation in this research, you may contact the HREC through the Ethics Complaints Officer, Ms Suzie Kelly, and Telephone [02] 6626 9139, fax [02] 6626 9145, email: sus.kelly@scu.edu.au

Any complaint you make will be treated in confidence and investigated, and you will be informed of the outcome.

List of Free Counselling Services

If participants require counselling beyond that which the facilitator and group members can effectively provide, a list of free counselling services follows:

LifeLine: 13114 (all areas)

LifeLine Face-to-Face Counselling:

Northern Rivers Area Health Service:
Lismore: (02) 6620 2967
Casino: (02) 6622 4444
Alstonville: (02) 6628 0849

Free Counselling Services available at:

Evans Head: (02) 6682 4899
Bonalbo: (02) 6655 1203
Coraki: (02) 6663 2019

(02) 6622 4133 (during office hours)
Support documents: Community Information session (April 2008)

Come to an Introduction and information session on:

**Auditory Processing** - the voice/ear brain connection &
**Introducing an Action Learning Project:**
Supporting tutors to improve practice with diverse learners

When? Tuesday April 22 2008
Time: 3-5 p.m.
Where? ACE Lismore

**Experience** how the voice-ear brain processes information and how this impacts on learning. A series of short experiences will be followed by reflection to broaden your understanding of the holistic nature of listening.

The action learning project aims to support tutors in teaching practices that produce positive learning outcomes. It will useful and particularly relevant for your work with students who have difficulty in learning or have diverse learning styles.

Participation in the project, involves a two-way process - you become a 'co-researcher'. Reflective practices are the cornerstone of the work. YOU will feel empowered by the process as you improve your learning/teaching styles. An outcome will be the development of innovative strategies and techniques which will in turn impact on the students capacity to learn.

I will give a short brief on the research structure, time involved, obligations and the process for identifying individual learning/teaching issues.

If you wish to participate the first phase 'package' will be available. The research runs between May-mid July 2008 as an Independent study via email, phone and 2-3 group meetings.

**Expect a fun-filled learning experience!!**

---

About Kay Distel
PhD Candidate, School of Health and Human Services, Southern Cross University, Lismore NSW
I come from a holistic education and health perspective. I mainly work with adults, families and children with learning issues. I am a fully qualified body mind psychotherapist. This work is mainly with adults with chronic health issues. I enjoy training people to have sustainable voices, and health issues of ringing ears, chronic fatigue and other 'energy' problems.

---

kay@soundeducation.com.au  Tel 07 3359-7056 or 0425-242-123
Reflective practice Structure

An experiential learning cycle is another form of an action research cycle as discussed earlier. A simple version is: Plan -> Act -> Review -> Theories then the next cycle -> Plan etc.

Now you have some ideas about AP/Listening and it’s connection to learning and the body, could you think about your listening/learning and a common situation you find yourself in.

Please jot down answer the questions below, as a first practice of a the ‘planning’ stage of an action learning cycle. You can do this with a person listening to you talk it through or on your own.

What do I think are the salient features of a listening situation I face?

Why do I think those are the salient features?

What outcomes do I think are desirable in that situation?

Why do I think those outcomes are desirable?

What actions do I expect to lead to those outcomes in that situation?

Why do I think those actions will lead to those outcomes in that situation?

Note: This last question may usefully encourage you to detail more of your assumptions about action. It can lead on to noticing more during action and so improves motivation to reflect on the results afterwards. For some more detail about the reflective questions see http://www.seu.edu.au/schools/gem/arp/arp/reflect.html

Copyright (c) Bob Dick, 2006. May be copied if it is not included in material sold at a profit and this notice is shown. For research participants in Kay Dixet’s research, kay@soundeducation.com.au  mob:0425-242-123 tel:07 3139-7056
Notes on Reflective Practice

Some action research falls short of what it claims. In my experience critical reflection is where it very often falls down. When people hear of action research they frequently say "I already do that". Indeed, one of the advantages of action research is that it does build on natural behaviors. On further discussion, differences emerge. It usually becomes evident that there is less reflection, and less-critical reflection, than the literature (and I) would recommend.

I think that it is often action-oriented people who are attracted to action research. Many such people press ahead to the next action as soon as they have achieved the outcomes they want.

In supervising action-oriented people doing action research studies I have found that certain practices encourage more and better reflection. Here are a few examples:
1. Setting aside regular time for reflection, for example by using the first ten minutes of each meeting to reflect on what happened since the previous meeting, and using the last ten minutes of every meeting to reflect on that meeting.
2. Deliberately following the experiential learning cycle during reflection (more on this below).
3. Using a mix of individual and collective reflection; some people prefer individual, some collective; almost all benefit from a combination.
4. Whenever actions are planned, building ongoing monitoring into the plan so that reflection time is planned for.

It is the list of these which has turned out to be the most useful. People are encouraged during planning to list in detail their assumptions about action. They then notice more during action. They seem more motivated to reflect on the results afterwards.

I now use six questions during the planning phase of each cycle:

1a. What do I think are the salient features of the situation I face?
1b. Why do I think those are the salient features?
2a. What outcomes do I think are desirable in that situation?
2b. Why do I think those outcomes are desirable?
3a. What actions do I expect to lead to those outcomes in that situation?
3b. Why do I think those actions will lead to those outcomes in that situation?

The experiential learning cycle is really just another form of the action research cycle. A simple version is... plan -> act -> review -> theories -> plan... The questions above can be used at the "plan" stage.

During the "review" stage I encourage:
- A detailed reconstruction of what happened, with different people encouraged to contribute their perceptions.
- Reaching agreement on what happened before trying to make sense of it.
- Treating disagreement not as a trigger for debate, but as a sign that we don’t yet understand what really happened.

In fact it is often the disagreements, well handled, which lead to the important insights.

During the "theories" stage (sometimes called the "generalist" phase) I encourage people to express theories in what Argyris has called a "theory of action" form. Argyris summarises it as follows:

"In situation S, if you intend consequence C, do A given assumptions a(1) ... a(n)."


You’ll notice the six questions above use Argyris’s categories.

The three "what?" questions cover situation, consequence and intended action.

The three "why?" questions surface the assumptions (which otherwise would often remain tacit).

Even if the next action is some time away, I encourage a planning phase: "When will be your next opportunity to make use of your new insights? What will you do to make use of them?"

There are a couple of relevant web pages on the web site. For some useful reflective practices see:

http://www.usconect.net/action_research/erp/reflmech.html

For some more detail about the reflective questions see http://www.scu.edu.au/schools/gem/arjrp/reflques.html
http://www.usconect.net/action_research/erp/reflques.html

For different approaches see also, for example... http://www.scu.edu.au/schools/gem/arjrp/rowcheankor.html
http://www.facilitatedsystems.com/vlogs.html

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For research participants in Kay Dick’s research, kay@sounteducation.com.au  mob: 0425-242-123 tel:07 3359-7856

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Participant feedback on the reflective structure
Post community information session feedback

Yes Kay you have my permission to use the info so far. As I said I am studying at the moment and finding it all a bit hard after 4 years away. I just feel I need to concentrate on what I am doing at the moment.
I feel that I would have to do some research on your area of interest, and because I missed the start of your session I feel quite out of my depth.
Exactly what would you require me to do if I do participate?
I have very little teaching experience as such. I have spent the greater part of my life in the student role.
I have no experience in evaluating how we learn or identify learning issues. I am only just learning about teaching and learning theory now after 4 years at uni. Seems like I do everything backwards.

I have no idea what the questions on the reflective practice structure handout it is all about, or how to answer the questions. I have never analysed a listening situation. What do you mean by a listening situation.
I really think its all a bit out of my depth sorry.

regards

----- Original Message -----   
From: Kay Distel   
To:   
Sent: Tuesday, April 29, 2008 7:33 PM   
Subject: Re: Listening project

Dear Jack,
I'm saddened as you seem to have a perfect situation while doing another course to use that work to learn through a process with me. It feels as if you see it as extra work then I haven't communicated well enough.
Action research is a cooperative work which means it's for you as much as for me as the participants research their own work/life/study and improve a situation.
The preliminary work suggested is to help this process.
If you feel its too 'brain draining' you can choose not to take up any of the suggested work in the briefing, and go straight into planning how you could effectively use me as a listening reflection post in your unique situation.
your choice
I am planning a workshop at ACE during July or August I hope you have the time to attend.
Do I have your permission to use the information you have given so far on the day and the checklist?
Kay
Kay

At 04:44 PM 28/04/2008, you wrote:

Hi Kay,
I have reviewed the information from our session last week and wish to inform you that I do not think I have the time or space at the moment to help with your project. I am sorry to drop out but it does involve a lot more brain space than I first thought.

Sorry

KAY DISTEL
SoundEducation.com.au
Mobile: 0425 242 123

Internal Virus Database is out-of-date.
Checked by AVG Free Edition.
Version: 7.5.516 / Virus Database: 269.22.13/1376 - Release Date: 4/13/2008 1:45 PM
Appendix 5

Additional documents supporting AR3

An Action Learning Model: An overview of expected phases of action cycles, expectations and dates of cycles.

Listening Checklist (revised from AR1).

Technology used: Brain Boy.

I poem used to get reflective feedback
Briefing Sheet /Introduction Phase 1:
Auditory Processing/Listening - links to health, learning and behaviour AR Project

An Action Learning Model

My study uses an action learning framework in order to:
- have a common flexible framework
- improve reflective practice and dialogue
- empower participants

The reflective nature of this work means you may have diverse improvements in your learning and practice. For example, it could improve your critical thinking, observations and stress levels. Any aspects of your present life experience, job or study is relevant material for our work together.

My relationship with you has the dual focus of:
- helping to improve my listening in the context of
- developing practical ways to improve your learning

A simple action learning model

I SEE – I FEEL– I THINK- I DO (or ACT )

(See diagram above)

How the model works:
- Take a topic.
- Start at any point in the diagram, (the order may be different)
- Ask questions of the topic. For example from the FEEL point: What do I feel? (about the topic)
- A cycle is completed, after the ACTION point is taken.
- A new cycle usually will start with a reflection on (SEEing, observing) the outcome of the previous ACTION.
- A completed cycle adds to your knowledge from the previous cycle.
- An upward spiral of cycles develops to inform further cycles.


1 I SEE the book I’m reading.
2 I have an initial FEELING when I flip through it. ‘I feel interested .’
3 I THINK to myself and develop questions: Is this book easy to understand?
   If I say YES, a further THINK question is: What do I want to know from this book?
4 I ACT by researching to get an answer to my THINK question

This is a completed short action learning cycle, its that simple!
Briefing Sheet /Introduction Phase 1:
Auditory Processing/Listening -links to health, learning and behaviour AR Project

Example 2:
1 I SEE out the window and THINK: It's going to rain. I look for my umbrella and don't find it.
2 I FEEL frustrated, and keep searching and find it in an unexpected place. I FEEL better and...
3 I ACT - I take my umbrella with me.

By further reflecting on this cycle, my next cycle could start: If I had a proper place for the umbrella, next time I would find it quicker!

Some cycles easily cover these four aspects, whilst other cycles you may find it difficult to find answers to your questions on one of the aspects. A reflective analysis then can help you to see emerging patterns and lead on to reflecting and exploring more deeply your learning style and it's importance in your ACTion phase of the cycle. Be prepared to be flexible!

Action learning Cycle 1: An introduction: - your ACTion

Enclosed is the Listening Checklist which will start our conversation and develop skills in using the action learning model.

1 Do The Checklist for yourself.
Mark all the items that relate to your listening.
Then choose five items which you want to learn more about
Prioritize these items: 1 means 'most curious' > 5 means 'least curious' to know more about.

2 Briefly write notes about these five prioritised items: What meaning have they in your life?
Give examples of interactions that highlight your meaning.

3 Now choose your highest priority and think through and answer the follow:
   • Why is this your priority?
   • What is your history of this issue?
   • How do you feel about it present day?
   • Is there something you could do to improve this issue?

4 Now repeat Exercise 1 using the Checklist to focus on someone you would like to use in your learning with me. It can be any person you may wish to improve a situation with.
   You can copy the Listening Checklist or use the same sheet. Please clearly distinguish yours from this person.

5 Using the top priority of this person from item 4:
   Brainstorm to generate questions you want to find answers to in order to help them.
   This type of brainstorm means everything is relevant, don't censor your questions. Examples of questions you could ask: What is the easiest way to communicate with this person?
   Do I find this satisfactory? Am I listened to? etc

6 What is the most important question raised in the brainstorm which you want to explore further? Write a short paragraph addressing your concerns from this question and giving something of the persons background and your relationship/role with them.

You have now completed the introduction by finding a learning issue you want to explore.

Email: me the above work
Post: Your signed copy of the Informed Consent form AND A copy of your Listening Checklist with all 'YOUR' items and the 'OTHER' clearly marked.

Once received you are officially welcomed to the research and the ongoing learning process.

Kay Distel P.O Box 5838 Stafford Heights Q4053 kay@soundeducation.com.au
Ph: 07 3359-7056 Mob: 0425-242123 270308

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Briefing Sheet /Introduction Phase 1:
Auditory Processing/Listening - links to health, learning and behaviour AR Project

Following you sending the signed consent form and checklist I will:
Send an email response back to you will be my reflections and questions raised by my reflections
which could suggest Action for you to start another cycle.

Notes:
Action Learning Round 2: will lead to more depth and may require action with your chosen ‘subject’
and your reflections on that action. My response 2 follows your email reflections.

Then I will contact you to arrange our first half hour phone call. This will clarify the work so far and
negotiate the next cycle.

By using this pattern of two responses by email then a phone call, I hope to enable you to go at your
own pace and not feel ‘time strapped’.

Nothing is ‘set in concrete’ with this process. If you want to improve anything from what I write or
suggest, and add your own or change things, feel free. I am open to this. If you would like to have
more phone calls and less written work then this can be negotiated.

In the written work it is most important you keep your own reflective journal during our process there
are no rules about how to keep it. I find if I do just 5 minutes ‘free writing’ following an event on the
theme of listening, it helps me reflect and act easier the next time. It is expected that most of the
journal will be shared with me at some point.

We start April 2008. New participants are welcome to join up until May 5 2008.

My hope is that all participants can complete up to five cycles by end of June 2008 (five fortnightly
cycles) If some people can’t manage this, it’s Ok as long as we are in touch, and negotiate what is
more comfortable for you, it will all be relevant.

| Cycle dates: week beginning | April 7, 21 | May 5, 19 | June 2, 16, 30 |

All participants will:
• receive an emailed ‘Concept Sheet Stimulator’* each cycle period following their emailed
feedback/reflections on the previous cycle.
• have completed their email and phone call reflections by end of June 2008.
• be invited to a final group meeting/workshop planned for mid/late July 2008

*The Concept Sheet Stimulator will have suggestions and ideas to practice, reflect and write about.
They will be explorations of concepts from the Listening Checklist and the Learning Styles
literature.

If you need further clarification or have questions please ring or email.

Kay Distel P.O Box 5838 Stafford Heights Q4053  kav@soundeducation.com.au
Ph: 07 3359-7056  Mob: 0425-242123  270308
Revised Listening checklist

LISTENING CHECKLIST

Name: ___________________________ Observer: ___________________________ Date: ___________________________

Cycle #: _________ Pre or Post (please circle)

Listening is an ability that cannot be seen. The only way to gauge listening is indirectly, through an evaluation of related skills. This checklist offers a catalog of skills related to listening. This information is helpful in assessing receptive and expressive listening ability.

RECEPTIVE LISTENING AND LANGUAGE
This is listening which focuses outside the self, relative to what others are saying, or what is going on in the work, school or home environment. Mark the most appropriate option.

Difficulty staying focused ................................................................. RARELY SOMETIMES OFTEN ALWAYS
Short attention span.................................................................
Easily distractible, especially by noise...........................................
Overreactivity to certain sounds..................................................
Misinterprets questions or requests ...........................................
Difficulty in sound discrimination ...............................................
Confuses similar sounding words ..............................................
Needs repetition and clarification more than usual........................
Able to follow only one or two instructions in a sequence ............
Difficulty understanding discussions ........................................
Poor short-term memory..............................................................
Must read material several times to absorb content....................
Tries easily..................................................................................
Becomes sleepy when listening to speakers or reading............... 
Difficulty hearing low male voices............................................
Difficulty hearing high female voices........................................
Seems that most people speak too fast.....................................

EXPRESSION LISTENING AND LANGUAGE
This is listening which focuses inside the self, including checking, monitoring and reproducing correctly what one hears, especially one's own voice and speech. Mark the most appropriate option.

Flat and monotoneous voice quality............................................. RARELY SOMETIMES OFTEN ALWAYS
Speech lacks fluency and rhythm is hesitant.................................
Difficulty recalling exact word usage .........................................
Sings out of tune....................................................................... 
Difficulty with reading, especially out loud............................... 
Poor spelling............................................................................
Difficulty summarizing a story......................................................
Difficulty relaying isolated facts................................................ 
Stumbles over words..................................................................

MOTOR SKILLS
This is listening to the body. These skills are related to the integration of several sensory systems, and involve balance, coordination, body image, spatial awareness, and temporal orientation. Mark if any of the following apply.

______ Poor posture, including slouching and slumping
______ Atypical drive for movement and or touch
______ Uncordinated body movement
______ Fidgeting
______ Clumsiness, including tripping and stumbling
______ Confusion of right and left
______ Frequent confusion about location and direction
______ Poor sense of rhythm and/or timing of movement
______ Poor athletic skills
______ Messy handwriting
______ Difficulty with organization and structure

Kdisse10@scu.edu.au or kav@scu.edu.au  Tel: 07 3355-7056 or Mob: 0425-242-123

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BEHAVIORAL AND SOCIAL ADJUSTMENT
A wide variety of behaviors and attitudes maybe related to listening problems. Mark if any of the following apply.

- Low frustration tolerance
- Poor self-image or low self-confidence
- Difficulty in making and keeping friends
- Withdraws from or avoids social interactions
- Inordinately tired at end of school day
- Low motivation, minimal interest in school, little desire to participate
- Tense and anxious
- Limited sense of aliveness
- Difficulty setting goals and priorities
- Difficulty in beginning and completing projects
- Difficulty with time concepts and punctuality
- Difficulty making judgments and generalizing to new situations
- Hesitant to accept responsibility
- Does not complete assignments
- Lack of tactfulness
- Tendency to act immaturely
- Does not tolerate stress well

LEVEL OF ENERGY
The ear acts as a dynamo, providing us with electrical energy that affects the brain and nervous system. This energy is necessary for our survival and for us to achieve fulfilling lives. Mark if any of the following apply.

- Difficulty getting up
- Tiredness at the end of the day
- Habit of procrastinating
- Hyperactivity
- Tendency toward depression
- Feels overburdened with everyday tasks

DEVELOPMENTAL HISTORY
Listening difficulties also develop early in life and are related to other developmental issues. Mark if any of the following apply.

- Delaying motor development
- Delayed speech development
- Delayed language development
- Recurring ear infections
- Experienced emotional trauma
- Had dangerous experiences
- Had frightening experiences
- Mother had stressful pregnancy
- Mother had difficult delivery
- Experienced early separation from mother (i.e. hospitalization, incubation or mother ill)

ENVIRONMENTAL HISTORY
Environmental factors or trauma may affect listening. Mark if any of the following apply.

- Exposure to loud sounds as gunfire or loud concerts
- Ringing in one or both ears
- Suffered from concussion or head trauma
- Suffered from headaches (please describe)

FOREIGN LANGUAGES
Different languages offer unique sound characteristics. Repeated exposure to specific languages is thought to affect listening.
List the languages (other than English) spoken in your home.

COMMENTS:


Kdlist10@seca.edu.au or kavy@sesnedducation.com.au Tel: 07 3359-7056 or Mob:0425-242-133
Technology used in AR3

The Brain-Boy® Universal allows the testing and particularly the training of a total of eight different cognitive functions:

- Visual memory threshold (processing speed) ("Brain-V")
- Auditory memory threshold (processing speed) ("Brain-A")
- Spatial (directional) hearing ("ClickBoy")
- Pitch discrimination ("SoundBoy")
- Auditive control of hand coordination ("SyndiBoy")
- Rotative choice reaction test ("Speedboy")
- Frequency Pattern Training ("TripBoy")
- Duration Pattern Training ("Long-Boy")

Low-level functions describe very basic but essential capabilities within the brain; the ones included in the Brain-Boy Universal have a well-documented connection to language performance, i.e., a good pitch discrimination is a key element in vowel and prosody detection.

As an additional feature, the Brain-Boy® Universal complements the user at once with a five-level scale on his success for any given correct answer by means of an articulated voice chip. This way the user receives a direct and helpful feedback.

As an additional nice feature the Brain-Boy Universal allows for a specific set of gradually scaled audible encouragements. Since version 2.0, you may turn on and off this function, and the device will remember the last setting when being turned on again.

The significance and trainability of these functions have now been scientifically evaluated and proven: From 287 students all functions were tested and norm data was derived. Afterwards, number of 30 students used the Brain-Boy Universal for only five weeks, and their results improved dramatically in comparison to a control group. The research was done under the supervision of the Medical University of Hannover.

You can test some of the low level functions here:

http://www.brain-boy.de/

Please take notice of our optional add-on products:
- Wall mounted holder for Brain-Boy Universal (Art-Nr. B 00574)
- Symphonic table holder for Brain-Boy Universal (Art-Nr. 0559)

The Brain-Boy Universal is shipped with:
- 9V battery
- Headphones for adults and children
- Headphones (MT-15-16) 2

Price: 190,00 EUR
incl. 19% Tax excl. Shipping costs
I-poem used to get reflective feedback

Example of an ‘I’ poem.

I worked
I believed
I had experienced before
I was culturally shell-shocked
I judged
I strived
I enrolled
I had completed
I have learned
I need
I verbalize
I can

Please read the above ‘I’ Poem and

Make a comment on the overall feeling conveyed in this piece.
How could you interpret these feelings?
How does this person speak to themselves.
What is the most important thing they want to convey?
What do you imagine the ‘cultural shell’ shock could be?
Appendix 6

AR3 progress document and a proposal for a short term Health Group. (June, 2008)

Supervisors and Critical Friends: an update on AR 3: Diverse Learners/Learning Diversity network

16/6/08

To date I have nearly 20 participants active in my email/phone call researching group and a second group called the 'Hold' group with 10 people. This latter group of people are stakeholders with little time to be involved in a complex AR cycle, however are willing to meet on an 'ad hoc' basis.

We are just starting a second AR cycle with a new theme of 'chronicity' and/or Stress. I have identified six individuals with backgrounds of this theme while doing University studies.

Why am I concerned? One of the main aims of my research is the 'lived experience' of diverse learning in HE and it's health and well-being effects, and I believe this is a possibly good enough number of people to form a short term action research group.

Two of my co-researchers have been severely hindered in their University studies by the lack of understanding of what it's like studying with a background of a chronic condition. I am now inviting a selection of individuals to join a sub-group to focus on this aspect as their work with me.

I was deeply influenced by meeting with these two co-researchers and the disability officer when their views on their inequality issues were raised. Whilst attitudes and experiences were revealing, the general drift was to critique and clarify the present structure for disability, and very necessary. What I found myself doing was to broaden the argument to think more how to expand out of a 'deficit' model into a holistic understanding and support for diverse learning.

Reflecting later, I decided to make a proposal to honour their stories and challenges by making it the subject of our work. They both have accepted my plan, and I will now invite others to join us.

The first task of this new plan is a period of focused individual work as we work on 'chronic' stories. Then an analysis of these stories would be about finding their 'voice'. This will be achieved by doing a number of 'listetings' of the data using the material in creative 'poetic' ways and more. If interested more details are available. Once competent with their own material, some co-sharing could take place through email which should add a richness to the analysis.

When this stage is completed, meetings for all members of this 'group' to share stories; to find points of common experience, identify the main constructs and relate them to the policy documents for connection to our emerging issues, concerns and concepts.

What would then be the next step of action for individuals and the group? This will depend on the findings of the group. I believe a minimum input could be to invite others to contribute their stories of learning diversity and 'chronicity' and upload the findings into either a Blackboard or Elluminate project. This could keep the momentum and develop further research opportunities for action within the institution.

Clearly should this project by opened up in such a way, another research aim: to help deepen our understanding of the support and learning needs of diverse learners in the HE environment could gain respectful development.

Kay Distel
Letter to local co-researchers participating in Diverse Learners/Learning Diversity AR.

16th June 2008

A recent meeting with the disability officer and two fellow students reminded me of how the system has technical ways of improving the 'disability' situation in place yet there are many inequalities existing and most concerning to me is the support needs of diverse learners. Add to this the chronic health issues and stress, means we need to find ways to better serve these often marginalized students. My research aims go beyond just technical solutions to an empowerment or emancipatory ways of influencing self and the system.

Reflecting on the work so far with my Action Research Round 3, I find it's a juggle to maintain the individual connections. Having found that six of my co-researchers on campus have similar health-related issues, is it time to go more in-depth with the self-reflective processes from which action is driven? Reflection is enhanced by sharing, caring and working as a group, difficult given the demands we are all under. So I have a plan.

My present structure is an individual processes, via email and phone and I have suggested keeping a reflective journal. To sustain a journal seems to be a challenge for some. Perhaps I haven't explained it well enough, how it ties in with action? Recently I found some new techniques that may help this reflection co-researching need and open up an opportunity of sharing stories of 'chronicity' and stress which may translate into action within the university structure.

These processes are drawn from the early work of Paulo Freire (Critical Literacy) and Carol Gilligan (Moral development). I would modify the Gilligan work as it is normally used as a full method for qualitative analysis. It may mean that some of the process and insights you gain from our work may directly transfer to your own researching processes.

Each co-researcher would be presented with the same series of questions. Initial responses will be in writing or/and phone, with a follow up from me, then further reflections would be a group meeting, with commonalities and differences worked up.

A two hour meeting would workshop these reflexive processes and include sharing some of our own writing pieces. This could lead to group action with further in-depth meetings or the group becomes a 'Blackboard' support group or something else as a group action.

Time line: I can have the questions to you before next Wednesday 23rd June.
Your answers need to be completed by mid-July. Then we would schedule monthly meetings in July, August and September on campus. The first such group meeting will be in the week of 21st July.

Would you be willing to co-research in this way?
Please let me know your thoughts and questions on this proposal in the next couple of days.

Kay Distel
PS I can meet with you 3rd July as I'm in Lismore for Nursing research students seminar
Appendix 7

Concept stimulator sheets supporting AR3 meetings

- Developing critical reflection why it is important.
- Homework on attitudes and stereotypes.
- Excerpt from Roland.
- Early childhood memories and health.
Developing Critical Reflection- why it's important

Part of our agreement is to keep a reflective journal. It represents a way of committing yourself to professional development and to finding new opportunities to improve your practice.

You have decided to study a situation with me which you have identified as causing you some concern in your study or in your professional practice. I have discussed with you a simple T model of action research: I Think/Feel/See/Do. This model usefully starts you developing self-awareness to act on.

I’m now introducing the PLAN, ACT and REFLECT model, which encompasses the individual model of think,feel,see,do and can extend the concept to embrace social situations. Then the “I” reflections and the “We” reflections develop and improve as our reflection skills improve.

The PLANining Phase: is the time to find common understanding of issues you face, how they may also relate to colleagues or fellow students so that you can act with better understanding.

ACT: every day we act or take actions often automatically without consciousness. My reflections to you are intended to help you find and develop conscious ways to ACT bringing into focus your intentions to improve your situations.

REFLECT: A key feature is self-reflection so we can over time, see our changes and improvements.

How does critical reflection work?

By making a regular practice of spending time each day going over your day.

- Recall in as much detail as you can, by asking yourself what you did.
- Focus to those events which didn’t work out as well as you would like.
- Identify what you have learnt from each of these experiences and how you could have improved it.
- Review the likely events for the following day.
- Continually look for opportunities to apply the learning from the previous day.

Fifteen minutes is enough to start. It’s like doing anything new. For example starting to exercise, it’s daunting until you make the effort to do it. Soon you will feel and see the benefits.

A suggestion. At first it’s difficult to recall much, so intend it to be a fun unwinding activity which will make the transition between work and home easier.

Some people like to find a special pen and book and dedicate it to their own development. You can be as messy as you like, your can draw make mind maps doodle. It is your record to keep you on track of the changes you are noticing in your practice and self.

I suggest going from the last event backwards usually works. The order of events isn’t important, its your way of doing it is your way. What is important is your response to yourself and the action that comes from it.

This whole process in itself can be called action learning or action research and is a form of self-study professional development.

Revised 120908

Acknowledging Bob Dick’s paper on SCU course in AR.
Homework on Attitudes stereotypes

Take some of the stereotypes of the label Disability or your common experience do a brain storm...

I statements

![expressions]

Thanks for doing some. I have a few questions. Please don’t be a slave to it. If you don’t think of an answer to one question don’t do it. I have also given you an exercise, hopefully it’s understandable and easy for you to implement.

See you at the next meeting?
Kay

‘the deficit perspective about my ability was working on my psyche...’

Could you expand this more?

...the deficit perspective’ means to me ... (in your words).
Can you give an example of something that you tell yourself or something that others say or do that has triggered the ‘deficit perspective’

You spoke of someone who asked if you had a disability. You answered that you have CF.

Questions
Was this person in authority over you in anyway?
Is this unusual that you would tell someone?
You go on to say that nothing can be done about it (Memory and Concentration) and you refer to wheelchair, so you’re talking about ‘hidden’ disability?
You say ‘that nothing can be done about it’ Do you believe that short term memory and concentration problem can’t be helped?. If not what helps you?

Give an example of a memory issue
What is your most annoying one? What is one that you don’t get emotional about- or you accept?
How? What? And when? You encounter either of these and their affect.
Think of strategies you have used
Pick one that has worked or put another one into Action for three days
Become your own researcher. Put a note in a prominent place and see if it helps some aspect of your ‘forgetting’.
Each day write up (or draw a picture or record) what happens or doesn’t happen. Your thoughts and feelings about this.

Bring to next meeting or I would prefer it sent beforehand
Don’t expect it to work necessarily all the time.
Intend this strategy to work for you in whatever way the universe see fit!
Be creative in your response
Simple prose or

Start a dialogue

Hey short term memory You let me down when.....
And this makes me feel....
I think I must be....
Another time yesterday you.....
Etc
Excerpts from Roland, my ultimate learning experience!

This story is about comfortable. Comfortable can be the sort of feeling which happens sitting in a sofa. Now after a long hard day it's really easy to be comfortable in a sofa as long as it's in a quiet living room. But suppose the living room is not quiet. Suppose one imagines two dogs are growling at each another, in the living room, the comfort is different. I guess if one always thought about growling dogs when ever one sat in a sofa it might actually be uncomfortable to be comfortable in the sofa without the growling dogs. So this story is about comfortable. I want to take you to a place where one is as comfortable with or without the growling dogs, so to say...

Well I know now that I felt on edge. I knew that now. I was so on edge for so long that I didn't even know it. I thought being on edge was the way I was. So with this in mind, but not actually being aware of it I went to three places which made me feel much more comfortable. First was the Tomatis Ear Centre in Paris, the second the Gerda Boyesen Massage Center in London and thirdly the Universal Ashram in Toronto...

I always knew how to read, but after Tomatis reading was different. I had much more patience to absorb the material and enjoy the process. It was as if I could eat the sounds around me and they all tasted good including the ones made in my minds ear during reading.

Please could you answer the following questions:

What is it that Roland is conveying?

What is your theory (for example what are the 'growling dogs'?)

How do you understand this process?

What may have happened in the treatment/practices he became involved in?

What is his learning strenghts?

Any comment/critique and relationship to your own story would be appreciated

Feel free to not answer all the questions. Just answer spontaneously what occurs to you.

Kay 12310
Early childhood memories and health.

Supa 8/10/08

These are questions I have asked this round of action research cycle to do. You don’t have to do heaps of writing. Just choose those that resonate with you and ‘let it rip’. The main thing is to make it personal and don’t worry about grammar and sentence structure. If you could get this done and sent a couple of days BEFORE the 30th October this would help our conversation.

Culture and Family
- What is your earliest memory?
- What influence your learning growing up?
- Do you consider you learn differently to others?
- Describe your learning style?
- My learning style is different because...
- What is different about my learning is that others...

Learning
- School first days and attitude
- Was learning fun? Describe a scene of you before 5 yo
- How did you learn that was different from kids around you?
- Did parents help you with learning? Give a story of help
- Can you picture actual events of learning clearly? Give examples.

Health and Wellbeing- The body dimension
What is good health?
What and how would you see, feel, think and ACT in good health?

What is your attitude to any health issues you have faced or face now?

Your children- describe any situation that is similar to your learning style
That either
- annoys you or
- You just think is wonderful to see etc.
Has your health limited/expended your decisions about...
- Career?
- Study choices? (formal and informal)
- Relationships?

In your words what is stress?
- How do you self-regulate your stress? Give as many examples as you can.
- Your earliest memories of being stressed/anxious when you were growing up
- What were your childhood fears?
- When do you feel most stressed? (Present day)

What illnesses did you have as a child?
- Tell story about when you were sick
- What was the most important thing you learned about being sick and getting well then?

Family tension? What and how did it affect you?

Present day
What are the struggles in getting a ‘fair deal’ with your studies?
Have you experienced any sort of prejudice about the way you learn, look, gender in the Uni?
In the community?
Appendix 8

SCU Ethics (ECN 05-147)

Approval Letter (December 8, 2005).

Change of Protocol (February 2007).
SOUTHERN CROSS UNIVERSITY
~ MEMORANDUM ~

To: B. Taylor/K. Davis/K. Distel
Nursing and Health Care Practices
btaylor1@scu.edu.au,kdavis@scu.edu.au,kay@soundeducation.com.au

From: Secretary, Human Research Ethics Committee
Graduate Research College

Date: 8 December 2005

Project: The Language of Dyslexia

Status: Approved subject to the standard conditions
Approval Number ECN-05-147

HUMAN RESEARCH ETHICS COMMITTEE

At the meeting of the Human Research Ethics Committee, held on 5/12/05 your application was considered by the HREC.

This application has been approved by the HREC subject to the following standard conditions.

The Committee commended this application. Would the researchers give permission for this application to be used as an exemplar in the future? The Secretary is always chasing good applications to use as examples for other researchers.

**Standard Conditions** (in accordance with the Guidelines of the NHMRC National Statement on Ethical Conduct in Research Involving Humans):

1. That the principal investigator/person responsible (usually the Supervisor) **provide a report every 12 months** during the conduct of the research project specifically including:

   (a) The security of the records.
   (b) Compliance with the approved consent procedures and documentation.
   (c) Compliance with other special conditions.
   (d) Any changes of protocol to the research.

   **Note:** Compliance to the reporting is mandatory to the approval of this research.

2. That the person responsible and/or associates report and present to the Committee for approval any **change in protocol**

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3. That a report is sent to HREC when the project has been completed.

4. That the person responsible and/or associates report immediately anything that might affect ethical acceptance of the research protocol.

5. That the person responsible and/or associates report immediately any serious adverse events/effects on participants.

6. That the person responsible and/or associates report immediately any unforeseen events that might affect continued ethical acceptability of the project.

7. That, if this research is conducted in a country other than Australia, all research protocols for that country are followed ethically and with appropriate cultural sensitivity.

8. That Participants be advised in writing that:

The ethical aspects of this study have been approved by the Southern Cross University Human Research Ethics Committee. The Approval Number is ECN-05-147. If you have any complaints or reservations about any ethical aspect of your participation in this research, you may contact the Committee through the Ethics Complaints Officer, Ms Suze Kelly, (telephone (02) 6626-9139 or fax (02) 6626 9145, email: skelly1@scu.edu.au

Any complaint you make will be treated in confidence and investigated, and you will be informed of the outcome.

Suzanne Kelly
Secretary, HREC
Ph: (02) 6626 9139
skelly1@scu.edu.au

Dr Baden Offord
Chair, HREC
Ph: (02) 6620 3162
rofford@scu.edu.au
Southern Cross University

HUMAN RESEARCH ETHICS COMMITTEE (HREC)

CHANGES OF PROTOCOL

COMPLIANCE: Refer to National Statement 2.33 – 2.38
In particular 2.37 (b)

PLEASE TYPE

Name of Project: Language of Dyslexia

Ethics Approval No and Date of approval: JCN-05-147

Name of Principal Investigator/Supervisor/Person Responsible (to sign below): Dr. Kierrynn Davis and Professor Rev Taylor

Email Address and Telephone contact: kierrynn.davis@scu.edu.au Ext 3673

Name of Associate/Student/Researcher (to sign below): Kay Distel

Email Address and Telephone contact: kay@toucheducation.com.au and Tel 0425-242-123 or (07)3359-7056

Changes in Protocol: Please inform the HREC of any changes in protocol to the original approval of this project. Please attach any specific documentation necessary.

If the project has changed dramatically, then a new HREC application must be completed and submitted for expedited approval by the Chair.

Issue: The present action research project involves working with adults in the University and the community with 'interest' in Specific Learning Difficulties (dyslexia) in order to assist them to improve their learning. In the first round of Action Research it was difficult to sustain sufficient numbers in ongoing groups as envisaged. This led to a change in working more in a mentoring style of contact as we developed individual action plans.

Change of protocol needed:

The difficulties in sustaining the action research group has necessitated a change of approach. The approach chosen is to offer a one-on-one 'mentoring' format to targeted/selected groups of parents or professionals who are interested in developing and implementing strategies in their particular environments to help people with learning difficulties (dyslexia) to improve their learning. The use of this approach will involve each participant implementing individual action learning plans.

There will be an initial (group or individual) meeting which will explain mentoring and the ethics process and required involvement. Two individual face-to-face meetings will be scheduled at the beginning of the process and at the end. Follow up meetings will be held in-between. These will be conducted by internet, and phone.

The change of protocol will involve inviting the attendees of the following seminars to participate in individual action learning cycles.

Change of Protocol form

Feb 2007


3. Community Group of Parents of Gifted and Talented Children who attend a seminar entitled: ‘Understanding and Preventing Learning Difficulties’, to be held in Far West Queensland, August 29, 2007 (Parents)

The same processes and procedures, that have previously been approved will be followed. Attendees at the seminars will be invited to participate, and they will be provided with a plain language statement and consent form. The proposed commencement date is late August. The time commitment of the participants is 2 hours, which is the same as the previous SCU action research cycle. The two hourly meetings are expected to continue fortnightly until late November 2007.

________________________________________
Signature of Principal Investigator/Supervisor/Person Responsible:

________________________________________
Date:

________________________________________
Signature of Associate/Student/Researcher:

________________________________________
Date:
Appendix 9

Dyslexia Adult Screening Test information (DAST)

The Dyslexia Adult Screening Test (DAST)

Information for Students and Staff

The University Counselling Service will provide screening tests for dyslexia to students and staff referred by the University Disability Officer (DO). This service will be offered free of charge.

The purpose of this service is to:

- Screen selected students and staff for dyslexia.
- Provide a written report that will assist the DO to arrange appropriate:
  a) academic accommodations for students with possible learning disorders; or
  b) workplace assistance for staff with possible learning disorders.
- Identify whether a referral to a qualified psychologist for further comprehensive assessment for learning disorders would be recommended.

The Dyslexia Adult Screening Test (DAST) is a first step in the assessment process to identify if someone may have dyslexia, or other learning disorders. It can provide information about whether a person may be at low or high “risk” for dyslexia, and it can help identify if further comprehensive assessment for learning disorders would be recommended (the second step in the assessment process). Please note, the DAST will not indicate “definitely” if a person has dyslexia. The DAST can provide useful information which will help the DO identify your special needs and arrange appropriate academic assistance.

This service is only available to students and staff referred to the Counselling Service by the DO. The DO will contact you to arrange an appointment time with a Counsellor to have this assessment, which will take place in the Student Support Centre meeting room. On arriving at the Student Support Centre for your appointment, just advise the receptionist and take a seat. The Counsellor who will be administering the DAST will come and find you at the reception area.
Administering the Dyslexia Adult Screening Test usually takes between 1½ to 2 hours. You will then be asked to attend a second meeting at another time (which will take about thirty minutes), during which the Counsellor will explain the results of the assessment and answer questions, where possible. A written report will be provided to you, and a copy of the report will be forwarded to the DO. Please note, it will then be up to you to arrange an appointment to see the DO to discuss any follow-up assistance that may be required.

For further information about this service, please contact Student Support on telephone (02) 6620 3943 or email disability@scu.edu.au

**Dyslexia and the Dyslexia Adult Screening Test (DAST)**

'The longstanding formal definition of developmental dyslexia was stated by the World Federation of Neurology in 1968 "a disorder in children who, despite conventional classroom experience, fail to attain the language skills of reading, writing and spelling commensurate with their intellectual abilities."

'Interestingly, however, though dyslexia is normally considered a developmental disorder, research has shown that dyslexia has clear genetic origins, and will affect adults as well as children.

'The incidence of dyslexia in the school population is high (5-10%), and since dyslexia has neurological origins, the incidence in adults will be essentially the same.

'The Dyslexia Adult Screening Test (DAST) is intended as a screening instrument for use routinely within further education and/or employment for adults up to 75 years of age.'*

While the DAST can highlight factors associated with a range of learning disorders, it does not screen for all types of learning disorders, and this is one of the reasons why further comprehensive assessment with an appropriately qualified psychologist may be recommended.