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13.1: DIS/ABILITY IN THE WRITING  
CENTER

# VOL 13, NO 1 (2015): DIS/ABILITY IN THE WRITING CENTER

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## FROM THE EDITORS

Thomas Spitzer-Hanks & James Garner

The University of Texas at Austin

praxisuwc@gmail.com

We are enormously proud to be publishing this issue. While previous issues have always included one or two articles, columns or features focused on what could be considered non-traditional or non-typical subject matter for the study of writing center research and practice, this issue takes as its focus just that: the non-typical.

It is worth asking, though, what we mean by ‘typical.’ Merriam-Webster’s defines ‘typical’ as “normal for a person, thing, or group,” “average or usual,” “constituting or having the nature of a type” or “conforming to a type.” From this we can see that being normal, being average, conforming or constituting a type is what makes one typical, while being non-typical is doing fewer or none of these things. People with dis/abilities are, as various authors in this issue note, defined as Other against exactly this ‘type,’ which is assumed to be ‘able’ in body and mind, and which has for too long formed the imagined average user of the writing center around and for whom writing center services are designed. This issue asks us to question what we perceive to be typical, what we value as average and treat as the norm, and what the effects on non-conforming people are.

In Stephanie Ries’ column she asks what changes when we consider disability in the design and use of multimodal environments generally, and online writing centers specifically, pointing out that in both cases, 19% of graduate and undergraduate students with various disabilities are part of the population meant to be using them. As education and writing center work enter new environments, Ries notes, it is necessary to extend the same welcome to all writers that we would expect from a traditional writing center environment. Hailey Hughes argues for a “thought-change” on the part of those staffing traditional writing centers, suggesting that some of the basic tenets of writing center work may look and feel quite different when that work not only includes but accommodates writers with disabilities; finally, Anna Rollins takes us out of the center and asks how we can promote writing centers in campus communities in inclusive, non-hierarchical ways that emphasize the differences between classroom and center and challenge the

common misperception that writing centers exist to make writers and their writing conform to the typical.

In their focus articles, the authors published in this issue approach the question of disability in the writing center from other angles. In her article on new approaches to disability in the writing center, Kerri Rinaldi suggests that the ways we strategize around writers with disabilities may be problematic:

Our theory prioritizes collaboration among equals—granting power to the tutee and letting them guide the session, assert their needs, and come to their own conclusions. Yet, if a student has a disability, we treat the disability as an obstacle or shortcoming instead of a contributor to her agency. The way we have been socialized to view disability leads us to think of the disability as an ailment and of strategy as the cure.

Rinaldi suggests that rather than strategizing, we do *nothing* new, simply applying the same principles to our work with disabled writers as we would to our work with ‘typical’ writers, trusting writers with disabilities to know what accommodations they need to achieve their goals.

M. Melissa Elston notes that ‘finding the Other in the center’ is possible even when there are no students present; as the director of a center and a person living with an anxiety disorder, she has different challenges to navigate, including the choice of disclosing her disability to those who assume that disability enters the writing center from without. Elston makes concrete recommendations on how to make writing center space “Crip” space by rethinking center policy and mission, tutor training, and session guidelines, framing these changes as challenges to longstanding traditions that prize conformity above connection. Continuing Elston’s project of including the non-typical in the typical operations of the writing center, Sharifa Daniels, Rebecca Day Babcock, and Doria Daniels ask what happens when we no longer see disability as something a person ‘has,’ and instead see disability as constituted by the barriers that complicate a person’s full inclusion in and access to a given environment.

Hillary Degner, Kylie Wojciehowski and Christopher Giroux continue the theme of locating

non-typical people within the writing center in their article on supporting tutors with mental illnesses or concerns, in which they describe their quantitative, undergraduate-led research. This survey-based research asked tutors various questions designed to assess tutor likelihood of disclosure, levels of administrative support for tutors with mental illness, and what impact those illnesses have on tutor's work with writers. Their results indicate both that a great deal more research is needed to better understand how tutor disability impacts writing centers as working environments and as sources of writing assistance, and that tutors are not always as included in writing center planning as the writers they serve.

Finally, Rebecca Day Babcock's "Disabilities in the Writing Center" offers an overview of every published article on disability in writing centers – an article that, as of the date of this publication, will need to be revised. This is one source of the feeling of pride we mentioned at the start of this column. As editors of *Praxis* we have been given the opportunity to facilitate our author's additions to writing center scholarship in an area that is deeply personal and which touches writing centers on a number of levels, from the theoretical to the practical, affecting everyone in the writing center from the director, to the tutors, to the writers our centers serve. We were given this opportunity by our former managing editor, Sarah Orem, whose scholarship in this area has been an inspiration. We would like to take this opportunity to thank her for writing the call for papers that began this issue's progress towards publication, for contacting scholars across the country on our behalf, and for the tireless work she has put in as a member of *Praxis'* editorial review board.

The other source of pride that attends the publication of this issue comes from the knowledge that *Praxis'* ongoing editorial position is perfectly expressed in this issue. While the authors in this issue disagree on important issues like disclosure and frame their inquiries in ways that may seem disparate from each other, that multivocality and rich diversity is exactly what *Praxis* believes is central to writing center work. We no more require our authors to agree than we require our writers to conform to a type, whether that be somatic or intellectual, and we strongly believe that *Praxis'* vision in this issue is the vision of a writing center in action.

## EQUITY AND ABILITY: METAPHORS OF INCLUSION IN WRITING CENTER PROMOTION

Anna Rollins

Marshall University

jones453@marshall.edu

As I promote the services that our writing center offers to faculty members across disciplines, I always try to be careful of the language I use to discuss exactly what it is we do in our writing center. I know the perceptions: *the writing center will help you with your grammar* or *the writing center will help you fix your paper*. Our goal, I try to emphasize to faculty members, is not to help your students fix their papers; our goal is to help them become better writers.

The way these two ideals contradict one another is not always apparently obvious to an individual not steeped in the scholarship of composition or writing center theory. Those of us who work with first year writers or in the writing center know that the metaphor invoked in the phrase “my writing needs to be fixed” is one that is inaccurate at best and crushing at worst; in fact, a student’s writing is not something that is broken. And even if the writing appears to convey a student’s gaps in knowledge regarding composition, we do not want our writing centers to be viewed as places where those with splintered skills receive a sort of diagnosis and prescription.

If the writing center were to resemble any part of the health professions, it would mirror the more egalitarian relationship held by a client and therapist than it would a patient and surgeon. Bones can be broken, but minds, of course, **cannot**.

The students who enter our writing centers, though, do often feel as if their writing is **hardly without gaps, if not broken**. The students who feel the weight of this disparagement are ones that we would often categorize as basic writers. Of course, as David Bartholomae notes with regards to the basic writer in his landmark “The Study of Error,” “basic writers do not, in general, write ‘immature’ sentences. [...] In fact they often attempt syntax whose surface is more complex

than that of more successful freshman writers” (254). These students who receive the label of basic writers, who are sentenced frequently to making an appointment at the writing center (as if it were some sort of punishment), are in many ways succeeding at their own writing in ways that are less privileged, and thus less acknowledged. These students are often more creative, crafting complicated syntax in their compositions, than their praised, play-it-safe peers.

Of course, these basic writers do need help with writing (and, I may add, that if writing is a way of knowing and doing, as Michael Carter postulates, then their peers, and all of us, for that matter, need help, too: because who can ever say that they perfectly *know*, *do*, and thus, *write*). Bartholomae does advocate the usage of error analysis as “a method of diagnosis” in the composition classroom (258). That analysis, though, can happen in ways that are much more intimate and personal in the writing center than it could in a classroom filled with rows of students.

Part of what makes the ethos of a writing center more equitable is how its function differs from that of a classroom. In Peter Carino’s “Early Writing Centers: Toward a History,” a significant distinction is made between the function of a writing center and the function of a classroom. Although the model for the writing center is based upon the laboratory method, a method that allowed for more individual instruction (Carino 12), the atmosphere for the writing center is much different than the atmosphere for the classroom. One of the most notable differences is that of authoritarian roles. In the traditional model for the classroom, the teacher is the individual who possesses the most knowledge concerning a particular subject. The students, likewise, are to be receivers of the teacher’s knowledge. The writing center, and the atmosphere in the writing center,

should not be like that of a traditional classroom. In fact, the tutor-tutee relationship should be similar to a peer relationship. Carino states, “sensitivity to individual students’ needs and [...] willingness to abdicate some teacherly authority prefigure much of what is valued in writing center tutors today” (18).

In the same vein, Elizabeth Boquet’s “‘Our Little Secret’: A History of Writing Centers, Pre- to Post-Open Admissions” talks about techniques tutors can learn in order to help students in a more open, peer-to-peer relationship. Boquet makes a distinction between “working with consultants” (42) as opposed to working for consultants. According to Dr. Mariann Regan, one of the best ways to work with a student involves “questioning the student” (42). Through guided questioning, which leads to conversation, the student not only develops knowledge about how to go about the writing process **alone**, but also gains the confidence to do so.

And developing knowledge of the writing process is a fundamental goal of our writing centers; learning about the writing process is what allows us to help students become better writers, rather than just fix their papers. As Mina Shaughnessy notes in *Errors and Expectations*, the writer with basic skills is not simply a writer who lacks particular skills and is apprehensive, but is skeptical of the writing process as a whole. Shaughnessy states that this particular individual may feel that anyone in a position of evaluating writing is simply “searching for flaws” (7). This state of mind creates an environment that is not open to idea exploration and general creativity. Debunking the myth that the writing center is only where broken writers go and dispelling the idea that our tutors are searching for flaws rather than conversing about composition are crucial to the climate and mission of the writing center. The way we craft the narrative about our centers implicitly affects the quality of writing that emerges from our sessions. Actively resisting metaphors of debility as we promote our centers across campus aids in helping *all* writers, basic or advanced, succeed.

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## THE ONLINE WRITING CENTER: REACHING OUT TO STUDENTS WITH DISABILITIES

Stephanie Ries  
University of Findlay  
riess@findlay.edu

The case for online Writing Center services has been built upon arguments of geographical needs, cost effectiveness, and overall time efficiency. A largely overlooked population who would benefit from these online services is that of students with disabilities. Stephanie Kerschbaum comments on this overlooked population in her text on multimodality stating, “Far too often, disability is an afterthought rather than considered at the incipient design of the digital text.” The case for Online Writing Centers is no different. As centers grapple with which programs to use and how to train tutors to work in this environment, they overlook the use of online tutoring for students with disabilities. In exploring how this interface can preserve identity and promote accessibility, Writing Centers can create a greater outreach to a diverse student body.

As a whole, Online Writing Instruction is undergoing what *Kairos* calls a “retrofit.” A series of recent studies presented by this publication in *Multimodality in Motion* has found that instructors naturally create teaching strategies “privileging” those students who can be present in class, over those who have to participate in other ways (Selfe). In the online classroom this translates to a priority of attention being given to students who can immediately submit a response, compared to those students who must find alternative ways to respond such as fingering through a braille keyboard. The one-on-one atmosphere of the Writing Center can immediately confront this tendency to unwittingly privilege any one student over another with the intimacy created through rapport in every session.

Whether online or in person, sessions begin with rapport being built between the student and peer tutor. Rapport fosters an environment built on trust where the student feels comfortable admitting to their struggles as a writer. In the University of Southern California’s Online Writing Center, students are required to fill out a questionnaire for tutors to get to know them by prior to the actual session (Anderson 78). This introductory survey assesses how student writers feel about themselves without being too invasive or forcing the participant to discuss any information that may be uncomfortable for them to

discuss. It inquires about students’ feelings towards writing, what their assignment goals are, and what steps they have already taken to get help. This simple precursor could allow students with disabilities to express their concerns as a writer and a student in need of specific modifications, but only to the extents that they are comfortable with. If the student wanted to, they could entirely omit any information pertaining to their disability. Thus, the student is given the chance to create and control their online identity.

The idea of this online persona translates to any student type, where the student might be apprehensive to seek help in person. Students with disabilities may have apprehension rooted in the physical nature of their session, where accommodations may feel time consuming or inconvenient. OWI researchers Oswal and Meloncon have found that between 60-80% of students with disabilities wish to conceal their disability altogether (283). What effect this has on personhood is indefinable, but there is empowerment present when students are able to control the perceptions that others have of them. Additionally the accessibility of online tutoring can bring the Writing Center to the student, who may otherwise have difficulties physically commuting to campus. In allowing students to have the option of scheduling an online appointment, the Writing Center creates a safe space for learning.

Issues have manifested themselves in the past when students with disabilities have obtained their education online. Teachers may not consider modifying what seems to be an already accessible technology, to accommodate the needs of students with disabilities. Oswal and Meloncon found in their research that many professors “had no desire” to change their current online course structure to meet the specific needs of students (279). Further, because the screen can be a barrier rather than a “window” professors may not even know that their students have disabilities (Turrentine and MacDonald 6). The argument against a more supportive online classroom could go on indefinitely based on low teacher compensation and the copious hours put into lesson planning. Regardless of this debate, in translating the

problem of modifying the online classroom to the Online Writing Center, the issue is quickly resolved.

The Writing Center is in a prime position to address the one-on-one concerns that the typical learning environment cannot. Tutors have the ability to tailor their strategies to meet the needs of students on the spot. The University of Wisconsin at Madison has recently documented an experimental session in their Writing Center whereby two tutors were part of an online, synchronous, webcam based session. The tutors noted that as they observed successful techniques in the other tutor's style, they were able to immediately adopt that technique into their own tutoring persona (Misemer). This same situationally adaptive technique is used when a single tutor works with a student. In the online environment the tutor is able to note where and how the student responds. This response may be via email, embedded in the assignment document, or in a shared document space. The ability to adapt to specific student needs instantaneously is a luxury, common in the Writing Center space, but not afforded in the typical classroom environment. For students with disabilities, such an easily adapted educational strategy is a necessity. Writing Centers should use this educational superpower as a means of reaching out specifically to students who have a difficult time in the physical classroom because of their disability. Not only is the session itself more easily accessible in this online space, but the content can be the focus of the session as modifications can be made in a timely manner.

In the physical classroom environment, students may experience a power struggle where they are told *how* to learn rather than *empowered* as learners. In the online platform the tutor becomes "a learning guide," instead of taking on the "lecturer" role (Packham et al. 243). As a learning guide, the tutor can empower the student to take control of their own writing. For students with disabilities, this sense of control is often robbed from them. Certain impairments might make them dependent on the aid of another person or assistive technology. But as soon as the student logs in to their Writing Center appointment online, they are elevated to the status of being a writer. With that, control is given back to the student in the form of their authorship.

The learner autonomy fostered in physical Writing Center appointments is exponentially multiplied online where the tutor can link to online references and cover more textual ground than in a face-to-face session. This supports the crux of academic support where Writing Centers "help students to become better writers and not necessarily create better papers" (Thompson 128). For those students who have to allot

time orchestrating travel and hiring physical aid to accommodate their disabilities, spending *extra* time to become a better writer may have never been an affordable goal. Finding ways to be physically present may be complicated enough.

As Writing Centers are beginning to recognize a growing need for online services and online training pedagogy, the time has presented itself to address how these online sessions can be used or further improved to meet the needs of students with disabilities. It has been estimated that around 19% of graduate and undergraduate students combined suffer from various disabilities (Oswal and Meloncon 272). With such a staggering number, education and educational tools, such as the Writing Center, must make themselves as accessible as possible. Writing Center pedagogy, in seeking to create autonomous student writers, already has the basic notions by which the needs of any student can be met virtually in the intimate nature of the one-on-one session. As we push forward for these services to become common practice, we must be cognizant of those with disabilities in order to preserve identity and promote independence.

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## ENGLISH FOR ALL: THE IMPORTANCE OF PEDAGOGICAL STRATEGIES FOR STUDENTS WITH LEARNING DISABILITIES IN THE WRITING CENTER

Hailey Hughes

Marshall University

hughes260@marshall.edu

At the beginning of the spring semester this year, I tutored a student diagnosed with Asperger's Syndrome. He brought in a research paper on the process and dangers of fracking. He needed help with grammar and developing cohesive structure. During the appointment, I began to notice that he became easily overwhelmed with the volume of his research and the content of the essay. As I pointed out some grammatical errors in the piece with him, it became apparent that he was aware of the conventions, but the lack of organization caused him to make these mistakes. The client's research was amazing. It was clear to me that he did not lack knowledge that basic writers lack as a result of inexperience; instead, his sensory issues prevented him from expressing himself the way he wanted.

An issue that has arisen and been addressed is that basic writing and LD writing appear synonymously in the composition field, in regard to pedagogical strategies and definition. In fact, Kimber Barber-Fendley and Chris Hamel, in their article, "A New Visibility: An Argument for Assistive Writing for Students with Learning Disabilities" assert that there is not currently a way to distinguish between the traits of a basic writer and an LD writer (507). This is significant because there are important differences between them, but at present there is not a way to distinguish writing differences between basic writing and LD writing. Basic writers and LD writers tend to make the same types of mistakes with grammar conventions, such as spelling, and this is why distinguishing between the two is so difficult. According to Penny Lacey in "Key Concepts in Learning Disabilities," students with learning disabilities have specific difficulties with language comprehension and retention, so it is not surprising that students tend to struggle in composition courses as they encounter newer concepts, such as the application of literary devices in analyses or structuring a composition piece appropriately.

Currently, there are increasingly positive articles about LD writers. In fact, Christine M. Hamel, in her article "Learning Disabilities in the Writing Center: Challenging Our Perspectives?" discusses the concept

of "a thought change experiment," where we, as writing center tutors and future instructors, change our way of thinking about students with learning disabilities. Hamel expresses the need to embrace writing composed by someone with LD as another way of expressing oneself, even if it is not reflective of the traditional linear model (2). Hamel extends a call to action to tutors that it might trickle up to professors and experts in the composition field. This change requires a shift in pedagogy. Another article that signals a shift in perceptions of people with disabilities, which could also be impactful for those with learning disabilities as it is welcomed into the field of disability studies, is "Where We Are: Disability and Accessibility—Moving Beyond Disability 2.0 in Composition Studies" by Tara Wood. In the article, Wood explains that a disability is just like any other ethnic or gender difference a student may have, but is not considered an issue that impedes the learning process, that needs to be corrected (Wood et. al. 148). This exemplifies what a perspective shift scholars have made: whereas before they viewed disabilities in general as something that needs fixing, that impedes knowledge, now disabilities are just an inherent part of a human being. These articles reflect how experts in the composition field are starting to adjust their perceptions and becoming more open to adjusting their pedagogy for *all* students.

One should expand upon Hamel's "thought-change" experiment as a precursor to any hands-on applications in the writing center. The reasoning behind this is that tutors need to change their frame of mind before they can effectively implement different pedagogical strategies. Hamel expands on her thought-change experiment by imploring that we expand our ways of learning outside the traditional linear model text, that if we don't do this then we are isolating those with LD, and losing significant contributions to society (Hamel 3). This "thought-change experiment" can then be applied to the writing center, the author explains, saying that the way a writing center functions as a "collaboration" with the client, allows for different kinds of learning to take place. These kinds of collaborations can "re-able" a student with LD

(Hamel 4). This is the first step: to be open to all the possibilities of learning and adjust our pedagogy so that students with LD can express themselves properly.

Once an instructor or tutor has gone through this “thought change,” there are some hands-on applications that can be employed to help students with LD in the classroom. In fact, according to Brenda Brueggemann et. al., in their article, “Becoming Visible: Lessons in disability,” oral transcription and expression seems to be a fair theoretical approach for those who struggle with writing. This also seems to be a typical accommodation for students at the post-secondary level. In fact, I use this strategy with clients with a language processing difficulty in the writing center is type for them, while they dictate what they want to convey. In *Learning Re-Abled: The Learning Disability Controversy and Composition Studies*, Patricia A. Dunn also expresses the need for “more explicit or multisensory instruction” for students with learning disabilities. (64). Color coding writing assignments also seems to be useful for adapting assignments for students with LD because you are reinforcing the instruction more than one way and is an example of using multisensory assignments, especially if you pair it with something tangible, like colored notecards. Dunn expands on these methods of multisensory approaches by discussing techniques that elementary school teachers have used to help their students learn to read and spell, because there is even less scholarship available about teaching methods at the collegiate level for LD students, and because their condition still needs to be validated (Dunn 76). These strategies can be adapted to a tutoring session with some creativity. For example, teach transitional phrases by color-coding them, thus reinforcing an important element in any composition piece. Kathleen D. De Mers, in her article, “‘The Brain within its Groove’: Language and Struggling Students,” suggests adaptive technology to help those with disabilities achieve independence with literacy and writing.

When I was tutoring the student with Asperger’s, I decided that before I even started to help him with the content of his paper, we needed to outline the argument and progression of his paper to form a cohesive structure. It may seem too simplistic and instinctual to suggest an outline to clients with a learning disability, because that should be the first step for any writer. However, outlines are extremely effective for clients with Asperger’s or ADHD, because they allow the content to be organized in a basic way that is not distracting by being visually chaotic. One of the strategies that I insist upon is the color-coding technique. In fact, with this client’s

research, we highlighted the important aspects in his research with different colors depending on the parts of the outline. Just by employing these strategies, he became less stressed and we were able to work through his paper.

As tutors, it is our responsibility to allow clients the opportunity to express themselves properly. As people passionate about English, we value the human experience, so it is important to let our practice reflect all aspects of the human experience, even those that do not seem typical or normal. We must encourage students of all abilities by encouraging them to express themselves in all sorts of mediums. Only then can we have a complete portrait of the human experience.

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## DISABILITY IN THE WRITING CENTER: A NEW APPROACH (THAT'S NOT SO NEW)

Kerri Rinaldi  
Drexel University  
kr552@drexel.edu

### Introduction

Recently, I met a writing center administrator from a nearby institution at a social event. When she discovered that I am both deaf and a writing center consultant, she became very excited to talk to me. Her institution serves a large population of deaf students and she wondered if I had any tips or advice for working with them. Though her institution offered extra time for these sessions and training on how to work with an ASL interpreter, there were still challenges, she said—like one student who wanted to write back and forth rather than use an interpreter. While it worked, the tutor found it to be cumbersome.

My advice was to simply defer to the student's communication preferences. She wasn't convinced. "But—I can't help but feel like we should be doing something *else*," she said. "What more? What else should we do?" she asked.

This is by far not the only time I have encountered this kind of resistance and desperation for an answer. I get asked often, "Can you tell me how to best work with deaf tutees? How should I communicate with a deaf tutee?" When I reply, "Well, however that student prefers," I can tell the inquisitor feels disappointed, like this is not a real answer—a copout.

Though these interactions have never sat well with me, I admit that the requests usually seem sincere: a genuine interest in improving writing center sessions for deaf students. But, I can't shake the feeling that I'm not really being asked how to make sessions more accessible for deaf students. Instead, it feels like I'm being asked for some magic formula, some kernel of knowledge—if only a tutor could just locate this information, then the challenge of deafness could somehow be neutralized, and the sessions would be easier, more manageable—more *normal*. These interactions sit wrong with me, I realized, because they are evidence that in writing center practice, we are still approaching disability from a problematic standpoint.

### What We Claim To Do Vs. Reality

The very foundation of writing center theory is based on the idea of a conversation between two

equals—a space in which we construct knowledge together as peers, not instruct from a position of power. The writing center is not a site of remediation, but rather the ideal tutoring session is one in which egalitarian and collaborative conversation occurs (see Bruffee and North).

Of course, this is a lofty ideal and does not always occur in practice. Many scholars have gone on to richly complicate the tutor-tutee relationship, critiquing the standard of a true balance in power. Trimbur, for example, states that tutors experience a contradiction in roles: They are encouraged to disassemble the hierarchal structure of academia despite that they have been rewarded in the past—and will continue to be rewarded—for observing and upholding this hierarchy (23). Shamoan and Burns likewise complicate the idealized orthodoxy of writing center practices—that is, collaborative, non-directive instruction that is student-centered and does not appropriate the student's text (135). They argue that a one-size-fits-all approach is not sustainable, especially when transmitting discourse community knowledge (Shamoan and Burns 139). Because unorthodox techniques can give tutees access to rhetorical knowledge that is often kept hidden to uphold others' status and power in academia, non-standard tutoring practices can actually empower students (Shamoan and Burns 146).

As complex as the tutor-tutee power dynamic may be, we still strive to uphold the student's power and agency in tutoring sessions. Yet, when it comes to disability, there is something amiss that provokes us to forget about—or at least muddy—these ideals. Though writing center theory stresses that we should adjust our practices to always meet the particular needs and personality of the individual tutee, "there exists a level of discomfort, for tutors as well as tutees, when differently-abled or other-cultured writers visit Writing Centers" (Lockett 1).

Writing center theory has arguably moved beyond the medical model of disability—the dominant view that considers disability to be a medical deficit—and has taken up the question of how to meet the needs of disabled students. However, it still views disability as a

deviation from the norm and students with disabilities as the other. Hitt has termed this the accommodation model: a “well intentioned approach to disability that seeks to meet students’ needs yet positions disability as something *different*” (“#iwca”).

This problematic positioning persists despite that numerous scholars have called for the field to re-envision how we think about disability—for example, Babcock, who herself responds to that call in her work on deaf students (*Tutoring Deaf College Students* iv). In “Changing Notions of Difference in the Writing Center: The Possibilities of Universal Design,” Kiedaisch and Dinitz suggest that to move away from tutor training that others disabled students, we should incorporate elements of Universal Design—that is, designing our spaces and practices to meet the needs of a wide range of students. When a disability specialist came to speak to their tutor training class at UVM, she recommended that in a session with a disabled student, tutors should actively try *not* to think about how they will adjust their strategies for that student’s disability (Kiedaisch and Dinitz 50). Because each student is different, sessions with a tutee with a disability, then, should look no different than any other session (Kiedaisch and Dinitz 50). To impart this to new tutors during training, Kiedaisch and Dinitz prioritize identity over difference: They emphasize that we are *all* different and each brings a wholly individualistic personhood to the table, and they encourage their tutors to inspect and investigate their own identities to better understand this notion (44, 47).

For students, this approach can inspire critical introspection and thoughtful examination of identity in remarkable ways—something I am in a unique position to claim, as I was trained by Jean Kiedaisch and Sue Dinitz as a peer undergraduate tutor at UVM, shortly after they integrated Universal Design into their tutor training. In fact, the students quoted in Kiedaisch and Dinitz’s article were my classmates, and the class the disability specialist came to speak to was my own. And while I can see how positively this approach to disability impacted my own tutoring practice, a decade later, I cannot ignore how our discourse still clings to the accommodation model.

### Why Does This Model Persist?

In recent years, writing center theory has indeed taken up the task of critically examining how writing centers encounter and engage with marginalized identities, especially race and gender. For example, in *Facing the Center: Toward an Identity Politics of One-To-One Mentoring*, Denny explores the complex implications of

identity in the writing center, highlighting race, class, sex, gender, and nationality. In *Writing Centers and the New Racism*, Greenfield and Rowan note that writing centers have been called to examine how the “material reality” and rhetoric of racism inform our work, though we have often responded to this call with rhetorical moves that recenter, silence, or distract the conversation instead of truly engaging with race (2). In *I Hope I Join the Band*, however, Condon invokes critical race theory and a range of other disciplines to provide a deeply nuanced look at the role racism plays in our lives as educators and rhetors. Condon’s work exemplifies what rich critical engagement with race that extends the conversation looks like—interrogating, critiquing, and reflecting on what it means to perform the labor of authentic anti-racist activism.

These works and others (such as Denny; Sloan and Rihn’s work on gender and sexuality) offer a nuanced and authentic investigation of what it means to serve people of marginalized identities in the writing center. However, this kind of careful introspective work and critical conversation has been largely absent in regard to disability in the writing center.

In some ways this is not surprising, given that disability has been dubbed the “final frontier” (Rieser 118). Condon notes that although race is socially constructed, scholarship doesn’t query whether racism is real, but rather investigates how it operates institutionally and socially (Condon 21). The same does not hold true for scholarship on disability and writing. The label of ableism is still a contested space, and the social construction of disability is rarely invoked as the context from which to negotiate with ability in the writing center. This is evidenced by our literature and our field’s discourse. On listserves, for example, when the topic of disability comes up, it is almost always someone asking for advice on how to tutor a student with a particular disability. Responses are framed as how to surmount the disability—rarely acknowledging disability as an identity with a culture and a shared history of struggle against oppression.

Similarly, Greenfield and Rowan (6) note that tutor training materials have responded to calls for theoretical engagement with race and now include personal narratives and critical analysis (such as “Whispers of Coming and Going: Lessons from Fannie” and “Addressing Racial Diversity in a Writing Center: Stories and Lessons from Two Beginners”); however, disability-related materials have not followed this same trajectory. Though well intentioned at the time of publication, the dated literature on disability that we anthologize and train tutors with contributes

to the persistence of the accommodation model. Kiedaisch and Dinitz note that anthologized texts often start off by stressing that each student is an individual and generalizations about students with disabilities should be avoided (42). And yet, “in all of these textbooks, as in our own class, this explicit sensitivity and positioning are then somewhat subverted,” and a standard approach to dealing with all students in a certain subpopulation is provided (Kiedaisch and Dinitz 43).

Many of these texts include language choices and rhetorical moves that uphold the medical model, including the disability-related essays that appear in the most often used tutor training handbooks. In *The Bedford Guide for Writing Tutors*’ chapter on learning disabilities, one tip does suggest asking the tutee about the best approach. Yet, in line with Kiedaisch and Dinitz’s observations, the other tips go on to offer suggestions that are reductive—assuming that, for example, all students with a learning disability benefit from a quiet place away from distractions (Ryan and Zimmerelli 70). *The St. Martin’s Sourcebook for Writing Tutors* includes two articles related to disability, the first of which is Weaver’s article on deaf students. Weaver not only relies heavily on audist rhetoric, but she also oversimplifies the language acquisition of all deaf persons: “The deaf acquire ASL, not English, as a first language” (246). The other is Julie Neff’s highly anthologized piece on learning disabilities (382), which, like other problematic literature (see Sisk as another example), positions non-disabled students as “normal,” offers general guidelines that assume all students with a certain disability benefit from the same strategies, and assumes that all disabled students require additional help outside the realm of what “normal” students do. Though Kiedaisch and Dinitz, Hitt, and others have raised concerns with the literature, they remain in our textbooks and continue to inform new generations of tutors, communicating that these sessions are somehow different, harder, and need to be treated with more caution and skill.

In addition—despite Shamoon and Burns and others’ critiques of the orthodoxy of practice—while our pedagogy calls for flexibility, in practice it still leans towards rigidity, especially when we are confronted with tutees whom we’ve been taught to consider “non-standard.” Both Babcock (“When something” 9) and Lockett (3) have argued that when confronted with challenging sessions, we tend to cling to the *shoulds* and *should nots* of writing center practice, and this rigidity has translated to doing a less-than-stellar job of serving disabled students, for whom our mainstream strategies may not work. Thinking back to my conversation with the woman who wanted to

know what *else* she should be doing for her deaf tutee, I think one reason she was so reluctant to accept my answer is that she felt as though the sessions weren’t happening the way they were “supposed” to. Because the student had requested to not use an interpreter and instead write back and forth, sessions were long and drawn out and felt tedious to the tutor. But if this is the communication method that works for the student, why shouldn’t the session look like that? I suspect she may have also been frustrated with the student’s slow progress, despite the adjustments that had been made. Of course, struggles with the mastery of written English cannot be addressed in just a few sessions, especially when English is not the student’s first language (as was the case with the deaf student in question). Yet, because this student had a disability, it was, I think, difficult for her not to see the *disability* as the hurdle that was slowing down progress—if only she could learn how to *overcome* the disability, rapid progress in writing skill could be made. The truth was, though, that the disability meant very little in the context of the writing center session. What mattered was the *student*—the student’s specific cultural background, mood, communication style, learning style, and confidence level. Just like any other student, the student with a disability is an individual, each with her own strengths, weaknesses, and preferences.

### The Unsettling Result

As a result of all of this, our current approach to disability is one that is antithetical to the theory of writing center practice. Our theory prioritizes collaboration among equals—granting power to the tutee and letting them guide the session, assert their needs, and come to their own conclusions. Yet, if a student has a disability, we treat the disability as an obstacle or shortcoming instead of a contributor to her agency. The way we have been socialized to view disability leads us to think of the disability as an ailment and of strategy as the cure.

Thus, it’s as if we believe that sessions with these students can be successful only if they follow a procedure: Student comes to the writing center, student discloses their disability to the tutor, tutor taps into their knowledge bank of how to tutor that disability, tutor adjusts accordingly, and everything goes as best as it could have possibly gone—which will never be perfect or easy, because of the disability.

Of course, it doesn’t actually work like that. And, this line of thinking wrongly positions the disability as the most important thing to adjust for, the issue that must be addressed first before the *real* work can begin. Disability then becomes an “extra” component in the

session—one that is negative, challenging, or scary—that must be worked around rather than accepted as a part of that writer.

This approach also moves power and knowledge from the tutee to the tutor. Instead of considering the disabled student as an expert of the self, the accommodation model relies on disclosure and the tutor's knowledge—an outlook gained from problematic literature. We move from asking, "What do you need?" to "What is your disability (so that I can determine what you need)?" When a tutor feels that they need to know a student's disability so that they know how to alter their strategy, the student is effectively erased from the equation. In this context, the two most important things become the tutor and the disability—not the tutor and the tutee.

To think it's only possible to help a tutee once a disclosure has been made not only withholds agency, but also creates risk for that student. According to Kerschbaum, the act of disability disclosure is a complex process that is influenced by many elements, including "circulating narratives of disability and able-bodiedness, relationships among interlocutors, and institutional and environmental contexts" (63). When a student chooses to disclose, they consider each of these things, carefully weighing potential benefits with potential risks. Disclosing "is a risk because students cannot predict how others will react and subsequently treat them when they do disclose" (Alexandrin, Schreiber, and Henry 377). Kerschbaum notes that one of the primary risks of disclosure is that once it occurs, the disability becomes the only relevant aspect of the person (67). In the writing center, once a student discloses, the disability takes center stage as the key piece of information that all other decisions are based upon or filtered through. Suddenly, everything about that writer becomes about their disability.

### A New Approach (That's Not So New)

What I propose for how we can improve our approach to disability is simply that we apply the same non-hierarchal, collaborative, student-centered approach to students with disabilities as we do with other students. In other words, we stay true to our theoretical ideals, even when—or especially when—a disability is present. One of the most important things to remember when working with a student with a disability, therefore, is that *they know themselves best*. This means that no matter what we've read about that disability, we should defer to the student because that student's preferences and self-knowledge are far more important than their disability. In fact, I will even go so far as to say that disclosure is not even a necessary

part of the conversation when working with a student with a disability.

Whenever I suggest disclosure is not necessary, I almost always face backlash. I can remember as a graduate student, during a class discussion on disability in higher education in an Adult Literacy class, a heated discussion ensued amongst my classmates on when and how disclosure should happen. As I was presumably the only student with a disability in the class (visibly so, as I had a CART interpreter), the professor asked me to shed some light on the disability disclosure process. Listening to my classmates debate over "when" and never once considering "if" disclosure should happen, I realized they were under the impression that the disclosure process was the same across the board in all higher education institutions in the US—as if it were some easy, formal, streamlined process that had no gray areas. I highlighted the differences between my undergraduate and graduate institutions: My undergraduate institution allowed me to attend a few sessions of a class before deciding what accommodations I would like for that class. As a deaf person who was raised orally—that is, with an emphasis on spoken English over ASL—and can sometimes read lips, sometimes needs a note-taker, and sometimes needs an interpreter depending on the person I'm communicating with, this flexibility was a godsend. At my graduate institution, however, students with disabilities needed to select accommodations before ever setting foot in a classroom. It didn't matter if my needs changed based on the class environment—I had one chance to request accommodations, or else be accommodations-less for the entire semester. Thus, I had a CART interpreter for every class, despite not actually *needing* one for every class. I also brought up how our institution took away my agency in the disclosure process—unlike our graduate institution, my undergraduate institution gave me the option to disclose. I could choose whether or not professors would be told what disability I had, or just told what accommodations I needed, or be told nothing at all.

My classmates were floored—aghast at the suggestion. One piped up, "But, if I'm a professor, I *need* to know your disability. How can I help you if I don't know what kind of disability you have?"

This is the mindset we need to abandon.

I replied to my classmate bluntly: What my disability is, quite frankly, is none of your business. My disability does not impact my knowledge of my self. I will tell you what I need, and you don't need to know my disability so that you can make that decision for

me. They were stunned—and doubtful—about this assertion. My classmates could not discard the idea that a diagnosis and disclosure must occur in order for my needs to be met. What they did not realize was that it is not my disability or diagnosis that determines my needs—it is me.

## Conclusion and Suggestions

In suggesting a departure from former approaches to disability in the writing center, really I am suggesting a return to one of the main tenets of writing center theory that should have been guiding us all along. Though my suggestion may seem simple on the surface, I realize that in practice it is incredibly complicated and difficult.

To be sure, I am not suggesting that we stop talking about disability. To have disability go unnoticed and unmentioned in the past was a function of erasure, not one of acceptance. What I'm arguing is that critical conversations surrounding students with disabilities in writing centers should continue, but down a different path. Learning about diverse student populations' cultural differences and frames of reference can indeed be helpful. However, reliance on disclosure, naming, categorizing, and othering of disability should no longer have a place in writing center theory.

Thus, it would be wise to drop the outdated and ableist literature from anthologized texts and training textbooks. Though we may think of some of these works as canonical or foundational, ultimately their use may be doing more harm than good. Instead of relying on scholarship that offers reductive tips written by able-bodied researchers, we need to prioritize literature that provides a treatment of disability as a cultural identity, critical analysis that thoughtfully examines how we've been socialized to accept disability as a medical deficit, as well as personal narratives written by disabled tutors and tutees themselves.

Furthermore, tutor training should incorporate the exploration of identity, especially that of the self, as suggested by Kiedaisch and Dinitz. Through recruiting a diverse tutor population and then having them each bear witness to each other's exploration of identity and how it informs them as readers, writers, and social beings, the Universal Design approach results in tutors who are sensitive to *identity* instead of *difference*.

Finally, to move away from the rigidity of practice, meta-discourse is an extremely valuable strategy. As suggested by Babcock as well as Brizee, Sousa, and Driscoll, among others, meta-discourse means to talk about what is happening in the session—which can

include what a tutor or tutee thinks is currently happening, as well as intentions, goals, and fears. Babcock recommends tutors engage in meta-discourse—by explaining why they are asking or suggesting something—when sessions feel like they are not going the way they are supposed to (“When something” 10). During a challenging session, meta-discourse can help tutors to not make assumptions as well as guide them towards non-standard strategies.

In all, if we refuse to treat sessions with disabled students as different, and if we refuse to consider students with disabilities as outside the bounds of normality, then we refuse to uphold the social construction of disability as a problem to be fixed. Because most of all, what I want to happen in those moments when we find out that a tutee has a disability is that we say, “Okay, so how would you like to work together? What works best for you?”

## Acknowledgements

I would like to thank Sue Dinitz and Jean Kiedaisch for their instrumental training and mentorship that has had long-lasting effects and shaped who I am as a tutor and educator. I would also like to thank Rachel Wenrick for her support and invaluable feedback as I worked on this piece.

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## PSYCHOLOGICAL DISABILITY AND THE DIRECTOR'S CHAIR: INTERROGATING THE RELATIONSHIP BETWEEN POSITIONALITY AND PEDAGOGY

M. Melissa Elston

Northwest Missouri State University

elstonm@nwmissouri.edu

The act of writing this essay involves some professional risk, because it also involves a disclosure: I am a writing center director and tenure-track assistant professor at a regional public university in the Midwest. I also live with an anxiety disorder – the most prevalent class of psychological disorder among U.S. residents in a 2005 study (28.8%). I know I am far from alone. Roughly half of Americans will meet the DSM-IV criteria for a mental disorder at least once during their lifespans (Kessler et al. 595).<sup>1</sup> Within academia, however, you would not recognize mental illness's prevalence – at least, outside anecdotes shared between close friends, or the occasional Facebook post from a colleague in which he or she discloses a diagnosis in response to a mental-health awareness campaign or high-profile celebrity suicide.

Perhaps this should not be surprising. Jay Dolmage has articulated the historic link between the American university and the eugenics movement of the late nineteenth and early twentieth centuries, a broader cultural project which emphasized the able body and the able mind, and attempted to eradicate perceived inferiority – culturally, socioeconomically, and at times, violently (via institutionalization, forced sterilization, infanticide and genocide). As a result, as Margaret Price writes, “[t]hose of us [with psychological disabilities] who do function successfully in academe tend to pass much of the time. Sadly, the necessity of passing for survival perpetuates the conventional view of academe as an ‘ivory tower’ – an immaculate location humming with mental agility and energy, only occasionally threatened” by mental illness (7). Viewed against this broader history, self-identification, then, is a fraught gesture for center directors. It is easy to talk about mental or psychological disability and writing centers when the conversation focuses on how to accommodate students with cognitive or mood disorders. It is much more uncomfortable to speak as a director, whose ethos is bound to that of the center, and for whom colleagues’ unacknowledged ableism and microaggressions could have profound and lasting consequences. Regardless of a faculty member’s

credentials, scholarship, and achievements, the act of disclosure can prompt some audiences to leap to unfounded assumptions about job performance. “The reality,” notes Stephanie Kerschbaum, “is that disability to many still signals disqualification,” a widespread cultural bias which is also noted in a 2012 American Association of University Professors (AAUP) report on faculty members and disability accommodations (Kerschbaum 69, Franke et al. 1).

Rebecca Babcock pointed out in a recent conference-panel discussion that while roughly 20 percent of the U.S. workforce is disabled, only 3.2 percent of writing center directors publicly self-identify that way (Babcock et al.). I was standing in the back of the room during Babcock’s talk at the 2014 meeting of the International Writing Centers Association and National Conference on Peer Tutoring in Writing meeting as she mentioned this statistic – and it occurred to me that disabled directors need to be explicitly included in this conversation. As she spoke, I thought about the panic attack I’d had while booking my airplane ticket to fly between Missouri and Florida. (My anxiety disorder is ever-present as dull background noise; however, conference travel often sends it catapulting into the foreground.) Later, when I offered some brief comments during the question-and-answer time allotted at the end of the session – choosing to defy the silence Babcock described, and identify myself as a center director with a psychological disability – my voice shook and the room spun a bit. My chest began its familiar tightening, the one that precedes shortness of breath, dizziness, racing thoughts. *Oh, great*, my internal monologue wisecracked. *A panic attack during Q&A. This is a first.* The full attack did not materialize, however. I concluded my remarks, and the conversation returned to what I recognized as a typical conference-exchange format, much to my relief.

I do not include this story in order to contribute to “super-crip” mythology, which builds upon anecdotal tales of disabled individuals rising “above” their disability and overcoming it in order to pass as normative, thus contributing to and reinforcing

ableism in the dominant culture's imaginary. Nor do I include it to inject this article with an additional layer of the pathos commonly directed toward disabled people, or encourage a moment of Burkean identification among closeted anxiety-sufferers, although I acknowledge those phenomena may certainly occur with certain audiences as a result of my disclosure.<sup>2</sup> Rather, I include it to illustrate psychologically disabled ways of being in the academy: Speaking with – not in spite of – crushing chest pains in a meeting room full of colleagues. Sending off an article about psychological disability and disclosure to *Praxis* and wondering whether its potential publication will affect your tenure case positively as evidence of scholarly productivity – or whether its content may inadvertently fuel negative assumptions about your ability to perform the administrative functions of your job.

Experiencing and navigating these tensions is part of my daily existence as an academic, and their persistent presence in my routine defies “the assumption that mental disability exists in a separate realm from school-as-usual” (Price 51). However, as a writing center director who lives with a psychological disability, one of the underreported demographic among faculty who are, in Price's quippish phrase, “mad at school,” my public disclosure is a radical act of rebellion against numerous ableist narratives, both within and surrounding the academy. What's more, it is a necessary part of my pedagogy, both as a center director and writing instructor. Price writes that scholars with disabilities succeed not through valiant “super-crip” moments of overcoming, but rather, through “microrebellions, *new forms of access* and cooperation, a gradual reshaping of what academe is and might be” (7, emphasis mine). If I am to model our center, teach my classes, and mentor our tutors upon principles of radical inclusivity, upon forging these new forms of access, then the first step is to acknowledge my own positionality along the culturally constructed “able”/disabled spectrum – and to assert my place within the academy with my entire being, not merely the parts which allow me to pass as cognitively and emotionally normative.

### Finding the Other in the Center

Allison Hitt observes that much writing center scholarship to date casts writers with disabilities as the Other. “Often,” she writes, “disability is positioned as something that tutors must cope with and that sometimes cannot be helped at all” (n. pag.). As with most writing about disability and the academy as a whole, the focus in many articles is on how the

(presumably able-bodied/-minded) tutor can serve disabled students, whom, “as teachers and writing consultants, we are challenged by,” rather than exploring the possibility that tutors – as well as other writing center professionals, such as administrators and reception staff – can themselves be writers with disabilities (Hewett 1).

This is a problematic omission in our current dialogue as a discipline, one which Molly McHarg attempted to address several years ago in a Tutor's Column essay for the *Writing Lab Newsletter*. In her piece, McHarg identifies herself as a tutor with an unnamed disability, then acknowledges the “societal conventions of leaving disability as an unspeakable topic,” noting how these have shaped her own disclosures in professional settings (14). She concludes by sharing an anecdote about a colleague who did not share his Tourette's syndrome diagnosis until after he left writing-center work, writing that the episode had reinforced her suspicion that “many tutors may position themselves as I do—with an invisible dual citizenship” in both the tutoring profession and the disabled community (15).

McHarg does not criticize her colleague's decision to keep his diagnosis private, nor does she share the precise nature of her own disability, due to her concerns over the stigma and common misunderstandings which surround it (15). Indeed, these are deeply personal decisions – at this moment in drafting, I am still carefully reconsidering my decision to explicitly share my own diagnosis in the introduction to this article! – yet they illustrate the circular nature of the problems we perpetuate when we do *not* adopt a publicly disabled identity or call for social action surrounding issues of accessibility and inclusion within the academy. In McHarg's essay, she mentions how well her colleague with Tourette's hid his condition at work, suggesting that this evidenced the student-centeredness of his pedagogy: “He had undoubtedly focused his energy on providing writing instruction to students rather than drawing attention to his own challenges” (14).

The compliment seems well-meaning; of course, most of us who work in writing centers strive to keep our sessions focused on student needs. However, as Price's work demonstrates, “passing” in such a manner also problematically reinforces the ableist fantasy that disability and expertise are mutually exclusive categories when it comes to academic performance(s) such as writing and teaching. The view, she writes, “which imagines disablement as a personal deficit that must be ‘heroically’ and ‘secretly’ borne, strikes at *all persons with disabilities*,” a category which includes a number of tutors and directors, as well as some of the

clients with whom we work (Price 104, emphasis mine).

I would argue, then, that while the decision to disclose (or not to disclose) is an individual's prerogative, it is a well-intentioned mistake to confuse maintaining silence about our own disabilities with maintaining student-centeredness. (And to be fair, McHarg ends on a more nuanced note, suggesting that writing center professionals seek out "a more meaningful, thoughtful approach to accommodating and situating ourselves within writing center instruction" than simply passing, unnoticed [14].) Many students who come to the writing center have bought into the notions that they must successfully project "able-mindedness" (or able-bodiedness), that they must overcome aspects of their own neuro- and physical diversity in order to write, to learn, and to be accepted in academic settings. We are not fully serving these students if we allow these perceptions to stand unchallenged.

There is not a one-size-fits-all solution to this situation. In my own case, I have determined that if my passing as neurotypical contributes to the academy's enduring ableism, I am inadvertently adopting a professional persona that works *against* student-centeredness in the case of clients with disabilities (even as it potentially protects me from diminished estimations of my ethos as a center director due to the academy's enduring ableism). Eliding my own status as a psychologically disabled writer only serves to maintain the present discursive strictures around academic writing, the ones which suggest that disabled students need to measure up to an "able" norm in order to merit inclusion in the conversation, rather than engage with – and potentially reshape – such writing on their own terms. Therefore, I have chosen a degree of openness in order to connect with other mentally disabled writers, as well as confront both colleagues' and students' assumptions about disabled presence within the academy. My own acts of public and semi-public self-identification do not mean I believe that all disabled directors must necessarily disclose their psychiatric and/or medical histories in order to be effective advocates for (or tutors to) students with special needs. Identifying as psychologically disabled is simply yet another tool that writing center professionals have at our disposal in academic settings, especially since, as Dolmage points out, "disability is a political and cultural identity, not simply a medical condition" (19-20). Nevertheless – for reasons ranging from stigma and self-preservation to concerns about observing appropriate boundaries in sessions – "coming out" to colleagues and students as disabled is a strategy that remains underused.

## Claiming Positionality, Rethinking Pedagogy

When is disclosure appropriate? Certainly, writing center professionals should not take over large chunks of session time to regale clients with longwinded stories about their own experiences instead of addressing the clients' papers. Nor should we interject anecdotes about disability into conversations when the topic feels forced or irrelevant. Rather – if and when we *do* choose to disclose – our disclosures should demonstrate kairotic awareness, paying careful attention to audience, setting, and purpose.

I do not owe the details of my diagnosis to anyone. However, when I am tutoring, I have chosen to share it at times with students who self-identify as depressed, anxious or suffering from trauma. (I also frequently share it with my first-year composition classes when we reach our unit on writing and the body – which deals with disability, technology as corporeal extension, access to writing, and other issues.) As Kerschbaum writes, one useful function for disclosure in academic settings is to build coalition with other disabled individuals, to foster community by identifying "shared forms of experience" (60). This is, notably, in keeping with Kenneth Burke's observations about identification: it joins multiple parties' interests (20). Indeed, in these moments, I often find that my own disclosure opens a space for a shift in conversation. In the presence of an openly psychologically disabled mentor, talk rapidly turns to how writing with a mental disability can actually best *happen*, rather than whether it is even possible. What accommodations are needed? What strategies might serve as tools for navigating a given discourse, assignment, or class? How might invention, drafting, or revision differ meaningfully in this particular student's circumstance? While much (excellent!) writing center scholarship discusses how to answer these questions from the perspective of a normatively able-minded tutor offering help to the "Other," it is a very different thing to address them as a fellow community member – one for whom some approaches to writing with a mental disability have worked, and other approaches haven't.

Certainly, individual students can benefit from this kind of disclosure-as-coalition-building gesture in sessions. Yet disclosures have the potential to help in a bigger, broader way. Those of us who run writing centers – and I include myself in this statement – tend to view ourselves as highly invested in improving access to literacy, to academic discourse. We are frequently housed in "student success centers," "academic support services," and other similarly

monikered units. Many of us imagine ourselves as allies to marginalized students, particularly those struggling to function in environments inhospitable to neurodiversity or learning differences. Our literature is riddled with egalitarian ideals; much contemporary writing center pedagogy springs from social constructivist, reader response, and feminist theories of education (McAndrew and Reigstad 1-7). Within these interlocking frameworks, tutoring is often constructed as something less hierarchal than the traditional instructor-student relationship. *The Bedford Guide for Writing Tutors* reminds peer tutors that they wear “many hats,” including the roles of ally, coach, commentator, collaborator, fellow learner, and counselor (Ryan and Zimmerelli 28-31). While the authors also briefly mention the role of writing “expert” (“[y]ou may not be a writing teacher or a writing expert; nonetheless, students usually come to you assuming that you know more about writing than they do”), they simultaneously emphasize that tutors should not adopt an authoritarian stance, nor should they be expected to have all the answers about writing or subject matter: “Knowing little or nothing about a topic often makes you a perfect audience for a paper, so writers actually gain from your lack of expertise” and the resulting questions (18, 30-31).

These assertions of nonexpertise are, at face value, intended to act as an equalizer of sorts – one which places tutor and client on supposedly more similar footing within sessions. Nevertheless, our frequent resistance to acknowledging the presence of mentally disabled scholars and tutors among our own ranks (rather uncomfortably) suggests that we in writing centers may often be more unconsciously invested in our own authority and expertise – as well as the problematic ways in which “authority” and “expertise” align with notions of able-mindedness – than our written tutoring philosophies and training materials acknowledge. The challenge, then, for the conscientious director is how to engage the potential discomfort of this realization, and use it to productively interrogate writing center hiring, training, and tutoring practices.

This calls for some honest, hard reflection. Questions I find myself pondering in the aftermath of this year’s IWCA meeting include:

- How do the deficiency and remediation models which undergird the institutional history of many writing centers persist on our campus (Rose 343)? Furthermore, how do their remnants in our discourse – in the way we talk about our work at the writing center with administrators, community members, and

students – contribute to the persistence of ableism within sessions?

- Do my tutors, regardless of ability status, receive training in ways to collaborate with students who identify as psychologically disabled, or do we unintentionally “other” them at times – or, perhaps even more problematically, shift into more authoritative modes of interaction upon disclosure of a mental disability?
- Does my center acknowledge and welcome neurodiversity among staff members, or do tutors feel pressure to emulate “able-mindedness” at work?
- How might insights and concepts from disability studies (i.e., neurodiversity, crip time/crip space, the notion that we are all only temporarily abled, etc.) shift our understandings of ourselves as tutors?
- How might a disability-studies lens shift our approach(es) to the tutoring relationship, both pragmatically and pedagogically?

### Writing Center Space as “Crip” Space

The good news is writing centers — despite our frequently recognized status as “the most accessible and visible place of remediation within the university” — are well-positioned to take up questions such as these and reimagine ourselves as crip space for those with psychological disabilities, by virtue of our existence outside traditional classroom environments and conventions (Bawarshi and Pelkowski 42). Internally rethinking the way we create policy, conduct sessions, and train tutors is as important as taking external measures (such as a director’s voluntary public disclosure):

#### *Center Policies and Mission Statements*

“Contemporary composition is a highly monitored practice,” writes Robert McRuer, “and those doing the monitoring [...] are intent on producing order and efficiency where there was none and, ultimately, on forgetting the messy composing process and the composing bodies that experience it” (152). One might also add “composing minds” to McRuer’s description – although the brain, properly understood, is simply yet another bodily organ.

Similarly, writing centers are frequently charged -- by administrators, by faculty -- with producing orderly writing and writers. Doubtlessly well-intended mission statements often refer to helping students at “any stage of the writing process,” as if 1.) there were a single process, 2.) it could be charted linearly in

ordered, successive stages, and 3.) tutorial intervention enables struggling writers to reach the “next” stage in that process. Writing centers interested in fostering more disability-friendly space might revisit such statements and pluralize them, as the steps and processes used by a writer with ADD/ADHD, schizophrenia, or mood episodes – to name a few examples – might look quite different than those employed by other clients.

### *Sessions*

Session guidelines and ground rules which attempt to tightly regulate the time and space parameters of tutoring sessions may similarly need to be rewritten. For instance, our own center’s no-call/no-show policy (three “strikes” and a client was barred from using the center for a semester) was amended in 2015 (three “strikes” and a client was barred from making appointments only – but could still be seen on a walk-in basis), in an attempt to accommodate students whose depression, ADD/ADHD or other mental/psychological disability was affecting their ability to arrive at appointments in a timely manner.

Additionally, some interrogation of – and at times, rejection of – tutoring models that attempt to manage the affective spectrum of clients may be warranted. When writing-center scholarship has addressed emotion within consultations, it has frequently focused on how to 1.) create distance from the client’s emotions and/or 2.) control emotive sessions by setting goals and re-steering the writer toward these goals (Agostinelli, Poch, and Santoro 36). Gayla Mills has rightfully observed the fallacy within these types of approaches (i.e., they assume “a writer can’t be both emotional and rational about his work” simultaneously [3].) And while these methods may facilitate the recounting of an emotional experience when writers are attempting to process and articulate a highly personal narrative, they also reflect a larger-scale discomfort with affect within the center – an attitude that marginalizes a number of neurodiverse clients for whom attempts at intellectualization and repeated redirection may not be appropriate. (In addition to the implied authorization to manage/trespass upon clients’ emotional lives, imagine the message that this sends an anxious or bipolar writer whose emotions are not always easy to regulate within the confines of a 30- or 45-minute session!)

### *Training*

Finally, writing center staff members should be explicitly introduced to disability studies – a field which privileges disabled perspectives and subjectivities – rather than simply being charged with

“helping” students with mental or psychological disabilities. Medical models that pathologize and thus marginalize neurodiversity are prevalent in educational settings. Even our metaphors carry problematic messages. For example, the notion of “triage” implies that some writing is sick or injured – and positions the tutor as one who is authorized to treat or heal it. Similarly, references to “weak” vs. “strong” writing abound in our literature, as well as our training modules.

Yet it is frequently not enough to question word choice itself. We might do well to ask ourselves where our center’s preferred terminology comes from: Does it arise from within the disability community itself, or from a professional community charged with managing or remediating non-normative bodies and minds? This fall, a tutor in my own center who majored in special education was giving a presentation on language and disability during a staff meeting, and admonished her peers to never use terms such as “crippled.” I quickly interjected that this would preclude the use of a phrase like “crip time/space,” which comes from the disability-studies community – and a lively discussion ensued.

Peter Carino notes that while the history of writing centers is certainly tangled up with the institutional management of neurologically deficient and/or “weaker” [sic] students, this history has not been a “neat” or linear march, but rather, a “much more variegated and complex phenomenon” (104). As a result, the answers to questions such as “Who works in the writing center?” and “What should their qualifications be?” have been in flux over time (Carino 111), and will likely continue to be. As directors’ insights about tutoring and psychological disability evolve, we can certainly ask ourselves, along with former UW-Madison tutor Sarah Groeneveld, “What assumptions am I making [about disabled writers]? ... What are the expectations that I make without even realizing that I’m making them?” (n. pag.). More importantly, however, we should be asking what assumptions we are making about our staffs and ourselves – about able-mindedness as a prerequisite for writing expertise or professional competency – and how those assumptions might be keeping us from meaningfully connecting and collaborating with clients.

## Acknowledgements

The author would like to thank Rebecca Babcock for generously sharing the text of her remarks via email following the IWCA/NCPTW conference. Thanks are also due to colleagues who offered feedback during the drafting and revision process: Theresa Rodriguez at Texas A&M University, as well as peer tutor Alyssa Striplin at Northwest Missouri State University's writing center, and students in the author's Fall 2014 composition classes. Your candor, insights, and time are all deeply appreciated.

## Notes

1. At the time the study was conducted and written, the DSM-IV was the most current iteration of the Diagnostic and Statistical Manual of Mental Disorders. A fifth updated edition, the DSM-V, has since been published in 2013.
2. Kenneth Burke's *A Rhetoric of Motives* discusses identification in terms of consubstantiality, shared characteristics or principles which create a collective identity between/among distinct parties: "In being identified with B, A is 'substantially one' with a person other than himself," a phenomenon which links – or at least appears to link -- their interests (20-21).

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## WRITING CENTERS AND DISABILITY: ENABLING WRITERS THROUGH AN INCLUSIVE PHILOSOPHY

Sharifa Daniels  
Stellenbosch University  
sdaniels@sun.ac.za

Rebecca Day Babcock  
University of Texas of the Permian Basin  
babcock\_r@utpb.edu

Doria Daniels  
Stellenbosch University  
doria@sun.ac.za

In its *Position Statement on Disability and Writing Centers*, the International Writing Centers Association (IWCA) recognizes and emphasizes the relationship between writing centers and disability and “encourages scholarship that explores the ways disability intersects with writing center work.” The IWCA further encourages writing centers to be inclusive to all writers by adopting “communication that takes into account various learning styles or ways of processing language.” We too, argue that writing centers should be welcoming environments for all writers and that they should engage with their writers as unique beings, making accessible to them the individuation of instruction and support. Writing centers should be spaces where the multiple barriers that students experience in their writing are addressed and a variety of options are provided.

We frame our discussion within inclusion. Though no consensus definition exists for inclusion, we find Inclusion International’s definition useful for our discussion as it starts from the perspective of individuals who have been marginalized and excluded. They define inclusion as “the opportunity for persons with a disability to participate fully in all of the educational, employment, consumer, recreational, community and domestic activities that typify everyday society.”

This article ascribes to a social rather than a medical view of disability. A social perspective of disability seeks to locate human difference as manifested in bodily, sensory, neurological, and mental differences rather than as problems to be overcome, as in a medical model. This perspective acknowledges that there are variations of ways of being in the world and thus there should be flexibility in approaches to tasks. Though we are positioned similar to Clare (1999), who succinctly argues against equating disability with an illness or disease that needs to be cured, we also take cognizance of Wendell’s concerns

that the social constructionist view on disability might be shifting the focus away from those living with disability who are ill and in need of medical treatment. She makes an important distinction between the healthy and the unhealthy disabled, with differing needs across disabilities. The university student that we surmise mostly use the writing center facilities would be the “healthy disabled”. In other words, those students who physically are able to access the writing center. We are, however, aware that categorization would be tricky with disabilities such as MS and ADHD, as conditions that often occur with recurring chronic illness that require medication.

In this article we consider pertinent issues and challenges that hamper the inclusion of disabled students and staff in writing centers and put forth ways in which enabling pedagogies and practices could be put in place. The article further reflects on the ways in which some of the challenges shape our work in writing centers and how we respond to such challenges. To support the positions we take in this paper, we also draw on first person reports and case studies of writing center practitioners’ experiences of working as a disabled person or with disabled persons in the writing center from the forthcoming book *Writing Centers and Disability*.

### Towards an inclusive Writing Center space

Writing centers are widely understood within educational institutions as enabling and supportive spaces where students go to get individual help with their writing projects. In the writing consultation students enter into conversation with a trained and supportive tutor about their writing. The nature of the engagement is interactive, informal, and focused on the needs of the individual. In this way, the “uniqueness of each writer is acknowledged” and writers are provided with opportunities to “engage in trial runs of ideas and approaches, to fail and move on

to another attempt, and to receive encouragement for their efforts” (Harris). Through this iterative process writers are equipped with skills and practices to become independent and confident writers.

Nancy Grimm argues that writing centers are “uniquely situated to begin offering more complicated representations of students; representations that change the way we talk about those students – not as incomplete and undeveloped individuals” who need our help, “but as complicated people with history, class and culture ...” (*Good Intentions* 13 – 14). Typically writing centers aim to respond to the diverse learning needs of students rather than to a diversity category or to a “category” of disability into which they “fit” (Howell and Lazarus 60).

Despite such inclusionary intentions, the reality is that some students are often acted on differently, depending on markers that include race, ethnicity, gender and disability. In our eagerness to accommodate all students in a welcoming manner, it is not uncommon for students living with visible impairments such as blindness or amputations to experience people over-compensating for their disability, which is another form of “othering.” This could create the impression that they are responded to as if they are also academically challenged and in need of remedial writing support - a mindset that subconsciously equates disability with deficit.

In recent decades thinking has shifted to a model that advocates “disability rights.” This mindset to work towards changing the environment rather than the person is in keeping with the social model of disability that argues for a shift from emphasis on the individual to an emphasis on society. Disability then is no longer seen as “something that a person has” but instead becomes “something that is done to the person,” such as being excluded or confronted by “barriers” on a daily basis (Swain, French, and Cameron 24). The advantage of the social model of disability is that it has been “invaluable as a stimulus for action.” This model puts pressure on the university to effect structural and cultural changes that will ultimately make it more accessible and inclusive. By working in the social model of disability and adopting teaching and learning methods that are more inclusive, Sue Jackson and Margo Blythman claim that they can make a difference to the learning experience “not only of students with mental health difficulties but to all students” (245).

### **The Inclusive Agenda and Implications for the Writing Center**

Inclusion, in any facet of life, is a basic universal human right. UNESCO defines it as the process of addressing and responding to the diversity of needs of all learners through increasing participation in learning, cultures and communities, and reducing exclusion within and from education.

Our understanding of the concept as contextualised within the university is that inclusion considers space, place, and mind-set as part of the process of challenging ableism and facilitating the incorporation of students with disabilities into university spaces such as writing centers. The objective of inclusive education is thus to transform the education system so that it meets the needs of all learners. Educators are encouraged to embrace diversity and engage with all learners as assets rather than problems. Thus the inclusion philosophy promotes a holistic and coordinated approach that seeks to remove educational as well as socio-economic, cultural, and political barriers to progress. Inclusion is however not synonymous with access; it is part of a much wider process than just the admission of an individual to an academic program. When applied to students with disabilities, inclusion advocates both for increased participation and for removal of the barriers that exclude them (Barton). However, when applied in societies plagued by exclusionary practices due to ethnicity, race, class, or gender, inclusion loses its narrow focus, as we see in the many countries that have been liberated from oppressive regimes, and who are now transforming.

Countries that have undergone major political reform over the past three decades tend to advance inclusionary practices for the disabled alongside other reforms. So, for example, South Africa’s *Education White Paper 6* (Department of Education), the document that guided the transformation of the education system, proposed inclusion and accessibility for all students, irrespective of disability or ability. Our review further found that official attention was given to disability issues as part of the national educational transformational process. It is understandable that South Africa’s history of racial discriminatory practices would motivate policymakers to foreground race rather than disability in their educational transformation initiatives (Daniels and Daniels). We make this point to emphasize the importance of context in determining what will be prioritized for inclusion.

Though most higher education institutions have policies to guide institutional transformative initiatives,



in the writing center, it is at the practical application level that challenges may occur. An issue that Richard Rose raises about disability concerns how people with disabilities think they are being accommodated within higher education contexts, especially when information about their disability is known. When students are distrustful of the center's motives that guide the interaction, they are more likely to interpret the support that they receive from tutors at the writing center as affirmative action or preferential treatment instead of seeing it as their right to have access to a supportive environment in which they can function effectively.

Writing center tutors are not always privy to personal information of the students that they consult with, so if a student has a disability, tutors seldom know beforehand if a different kind of support is needed. Whilst writing center workers tend to respect the student's right to not declare a disability, their lack of access to information about certain disabilities might lead to the student not being optimally supported, especially when the disability is not visibly detectable. It thus is ironic that respect for privacy and confidentiality could work against a transformational agenda that seeks to advance inclusion. Moreover, the center's respect for non-declaration can also be experienced as a deterrent to developing a data base that captures important information on students with special needs. Such a data base could be a valuable resource for writing center staff, as it could facilitate tutors' understandings of students' varied challenges and could facilitate the monitoring of successes during writing center consultations.

One way to address such a situation is to include a generic type of question at the beginning of all consultations. In the pre-textual stage of the consultation, when tutors are trying to establish rapport with the writer, tutors could ask students whether there was anything specific that they would like the tutor to know about themselves or their writing. In this way then, students are given the opportunity to declare information about their disability which may assist the tutor in facilitating their learning or writing. Such a question also gives the student the choice about whether or not to "disclose" and what information to share with the tutor that could be beneficial to the consultation. This is also a question that could be asked of all students with whom we consult.

### **Paradigms, Pedagogy and Practices to Meet the Needs of Students with Disabilities**

One of the intersections between writing center studies, disability studies, and policies on inclusion is that all advocate for and adopt flexible approaches to teaching and learning and follow collaborative approaches to working with others. Inclusion in the writing center is closely associated with diversity – diversity of students, diverse writing concerns, and diverse ways of working with people. Thus, Jean Kiedaisch and Sue Dinitz argue that because students come to writing centers with a "variety of differences" (and for different reasons), what "tutors do with a student with a disability should be no different from what they do with any other student" (50). Since writing centers adopt student-centered pedagogies and encourage student agency, a typical consultation would encourage various and multiple ways of interacting and working with people. Such interactions could include "verbal discussions, collaboratively drafting, looking up information in books, working on computers, and participating in online appointments" (Hitt 32). Each student is engaged with as a unique person and each writing consultation is approached and treated as individual and contextual. The agenda for the consultation would be determined by the needs of the writer and guided by the tutor. One of the most valuable skills of a good tutor, therefore, is the ability to listen actively and effectively to the needs that writers express and to be able to understand how to address those needs in the consultation. This inclusive approach allows for multiple ways of working and for the individual needs of all students to be accommodated as far as possible.

In their editors' overview of the essays in the special issue of *Disability Studies Quarterly* on Disability Studies in the Undergraduate Classroom, Amy Vidali, Margaret Price, and Cynthia Lewiecki-Wilson observe that pedagogies for disability remain somewhat traditional in approach and the adoption of inclusive pedagogies seems less common. This raises the issue of complacency within the writing center environment and the need to become more reflexive about pedagogy and paradigm and meeting students' needs. They suggest that access for people with disability will be increased when a Universal Design to Learning (UDL) approach is taken to teaching and assigning writing. Such an approach includes incorporating multi-modal digital writing that makes use of aural, visual, design, and textual elements. This call for a UDL approach in writing centers has gained support and grown in strength in recent years. Allison Hitt, for example, encourages the use of multiple teaching and learning formats when working with students with disabilities and argues that it is critical that writing center tutors develop multimodal "toolkits."

The principles of Universal Design (UD) are closely linked to accessibility. With UD, physical and educational spaces are designed to accommodate and to support all students rather than exclude those who learn differently (Ryan, Miller and Steinhart; Hitt). An “add-in” instead of an “add-on” approach is followed and instead of “adapting to personal needs and strengths after the fact,” these considerations are made right from the start (Michael and Trezek 312). By applying UD principles to writing center spaces and pedagogy, equitable and accommodating environments can be ensured and more students will be able to access and benefit from such resources.

Babcock and Daniels’s review of writing centers in southern and northern hemisphere HE institutions confirm that there are many examples of successful and inclusive programs in place and that the creativity of some of these programs provides students with authentic learning opportunities. The few examples that we refer to, we selected based on their applicability in educational contexts and across student populations. The UD ideas of Holly Ryan, Georgie Miller, and Shawn Steinhart for tutoring students with differing learning styles requires tutors be trained to work with visual, aural, and kinesthetic learning styles. Thus, equipping tutors with tools to focus on the learning style of the student, instead of the disability, helps towards disrupting the barriers that are established by traditional instructional and tutorial pedagogies. For each of the learning styles writers are provided with strategies for pre-writing/generating ideas, for drafting, and for revision. The value of this approach is that by using differentiated instructional techniques, access for all students is facilitated, and students thrive by learning in a “setting” and in the “style, mode, and presentation” (Micheal and Trezek 313) that they are most comfortable with.

Another example of creative, flexible, and non-traditional approaches to the teaching and learning of students with disabilities is that which Marie Stevenson describes in *Writing Centers and Disability*. When working with students with mental disorders she advises several preventative strategies to reduce these students’ anxiety about writing or “traffic jam” strategies to unblock their writing barriers and make the task less overwhelming and more manageable. These strategies are categorized as organizational, analytic, unblocking, and anxiety-reduction (strategies). An example of an organizational strategy would be to map out with students their assignments for the week, the month, or the semester and assist with planning and time management. An analytic strategy would be to break the writing task down into a sequence of smaller, “doable” steps that the student can tackle one

by one without feeling overwhelmed. An unblocking strategy would consist of gently questioning the student, making suggestions, and taking notes until a firm plan for writing emerges. Finally, many writers suffer from anxiety, whether mild or severe. A suggestion that Stevenson gives for anxiety reduction is to impose a work break. The tutor can physically take the student’s papers, notes, and research for a day or a weekend while the student takes a “time out” from the assignment. The student can then return to the assignment with a fresh outlook. Even though Stevenson’s strategies are aimed at students with mental disorders, they are inclusive strategies that could be adopted when working with all students.

A strategy suggested by Rebecca Babcock in her work with deaf students is the use of explicit dialogue. She stresses the importance of establishing what the person wants and needs from the session and then tailoring the tutoring to suit those needs (“Tutoring” 35). Occasionally a student with a disability may need the tutor to point out errors verbally (Babcock “Outlaw”). In these cases knowledge of multimodal practices can be extremely valuable. This strategy is also useful when working with students who are self-conscious about reading aloud in a confined space, in front of another person, or who struggle to read in general.

Babcock further calls for more research in “technological options” for assisting students with disabilities (“Tutoring” 35). Computer software and “apps” for hand-held devices hold much promise for tutoring. Since these technologies are changing at lightning speed, we will not mention any by name. The call for technological options was also supported by Kiedaisch and Dinitz (2007) and Brizee, Sousa and Driscoll (2012) who all argue that writing centers should develop programs and materials that are universally accessible. The advantage of developing such programs and materials is that it would be beneficial to all students (including disabled students). However, Brizee et al stress that when developing such technological interventions and options for students, collaboration with and participation of administrators and students are essential. In their research about the usability of the Purdue OWL, the feedback showed that more than expected numbers of students with disabilities accessed the site to seek help with their writing. The researchers reported that by following this user-centered approach and participatory design they were able to better understand the needs of users in their “physical space” and “Purdue OWL users in [their] virtual space.” According to the user-centered approach, designers must investigate the needs and expectations of the

users irrespective of the technology being developed. Furthermore, participatory design is a “design methodology that takes users and their feedback into consideration in the production process.” Thus following a user-centered approach and participatory design is in line with writing center pedagogy that puts people first and where the needs and expectations of the writers are priority and take precedence.

### Hiring Tutors and Directors with Disabilities and Hearing Their Stories

A challenge that writing centers face is the (lack of) hiring of staff with disabilities. If we are to make a shift to more inclusive pedagogies and practices, then institutions will need to actively recruit competent disabled writing center directors to enhance diversity. Catherine J. Kudlick claims that “Disability only rarely figures into hiring decisions and discussions of diversity in curriculum, and the resulting invisibility of disabled colleagues reinforces the topic’s marginality to academic inquiry” (561). One of the authors in *Writing Centers and Disability* tells of how after an accident and surgery that left her with brain damage, instead of accommodating her, her supervisors gave her new, difficult, and even impossible tasks, seemingly in an effort to frustrate her or to show that she was no longer qualified for the job (Ellis).

A recent survey (Valles, Babcock and Jackson) found only 3.2% of writing center directors identified as having a disability, yet the U.S. Department of Labor reports that as of August 2014, 19.8% of the participants in the labor force had a disability. According to Cheryl Shigaki and colleagues, less than 1% of faculty at her home institution identified as disabled at their time of hire, yet 15% identified as disabled at the time of their survey. In addition, Robert Anderson proposes that disability should be considered as a minority status and claims that institutions of higher education are more interested in offering accommodations to students than faculty.

The low numbers of writing center directors with disabilities in the above survey could be a result of several factors. Directors could be afraid to disclose, even in an anonymous survey. Or their statuses could have changed from the time of hire to the present, and perhaps, those with mild disabilities may not consider themselves to be disabled at all. Finally, discrimination against people with disabilities may affect the hiring process, or those who acquire a disability during their work lives may be pushed out of their jobs.

The importance of hiring workers with disabilities applies for tutoring staffs as well. Many directors may strive for a representative gender, racial, or ethnic mix

of tutors, but how many writing center directors consider the importance of having disabled tutors on the staff? It may even be the case that writing center hiring practices are exclusionary to tutors with disabilities. We can talk about serving students with disabilities in the writing center and taking a disability perspective, but we have to look at whether or not disabled people actually work in the writing center. Perhaps a question to this effect could be added to the Writing Centers Research Project survey.

Acting on our writing center mission statements and policies can also result in positive outcomes. Nancy Grimm reports that once their writing center made a commitment to changing as a result of what they learned from working with diverse students, it became easier to attract diverse staff. She further states “the vision of transformative diversity has not only resulted in personal learning for those who work in the Center and those who use the Center (often the same people now), but has attracted the attention of the higher administration ...” (“The Uses” 2).

Most articles written about disability in the writing center focus on serving tutees with disabilities and are written as reports of, “I tutored a student and here’s what happened.” Jean Kiedaisch and Sue Dinitz point out that in treatments of disability in the writing center “it is almost always the student writer, not the tutor...[who] has the learning disability, suggesting that such differences disqualify a student from being a tutor” (43). The forthcoming edited collection *Writing Centers and Disability* contains writings by directors and tutors with disabilities; and some writers did decide to tell their own stories, such as a writing center director (now retired) who is hard-of-hearing, a peer tutor (now a librarian) who has Cerebral Palsy, and a writing center director who acquired a brain injury in an accident. However, even in a collection such as this some authors chose not to disclose their disabilities. The fact that people would find this risky shows that discrimination is still real. Even with these risks, the literature would be enhanced by the inclusion of even more experiences of tutors, tutees, and directors with disabilities in the writing center.

Although writing center directors may not have control over their own hiring, they do have control over the hiring of their staffs. Writing center directors can strive to create an open, welcoming environment and can work to recruit, hire, and retain tutors with disabilities. Directors should especially interrogate hiring practices and requirements to determine if they are discriminatory.

## Including the Topic of Disability in Tutor Training

Despite coverage and interest in differences in culture, gender, language, non-standard dialect, learning disability, and learning style, few tutor training texts mention tutoring students with physical or sensory disability. Since tutor training courses and sessions rarely focus on helping students with a sensory or physical disability, these would be the ideal places to include training on working with students with disabilities. However, tutor training textbook authors should resist the temptation to just “Add Disability and Stir” or package it as an “add on” rather than fully integrating it into the discussion (Martin).

It is our contention that through training, tutors can be conscientized about diversity and equipped with skills and strategies to work with all students. Furthermore, the presence of a diversity of students in the writing center presents opportunities, not “problems” to be dealt with. Despite sometimes extensive discussions about the unique challenges posed by other cultural and minority groups, including the Learning Disabled, the literature on tutoring students with sensory, physical, and cognitive/mental disabilities in writing centers is practically void. In accordance with the IWCA *Position Statement on Disability*, we propose that tutoring students with disabilities be included in all tutor training texts and programs.

## Conclusion

While higher education institutions have started acknowledging and addressing the challenges faced by disabled students, there is concern that the accommodations made for such students tend to be theoretical and that at the implementation and practical level much work remains to be done. Writing centers, because of open access and inclusive philosophies, can respond to the needs of students with disabilities. Policies and position statements about disability have already been developed and writing centers are beginning to address structural accommodations and to ensure that our pedagogy is inclusive and collaborative.

However, we should be cautious that our response and approach to working with students with disabilities is not by default. By saying that we are inclusive, flexible and collaborative, the needs of disabled students could often be lumped with other diversity categories. Furthermore, following a collaborative approach does not mean a one-size-fits-all approach can work for all students. Being inclusive allows for multiple formats and practices.

While we agree that there is a need for universities to provide assistance to individual students, there are instances when the environment or instructional design could be changed rather than the students and where barriers could be removed to benefit all students. In particular we propose that structural and instructional planning should follow designs that from the outset take the needs of all students into consideration.

Writing centers, if we are true to our ethos and values, should be at the forefront of tirelessly working for policies that take disability into account and for the implementation of these policies. We should advocate for structural accommodations as well as pedagogical accommodations. We should constantly monitor, evaluate, and re-examine our practices. Writing centers therefore have a dual charge: claiming that the writing center is a place where students with disabilities can feel at home and that our pedagogy can meet their needs, and then to make sure that it does.

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## OPENING CLOSED DOORS: A RATIONALE FOR CREATING A SAFE SPACE FOR TUTORS STRUGGLING WITH MENTAL HEALTH CONCERNS OR ILLNESSES

Hillary Degner  
Saginaw Valley State University  
hkdegner@svsu.edu

Kylie Wojciehowski  
Saginaw Valley State University  
kmwojci1@svsu.edu

Christopher Giroux  
Saginaw Valley State University  
giroux@svsu.edu

### Introduction

Because writing centers exist to help students find success in academia—to enter doors that may otherwise be closed to them—writing center literature rightly discusses the need to work with students of all backgrounds and abilities (Pemberton; Neff; Hamel). Writing center personnel have written about how writing centers and other campus resources can support students with disabilities (Hewett; Logan; Zimmerman), as well as the diverse ways in which these students learn and what we, in turn, can learn from them. The field actively recognizes that writing centers and student support centers in general are actually engaging in political advocacy, a fact that has been noted in this very publication.

Supporting and advocating for students means actively listening to them, helping them master the tools they need to succeed in academia, and helping them express themselves in their own words. Such work thus means acknowledging that “*all* students have different abilities, types of knowledge, and literacies. Secondly, *all* students can benefit from engaging with texts in different ways—visually, aurally, and kinesthetically—and in different contexts (Hitt). What remains constant throughout the field is this commitment to help all students regardless of their dis/abilities and a focus on the need, per North, to improve students, not papers (69). The field, too, tends to emphasize tutor training and strategies that tutors can employ to help students who learn differently, whether because of hearing issues (Babcock, “Tutoring Deaf Students...”; Ameter and Dahl), vision issues (DiNuzzo; Sisk), or cognitive impairments (“Students Who Identify”; Babcock, “When Something Is...”).

Composition scholars also note the importance of discussing disability in teaching situations, and in their collection, Lewiecki-Wilson and Brueggemann provide

essays from instructors with disabilities, as well as tales about teaching students with a range of disabilities, including learning and hidden disabilities. Hidden, or invisible, disabilities, which include such mental health concerns as depression, anxiety, or bipolar disorder, have indeed been discussed in writing center circles (see, for example, Murray and Haen), but little attention has been given to tutors with these disabilities. Articles about tutors with disabilities obviously do exist: on the *Praxis* blog, two different tutors recently talked about hearing disabilities and their effect on the tutorial session (Picherit; Rinaldi), and elsewhere McHarg claims her disability may uniquely position her to work with other students with disabilities (14), but research on tutors with disabilities linked to mental health is lacking.

According to Brohan et al., people afflicted with mental illnesses are faced with a unique decision in professional settings—one that people with observable physical disabilities do not have to consider. Those with hidden disabilities, like mental illnesses, can often opt not to disclose to a supervisor or human resource manager because of these illnesses’ “relative concealability” (2). Save for certain symptoms manifested through behavior or the side effects of medications, these illnesses are often unobservable to potential employers, and job applicants and employees with mental health problems thus “have a level of choice regarding if and when to disclose” (2). For this reason, McHarg’s article resonates with us. Although she reveals she has a disability, she chooses not to disclose its name to her readers (15), and like McHarg, we recognize the dangers of disclosure—the perceived link between disability and deficit, that disability is “an unspeakable topic” (14).

With disclosure frequently being more than a one-time decision (Brohan et al. 8) and with employees with mental illnesses often beginning in “a default

position of non-disclosure” (Toth and Dewa 742), research emphasizes that people often do not disclose their mental illnesses because they fear rejection, a loss of credibility, and unfair treatment, as well as gossip (Brohan et al. 5). Additionally, they may want to maintain confidentiality and boundaries between home and work (Brohan et al. 5; Toth and Dewa 743). On the other hand, many people find disclosure to be a positive experience and a stress reliever (MacDonald-Wilson 12): without opening up, individuals “often live in constant fear ... [and may find themselves] expending considerable mental energy in identity management and seeking to conceal a mental health issue” (Toth and Dewa 733). Moreover, individuals often find themselves supported upon disclosure and able to explain honestly to colleagues and superiors what may have been perceived as erratic behavior (Brohan et al. 8). As a result, rather than advocate for a normative stance placed on disclosure, Toth and Dewa suggest “organization[s] should strive to create an environment in which employees feel safe to disclose should they wish to do so” (743).

We argue that writing centers also have this obligation to create safe spaces in which tutors can disclose about hidden disabilities if they choose—an obligation heightened by facts known about mental health issues. Statistically speaking, per the National Institute of Mental Health (NIMH), an estimated 43.7 million adults suffer from mental, behavioral, or emotional disorders; this translates into 18% of American adults, including those on college campuses (“Any Mental Illness”). Similarly, according to the National Alliance on Mental Illness (NAMI), one in four adults ages 18-24 have a diagnosable mental illness (“Learn about the Issue”). These numbers become even more problematic given that two-thirds of all college students who need help do not receive it, half claim to have been so depressed at one point that they were unable to function, and one in ten students has seriously considered suicide (“Parents and Families”).

Logic dictates that writing centers will be affected by these trends, but, as we have noted, few in our field have tracked these numbers, and little exists about the implications of these numbers *for tutors*. This issue of disclosure and hidden disabilities remains a personal one for us, prompting a survey, conducted through the writing center at Saginaw Valley State University (SVSU), on tutors and mental health concerns. However, before we discuss the survey and its results, we momentarily deviate from the conventions of scholarly writing. In the full spirit of disclosure, because the issues surrounding safe spaces and mental health issues are so important to us, we pause to reveal

our own backgrounds with this issue of tutors with mental health concerns and illnesses.

### ***Kylie writes:***

It started after a regional writing center conference while on the Chicago “L.” As we weaved through the city, dipping into its underbelly and emerging through elevated tunnels, I tried to tell Hillary my story.

If I was having a conversation with Hillary about the viral videos or weekend plans, I might speak louder. Or I might stop speaking and simply wait for the conductor to lay off the brakes. But I wasn’t making small talk.

No matter how loud the car was, how many times I choked up, or how afraid I was to be seen as vulnerable or incompetent, I needed to speak after being silent for so long. *I won’t romanticize this*, I imagined telling her, *or make it seem evident of some higher intellectual ability*. I’ll just make it honest: I have depression and anxiety. I’m performing a constant balancing act. I can’t just get rid of my illnesses or set them aside. Everywhere I go, they follow—even into the writing center.

Though usually insightful and satisfying, my time as a tutor has also been taxing, frustrating, distressing: a result of behaviors symptomatic of mental illness, adjustments to new medication, or withdrawal from old medication.

I knew I had to speak: “Hey, Hillary, sometimes I feel depressed. Other times, I feel really anxious. Most times, I feel both.”

Telling that story wasn’t easy. Telling *this* story isn’t easy. But the act of telling the story and what has since happened has made dealing with my mental illnesses much easier.

### ***Hillary writes:***

As Kylie and I sat squished together on the rattling car, I nervously told her that shortly after I began working at the writing center, I was diagnosed with complex partial seizures. Each of my seizure episodes, Kylie learned, starts with an intense feeling of *déjà vu*. Then I zone out, feel anxious, and experience stomachaches, a tingling sensation in my head, and a flushed face. The episodes last only a couple of seconds, but are disorienting and leave me fatigued. However, my episodes are not visible to others.

Stops ticked off—Fullerton, Bryn Mawr, Jarvis—as we made our way back to the hotel. I told Kylie, quietly so our colleagues and bosses wouldn’t hear, about how I had a seizure while I was in a session. Because I had been too nervous to share my seizure disorder with others, I just quietly pulled myself

together and continued with my shift as if nothing had happened.

**Chris writes:**

As our writing center's assistant director, I have an opportunity to create real, long-term relationships with our tutors, our time together no longer dictated by my teaching load and final exams. And so I learn of our consultants' individual strengths and weaknesses, joys and concerns, accomplishments and worries. Some days I feel as if I have now have dozens of children and parent by proxy: tying ties, deciphering billing statements for new credit card holders, offering condolences for unexpected deaths and break-ups. I regularly say, "Yes, you are gifted, but six classes in one term is way too much." But ongoing mental health issues? Except for some Foucault, these weren't covered in grad school. Thus, I listen, helpless and frustrated, when I know my tutors are struggling or, worse, suffering; when I know their issues are beyond me; when I must admit that I cannot function, in the most technical, clinical sense, as their counselor.

Many days I feel disoriented, at a loss, disabled, unable. These new roles, particularly that of counselor, weren't in my job description. It's as if I too am on the Chicago "L," distracted by the flashing scenery; the rails' rattle; the smell of metal, rubber, electricity. I'm not sure of what line to take.

Because of these experiences, the national data, and the limited focus on writing center literature on tutors with mental illness, Kylie and Hillary, as undergraduates, created a survey hoping to learn more about the kinds of mental health concerns, illnesses, and invisible disabilities that tutors present in the writing center context, the degree to which tutors self-disclose these concerns, and the impact of these concerns on tutorial sessions. The survey was also meant to uncover tutors' reasons for and against disclosure, what support systems are in place within writing centers, and ways centers can better support these tutors.

In the following paragraphs, we share Hillary and Kylie's findings and argue that the number of tutors with hidden disabilities requires direct action on the part of writing centers. More work needs to be done to support tutors with hidden disabilities, particularly mental health concerns and illnesses, and, by extension, the students they serve. Writing centers have an obligation to conduct more research in this area using "replicable, aggregable, and data supported" models (Haswell 201) and thereby help reduce the stigmas associated with hidden disabilities.

## Research Methods

The research project began with the assistant director of our institution's student counseling center. She suggested a methodology consisting of a survey, which could reach our target population of writing center tutors with relative ease and which would be able to ensure questions were being asked in a consistent way. She offered a template to which to refer in creating our survey: the National College Health Assessment from the American College Health Association.

Based on the National College Health Assessment, and with much feedback and support from our center's director, Helen Raica-Klotz, we created a ten-question survey (see Appendix A) and hosted it on SurveyMonkey, a cloud-based online survey and questionnaire tool. The decision to use SurveyMonkey rather than another data collection tool (e.g., SurveyGizmo, FluidSurveys, FormStack, QuestionPro, etc.) was simply based on a level of comfort with SurveyMonkey's software. We valued our experience with the software enough to overlook any of its design, collection, or analysis limitations.

Before the survey could be disseminated, Institutional Review Board (IRB) approval was needed for our research and methodology. Our IRB conditionally approved to distribute our survey to tutors and administrators at our center in March 2014, provided we eliminated from it any mention of "suicide" or "suicidal thoughts." We understood the need for sensitivity when speaking about these topics, and we obviously did not want to cause any emotional harm to survey respondents, but we remain concerned that, by taking out any mention of suicide—an idea found in the National College Health Assessment—we were contributing to the stigma associated with mental health concerns or illnesses. The project, after all, was about creating, rather than censoring, opportunities for conversation.

We continued to meet with the staff of our student counseling center to discuss minor changes that would clarify our intentions, particularly referring to "mental health concerns or illnesses" rather than "mental health concerns, disabilities, or disorders." (Our initial scope included mental illnesses; physical, cognitive, sensory, emotional, or developmental disabilities; and a variety of disorders that often overlapped with the list of mental illnesses provided by the National College Health Assessment.) Ultimately, we focused on invisible illnesses, making no mention of physical or learning disabilities as these



could be separate studies and are already discussed in writing center literature. To focus the survey even more, we also used information from the NIMH to formulate descriptions of our targeted mental illnesses. (See questions four and five on the survey in Appendix A.)

Our center distributed our survey (finally titled “An International College/University Writing Centers Tutors Mental Health Survey”) through the Michigan Writing Center listserv in September 2014 and then, in December 2014, through the European Writing Centers Association and Wcenter listservs. The choice of these particular listservs was influenced by Ellen Schendel’s research methodologies outlined in her 2012 “We Don’t Proofread, So What Do We Do? A Report on Survey Results.”

## Results

From March 2014 to January 2015, 127 individuals responded to our survey. Although our initial target population consisted only of writing center tutors, we ultimately received responses and commentary from administrators. Responses were captured via Likert scales and open-ended comment boxes, and based on the latter and the fact that 80% of participants were between the ages of 18 and 30, we estimate about three-quarters of our respondents were tutors. Sixty-six percent of respondents were female, 28% were male, and the remaining 6% self-identified as “cisgender-female,” “transgender man,” “non-binary,” “approximately female,” or “androgynous/queer.” The majority of respondents had been working at writing centers for one semester (36%). Other answers included five or more semesters (28%), two semesters (13%), four semesters (12%), and three semesters (11%).

### *Mental Health Concerns and Illnesses Most Often Presented by Writing Center Tutors*

To determine which mental health concerns and illnesses respondents experienced in the past six months, we provided a list of seven options. Fifty-seven percent of respondents admitted to recently having experienced symptoms of one or more of the following mental health concerns or illnesses:

- Depression: 41%
- Anxiety: 36%
- Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD): 15%
- Bipolar disorder: 7%
- Eating disorders: 6%
- Substance abuse: 6%
- Post Traumatic Stress Disorder (PTSD): 5%

More than half of respondents (61%) had **not** been formally diagnosed. Of those who had been diagnosed however, the most common formal diagnoses were for depression (29%) and anxiety (21%). Respondents had also been diagnosed with ADD or ADHD (6%), bipolar disorder (6%), eating disorders (3%), PTSD (3%), and substance abuse (1%).

Because the number of formal diagnoses is lower than reports of symptoms, it is not surprising that approximately one quarter (24%) of respondents have not sought help. For those who did (50%), a number measured through a text box, the most common help sought included seeing a psychologist and/or psychiatrist, visiting the university counseling center, participating in therapy, and taking medication.

### *When and Why Tutors Disclose Their Mental Health Concerns or Illnesses*

Our survey indicates low rates of disclosure: the majority of respondents who have experienced mental health concerns or illnesses have not disclosed them to anyone in their writing center (72%). Among those who have disclosed, 12% have done so to their administration, 24% to other tutors, and/or 12% to students who visit the writing center. Tutors offered a variety of reasons for why they do (or do not) disclose, and these reasons seem to align with previous research about disclosure in the workplace (Toth and Dewa; Brohan et al.). Some respondents do not disclose because they believe their concerns or illnesses do not affect their tutoring. Some tutors are nervous about being perceived as “unprofessional” or less capable, even worrying about job loss due to their concerns or illnesses. Others did not feel comfortable discussing their mental health with others, and a few did not want to “burden” others with their problems.

Respondents who have disclosed offered other equally valid reasons for doing so. One respondent considers disclosing if the student in the session discloses first or is writing a paper on the topic of mental health. (This aligns with McHarg’s experience [15].) A few respondents said they have disclosed to their fellow tutors, as they maintain friendships with one another outside of work. Lastly, other respondents chose to disclose to administrators out of necessity: “I felt it important to let my director know, as it had caused me to miss some shifts and I felt comfortable sharing with her.”

### *Impact of Mental Health Concerns or Illnesses on Tutorial Sessions*

Respondents who indicated they had experienced mental health concerns or illnesses in the past six months were then asked whether their symptoms

affected their tutoring abilities. More than half of respondents indicated they had: 36% responded “Yes, Slightly”; 16% “Yes, Moderately”; and 4% “Yes, Significantly.” We did not define these adverbs in the survey, but written responses reveal general consensus regarding the degree of each option. On one end, slight or moderate effects included distractedness, problems with concentration, sluggishness, irritability, and apathy, as well as feelings of discouragement and a lack of motivation. As one respondent commented, “I thought that [tutees] ‘problems’ with the writing process were so irrelevant compared to what was on my mind.” As for those at the other end of the spectrum, significant effects mentioned by a few respondents included missing shifts, the need to resign from the writing center, and hospitalization.

#### *How Writing Centers Do (or Do Not) Support Tutors Experiencing Mental Health Concerns or Illnesses*

In terms of tutor training, our survey uncovered that some programs discuss how to tutor *students* with these mental health concerns or illnesses (28%), but only 6% of respondents said their training discussed how *tutors* should cope with these same issues in a tutorial session. The majority of respondents (65%) reported that their training did not discuss coping strategies at all—neither in regards to tutors helping a student or themselves—and 6% never received tutor training. In other words, 71% of tutors never discussed the general topic of mental health concerns or illnesses in regards to students or tutors.

When some training occurred, the focus was often on reporting and referral policies. Many respondents indicated that when they suspect a student has a mental health concern, they were told to refer the student to the university’s counseling center or another campus resource. Only one survey participant cited an official writing center program: a one-hour training session, called “Fostering Emotional Health,” which addressed “recognizing signs of mental health concerns in students, but also [in tutors].”

Other centers favored open lines of communications. One respondent, clearly a writing center administrator, wrote that

one of the best methods for providing support is to create and maintain a strong community in the center, so that everyone talks through problems and everyone is aware of how his/her colleagues are doing on shift and in life. The more supported people feel at work, the better off everyone is. I always want my employees to feel they can ask me for help or just to talk through something.

Another respondent, a tutor, similarly wrote that “while our training didn’t focus explicitly on mental

health illnesses, we do regularly have conversations about consultants’ (e.g., tutors’) self-care practices, including for our mental and emotional health.”

Some respondents speculated about what could be done to offer support to tutors with mental health concerns or illnesses. One respondent who had never experienced mental health issues was unsure what could be useful, questioning “whether ... there is one, clear way to [support tutors].” Similarly, some respondents felt as though the issue is not “relevant,” with one asserting that his/her center does “not have any tutors with mental illnesses/disorders.” Others felt as though their centers’ support was sufficient.

When discussing ways to improve support for tutors with mental health concerns or illnesses, respondents also suggested revising training sessions, creating professional development opportunities, referring tutors to campus resources such as the counseling center, and providing handouts about mental health. The creation of safe space was also a frequent suggestion. One respondent wrote that his/her center should provide a safe space because “the way it currently is, I doubt anyone would raise up such issues [referring to mental health concerns or illnesses] on their own.”

Closely related to this issue of safe space, according to respondents, is the role of writing center administration. Many respondents suggested administrators should take more deliberate steps to support tutors: “make sure that the center has a comforting, safe environment, and that there are opportunities [for tutors] to approach the directors for private, sensitive discussions.” Administrators may feel overwhelmed by a potential discussion about mental health, but as one respondent said, “simply checking on [tutors] periodically could go a long way.”

Respondents acknowledged, however, that this problem has no clear solution: “[t]he exact support that could/should be offered would vary so much depending on each tutor’s concerns and willingness to disclose those concerns.”

## Discussion

These results raise several issues for us, most notably that more research needs to occur and that mental health concerns and illnesses are indeed affecting our centers. An important discovery from our survey is that 56% of respondents said their symptoms affected their tutoring abilities (either slightly, moderately, or significantly). Even though only 4% of respondents answered that their tutoring abilities were affected significantly, that is still worth addressing. Those tutors with hidden disabilities, no

matter the number, should be given attention to ensure they have successful sessions. Moreover, the variety of responses as to what centers need to do to best support tutors dealing with these mental health concerns shows the solutions to this problem are many and varied. As such, we stress each center needs to determine what is best, continually reevaluate what is best, and try multiple strategies to create safe spaces for disclosures all the while remembering that disclosure is a personal decision. The end goal of these best practices is not disclosure, but the fostering of safe spaces to help all those who enter our centers' doors and to ensure that the students who visit our centers are able to get the best advice they can.

Although we appreciate tutors' decision not to disclose, we remain concerned about those who have chosen not to do so (72%). We worry they are operating out of fear or lack of support since many responses indicated they did not want to burden others with their problems. With this in mind, we, along with other survey respondents, believe that administrators have the power to initiate the creation of these safe spaces and encourage discussion about mental health topics. Discussions about disclosure must be regular occurrences; rather than assume that tutors will disclose, administrators must create opportunities for disclosure *if the tutors so choose*. Tutor training sessions are an easy forum in which to hold these discussions, but 65% of respondents said that these mental health concerns and illnesses were not discussed in their training. This must change. If a new tutor needed accommodation for a wheelchair, then physical disabilities would be discussed in some way. Just because we cannot see mental illnesses as easily does not mean they are not as important as physical disabilities.

Such efforts to create environments where, per Tugend and MacDonald-Wilson, disclosure is encouraged and the positives of disclosure outweigh the negatives are particularly pressing given the number of respondents who identify themselves as having experienced symptoms related to the seven mental health concerns and illnesses on which we focused. It is problematic that nearly 60% of our respondents identified as experiencing these symptoms, but only 39% of them had been formally diagnosed and 24% had not sought out help. Granted, self-diagnosis may be at play here, but the realities of co-morbidity, particularly regarding depression and anxiety, are an issue that cannot be ignored (Marano). We do not claim that writing center administrators are equipped to act as counselors, but they are usually more familiar with campus resources that serve in this capacity than tutors are. Some respondents said they

felt as though it is not the responsibility of the writing center to support these tutors and that these topics are not relevant in this environment. However, the overall statistics indicate that this is a relevant topic, and to the respondent who remarked the issue was irrelevant because his/her center did not employ tutors with hidden disorders, we counter, "How can you be sure?" We argue, moreover, that by opening their doors to this issue, writing centers are doing their part in helping to break down the stigma associated with mental illnesses. This position is crucial because we worry our survey results may not fully communicate the complexity of mental health concerns. Given the cyclical nature of depression, anxiety, or bipolar disorder, etc., our survey may not have fully captured the number of tutors affected by these issues. Our focus on symptoms experienced in the last six months may have eliminated those who are silently living with these conditions over extended periods of time but have not been formally diagnosed.

As we move forward and encourage others to join us in this research, we readily acknowledge the limitations of our survey. We did not distinguish between the comments of administrators and tutors. For future studies, it may be more effective to survey tutors and administrators separately. For example, it would be interesting to know whether an administrator has had tutors disclose their mental illness symptoms to them or even whether the administrator has a mental illness. It might also be useful to have one examination of tutors who self-reported symptoms but have not been diagnosed and another for those tutors who have been diagnosed by a mental health professional. In addition, future surveys should ask participants to identify their geographic locations, as we realize cultural differences regarding mental health concerns may shape the data.

We also warn others that studying this issue is complicated by the need for a tightly controlled vocabulary. Our first survey included the terms "mental health concerns/disorders/disabilities," a phrase that became "mental health concerns and illnesses." At that time, we maintained these changes were not substantial enough to justify differentiating between survey drafts and were only necessary to clarify intent and ensure accurate results. However, going forward, we would suggest that future researchers separate pilot studies from revised survey drafts to eliminate any misunderstanding. Public perception of mental illnesses is informed by the media's often highly sensationalized depictions of mental illness, so researchers must use the most precise and accurate language possible.

More attention also needs to be paid to causes of bias. We may have introduced bias by asking “What could your writing center do to provide more support to tutors with mental health concerns or illnesses?” With this question, we assumed that writing centers were not providing enough support, when some centers could be doing everything they can to support tutors with mental illnesses. A possible revision could be “What does your center do to provide support to tutors with mental health concerns or illnesses? Do you feel as though your center could provide more support, and if so, what changes could be made to do so?” Lastly, attention also needs to be paid to significance and correlation. Our main goal was to determine whether other tutors were experiencing symptoms of mental illnesses. Now that we know other tutors have experiences similar to Hillary’s and Kylie’s, future studies should be more focused and organized to see significance and correlation more clearly.

### Concluding Thoughts

These particular limitations aside, or perhaps because of them, we reiterate the need for further research and for greater awareness and understanding of tutors’ mental health. Even while that research is occurring, much can be done now to make our centers safe spaces. For example, during tutor training at our center when new hires read about challenging situations in Gillespie and Lerner’s *Allyn and Bacon Guide to Peer Tutoring*, we stress that challenges in tutors’ personal lives are equally important. Another part of our tutor training includes mock tutorials. For example, a veteran tutor will take on the role as a disinterested student. We are now working to incorporate discussions about a tutee who has symptoms of mental illness. Additionally, we try to regularly invite representatives from our counseling offices to staff meetings; we believe administrators and tutors must educate themselves on strategies for serving all students. Our center is also in the process of clarifying its mission and vision statements, as well as its strategic goals. This means, in part, better reflecting our need to make our center a safe space for those who visit, as well as those who work there.

Although these approaches work well for our center, we recognize they may not be best for all. Just as there are multiple ways to follow North’s advice to make better writers rather than better papers, there are multiple ways to make safer centers. No matter the path chosen, the fact remains that centers have ethical

obligations to 1.) create environments where tutors, as well as students, grow and 2.) recognize mental health concerns or illnesses as part of the status quo, and not as conditions that are abnormal.

We remain grateful that we are not alone. The James Madison University Writing Center is also doing work in this area (Caperton 3), and our governing bodies have done much to promote the awareness of disabilities in our centers. Consider the International Writing Centers Association’s “Position Statement on Disability and Writing Centers.” There, we find, among other things, an emphasis on continued scholarship regarding the intersections of disabilities, writing, and tutoring; a resolve that accessibility to organizational events and publications always be considered; and a commitment to remaining up-to-date on individuals’ legal rights and working with our individual schools’ disability officers. These resolves are directed to both the “recipients of our services ... [and the] people who work in writing centers.” We applaud these efforts, but note that the IWCA’s position statement as a whole maintains a focus on accessibility to materials and spaces (both physical and virtual). We do not mean to be disrespectful or to bite the hand that feeds us; as the IWCA position statement argues, materials do need to appear “in larger print, Braille, tape, CD, or other accessible formats,” but we also need to see in our centers an emphasis on the invisible disabilities of mental health concerns. We believe surveys such as this reinforce that administrators must have open-door policies and recognize that tutors’ lives outside of our centers are just as important as their performance in tutorial sessions. Centers must provide long-term strategies, not one-time fixes, that promote growth and create opportunities for disclosure. Lastly, centers must recognize that, like writing, the creation of safe spaces is a non-linear, ongoing process of change and revision, a process we encourage all centers to participate in regularly.

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## Appendix A

### An International College/University Writing Centers Tutors Mental Health Survey

1. What is your age?
  - 18 to 30
  - 31 to 43
  - 44 to 56
  - 57 to 69
  - 70 or older
2. What is your gender?
3. Approximately how many semesters have you been working as a writing center tutor?
  - One
  - Two
  - Three
  - Four
  - Five or more
4. Check all of the following mental health concerns or illnesses you have experienced in the last six months.
  - Anxiety (excessive and/or unrealistic worry or fear that lasts for six months or longer)
  - Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD) (recurring difficulty focusing, hyperactivity, restlessness)
  - Bipolar Disorder (a cycle between feelings of extreme sadness and hopelessness [depression], and feelings of intense euphoria [mania])
  - Depression (a significant period of sadness lasting two weeks or longer)
  - Eating Disorders (an obsession with weight gain, marked by inadequate food intake [anorexia] or excess food intake followed by purging [bulimia])
  - Post-Traumatic Stress Disorder (PTSD) (hyper arousal flashbacks, or avoidance of memories of a traumatic event)
  - Substance Abuse (an overwhelming need to consume drugs or alcohol that interferes with daily life)
  - None of the above
5. Have you been diagnosed with any of the following mental health illnesses? Check all that apply.
  - Anxiety
  - Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD)
  - Bipolar Disorder
  - Depression
  - Eating Disorders
  - Post-Traumatic Stress Disorder (PTSD)
  - Substance Abuse
  - None of the above
6. Have you sought help for any of the previously mentioned mental illnesses?
  - Yes
  - No
  - N/A
7. Did your tutor training discuss the following?
  - How to tutor students with mental concerns or illnesses
  - How tutors with mental health concerns or illnesses should cope with these issues in the Writing Center
  - My training did not discuss these topics
  - N/A (I received no tutor training)

If you did not receive any sort of training, how long did you spend on the topic(s) in training? What specific strategies were you given? To what resources were you directed? Were you directed to any resources on or off campus?

8. What could your writing center do to provide more support to tutors with mental health concerns or illnesses?

9. If you did not have symptoms or a diagnosis of the previously mentioned mental health illnesses please skip 9 & 10.

Have your symptoms ever affected your tutoring abilities?

Yes, Significantly

Yes, Moderately

Yes, Slightly

No, Never

If yes, please explain.

10. Have you ever disclosed your symptoms or diagnosis to any of the following? Check all that apply:

Yes, to my writing center administration.

Yes, to my writing center coworkers.

Yes, to students I have tutored.

No.

Why or why not?

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## DISABILITIES IN THE WRITING CENTER

Rebecca Day Babcock

University of Texas at the Permian Basin

[babcock\\_r@utpb.edu](mailto:babcock_r@utpb.edu)

### Introduction

Since writing centers serve communities of teachers and learners, they will inevitably serve people with disabilities. Ever since the 1980s, writing center workers have explored the issue of tutoring students with disabilities, people who may require different learning environments and may have learning needs that interact in complex ways with standard tutoring practices. In order to make accessing this scholarship easier, I have read and analyzed as many of the available articles in the literature as I could find. This article presents summaries in tabular form of both the research methods and tutoring suggestions contained in these sources. I also discuss and analyze these methods and go into detail on those studies that use empirical methods. My goal is not to rank the usefulness of studies based on methods used but simply to point out that studies based on empirical methods may assist tutors and practitioners in achieving Evidence-Based Practice (Babcock and Thonus). Another analysis that emerges from this research are the types of disabilities portrayed in the literature, and I make suggestions based on a comparison with the disabilities actually disclosed by college students.

### Discussion of Methods

I have included studies with various methods in this review; empirical research appears in the charts side-by-side with lore and anecdote. However, I have chosen to offer detailed descriptions of only those articles that used highly organized data-driven naturalistic and survey-based research methods. Scholars have argued compellingly that writing center practice should be guided by evidence gathered through systematic research. In *Researching the Writing Center*, Terese Thonus and I argue that writing center practice should be based on evidence gathered through systematic research rather than lore or anecdote. Other scholars have investigated the possibilities for RAD research as opposed to anecdote or lore (Driscoll and Perdue).

Lore and anecdote are based on remembering events with no documentation or guiding questions up front. With no evidence (videorecording, audiorecording, transcripts, detailed notes) memories

may be faulty and even construct a rosier picture than what really happened. Of course if practitioners are going in to a tutoring session with a reflective attitude and questions to be answered, and then write in a log or journal about their experiences, they are already doing teacher-research. Their results are no longer anecdotes, but research findings. I am not advocating a strict adherence to Evidence-Based studies however. That is why I include all studies in the table analysis. Of course articles based on personal experience are valuable and offer practitioners crucial information about tutees of difference. I have chosen to go into detail about the handful of empirical studies that have been conducted simply to further the project of evidence-based practice, considering as *evidence* only those studies that contain systematic collection and analysis of data. Serving students with disabilities provides a challenge and an opportunity for people working in writing centers.

As for the methods represented by these studies, the most common is the *anecdote*, a remembered personal experience. This method consists of the reporting of past tutoring sessions but does not include systematic data gathering or research questions. One reviewer of this article asked why anecdote as evidence seems so popular in the literature. There are two reasons. As humans we seek to make sense of our experience through telling stories. Tutors often tell stories to each other to debrief after a strange or difficult tutoring session, or even to tell of successes. The YouTube video series *The Breakroom* illustrates this. The book *Stories from the Center* also explains the value of narrative in making sense of our experiences in writing centers and in life. The darker reason for anecdote being so popular is that it's easier and quicker to tell an anecdote than to gather data systematically based on prior research questions. Anecdote does not require IRB approval, nor does it require systematic observation using audio and videorecording and notetaking. Interestingly, some articles I reviewed do not specify any methods at all, but rather proceed through an omniscient third-person narrator with no reference to past published scholarship nor to personal experience. Those articles that rely on years of experience tutoring the group in question rather than a few isolated tutorials I have

classified as *personal experience*. *First person account* refers to a person who has the disability in question and reports on it. Other less common—and self-explanatory—methods are bibliography and internet and library research. I consider qualitative and quantitative studies as the most trustworthy as to application and generalization of suggestions. Other types of studies (personal experience, anecdote) may give conclusions but may be vague about how those conclusions were reached. Qualitative and quantitative studies' data gathering and analysis are more systematic and fit in with the new movement in writing center studies known as *evidence-based practice*. Properly constructed studies' conclusions are directly linked through methods, evidence and analysis. For more on categorizing types of writing center research, see Liggett, Jordan, and Price.

**Table I**, which immediately follows the essay's conclusion, lists the studies by method and disability. Articles that mentioned more than one disability are categorized as “various disabilities” while articles referring to individuals with more than one disability are classified as “multiple disabilities.” The synopses of the suggestions are necessarily brief. The point of this article is not to summarize or synthesize all sources but to present a quick ready resource of tutoring techniques for practitioners and scholars alike. Those who would like more details are encouraged to read the original articles.

## Types of Disability

According to a 2008 report from the United States Government Accountability Office, the most commonly reported type of disability among US college students was mental, emotional, or psychiatric illness or depression (24%). The second most common was Attention Deficit Disorder (19%), with mobility impairment coming in third (15%). When we compare the types of disabilities actually reported by students to the types of articles being written, we see a discrepancy. The two most common disabilities discussed in the writing center literature are deafness and learning disability. But these disabilities accounted for only 6% (Hearing Impairment, which includes deaf and hard-of-hearing people), and 9% for learning disabilities, including dyslexia<sup>2</sup> in the 2008 report. Types of disability reported do not remain static, however. In the 2000 and 2004 reports, mobility impairment was the most common disability reported among college students, with mental illnesses coming in second both years, and “health impairment or problem” coming in third. In any case, the types of

articles written do not reflect the types of disabilities writing center workers are statistically most likely encounter. Out of the articles in this analysis, 37% deal with Learning Disability and 21% deal with deafness, while less than 2% (one article each) deal with mental illness or physical disability specifically. The material on mobility impairment is a paragraph from a textbook that is 25 years old. I could find no articles that made mention of ADD/ADHD<sup>3</sup>, the second most commonly reported disability among college students for the last year that we have data. I would like to call for more research on the disabilities that tutors will most likely encounter in their daily work.

## Tutoring Suggestions in Detail, Based on Research Studies

**Table II**, which follows Table I, categorizes the suggestions by disability. The suggestions found in Table II are a mixture of methods. Below I enumerate in detail the suggestions based on qualitative and quantitative studies. These discussions are limited to the research available. For instance, I do not discuss hard-of-hearing tutees in the section on deafness, simply because studies of this population have yet to be conducted.

### Deafness.

Rebecca Babcock studied D/deaf<sup>4</sup> students in the writing center (“Research-Based”; “Interpreted”; *Tell*) using a grounded-theory approach including qualitative methods of observation and interview. All the tutoring sessions with D/deaf tutees she observed took place through an interpreter, and she found that attention to this dynamic is important.<sup>5</sup> The tutor should address the tutee, not the interpreter, and the tutee should be consulted about the ideal seating arrangements. In other words, ask the tutee where she prefers everyone to sit. The results of this research also show that D/deaf tutees may need more help with reading, paraphrasing and summarizing than hearing tutees. Also, Deaf culture finds indirectness rude, and some Deaf people may be confused or frustrated by indirect tutoring techniques. Although it may seem obvious, there is no need to read aloud with D/deaf tutees. If you want to read together, read the paper with a pencil in your hand and develop signals to point out errors, confusing parts, etc. If you want to tell the tutee something while you are reading, direct her attention to the interpreter before you begin speaking. She can't read and “hear” at the same time, since she does both with her eyes. If you are interested in Deaf culture, get a book on the topic such as *Inside Deaf Culture* by Carol A. Padden and Tom L.

Humphries or *Introduction to American Deaf Culture* by Thomas K. Holcomb rather than wasting the tutee's tutoring time with questions about deafness. Attend to grammatical concerns to the extent that the tutee is interested. The difference between D/deaf and hearing students in this regard is that D/deaf students may work more on the type of descriptive grammar usage—things like verb tense and article use—for which hearing students have native speaker intuition.

### *Dyslexia.*

Jennifer Wewers conducted a qualitative study at Oberlin College where she surveyed an unspecified number of writing tutors and five dyslexic students. She was an undergraduate peer tutor at the time. She asked the tutors what they knew about dyslexia and asked the dyslexic students how tutors could best help them. Wewers found that tutors knew little about dyslexia except for folk knowledge gleaned from the media, most of it stereotypical and unscientific such as dyslexics switch letters around when reading. In fact, dyslexic tutees may have trouble decoding words and be more reliant on context when reading. When writing they may have trouble both at the mechanical and discourse levels. Based on the interviews with dyslexic students, she suggested that tutors be flexible: "certain assumptions about how we expect a tutoring session to be conducted may need to be revised" (233). For instance, tutors reading the paper aloud to dyslexic writers may not work since they may have listening comprehension issues. In addition these writers may need more time to answer questions and tutors should rephrase their explanations if the tutee does not seem to understand. Tutors may also need to deal with dyslexic students' lateness or disorganization. The dyslexic writers suggested that tutors meet their problems head on—but with tact. If a writer was comfortable talking about ideas, the tutor could take notes for the student as ideas emerged. Tutors could also point out specific places where the paper seemed disorganized or incoherent. Tutors could also analyze a model paper along with the tutee. As for grammar, spelling and mechanics, dyslexic students needed specific help. Tutors can ask if they would like specific errors pointed out and then give direct advice on how to correct them.

### *Learning Disability.*

Kiedaish and Dinitz ("Learning") did a quantitative study of tutoring sessions and collected 376 post-conference surveys of tutors and tutees in their writing center. They found students with learning disabilities rated their sessions lower than any other group. The writers wished that they had more time in each

session; the tutors of students who didn't disclose their disabilities reported feeling frustrated, while their tutees reported the need for more precise assistance, such as, "pointing out more specifically the structure changes needed" (91-92). From this study, we learn the importance for students with learning disabilities to disclose their conditions. Kiedaish and Dinitz advocated more training to allow tutors to identify these individuals and to that end invited a panel of LD writers to speak to their tutor-training classes and recommended that other writing centers do the same.

### *Pragmatic Impairment.*

Babcock ("When") studied a tutoring session in which the tutee appeared to have pragmatic impairment.<sup>6</sup> People with pragmatic impairment tend to not understand the unwritten rules of conversation, such as if a tutor asks about a story the tutee has read, the reason is to generate ideas for the paper, not because the tutor is interested in the story. PI is not a disability in itself, but is found in association with various conditions and disabilities including, but not limited to, Asperger's syndrome, autism, learning disability, traumatic brain injury and attention deficit hyperactivity disorders. Tutors can be on the lookout for pragmatic impairment by observing if tutees take statements and questions extremely literally or use words in ways that seem wrong or strange from a semantic or syntactic standpoint. An impaired person may appear sassy or give odd answers to questions or may even frustrate a tutor unaccustomed to such difference in communication styles. It's important to remember that the person is not trying to be difficult or resistant but simply has difficulties communicating. With an impaired person, you need to be more direct in your explanations of *what* you want the tutee to do and *why* you are asking particular questions. Some people with PI have trouble with retrieving words, or sometimes they use an incorrect word or use a correct word incorrectly. In this case the tutor should offer up the word the tutee is looking for or reformulate the utterance correctly. You can also try using an Illocutionary Force Indicating Device (IFID; a type of metadiscourse). If you are offering a suggestion, say, "This is just a suggestion." If you are asking questions to help the tutee revise the paper, say, "I am asking you these questions to help you think of ideas of what to put in your paper." This may seem obvious, but to a learner with PI it is not.

## **General Comments**

I invite the reader to consult the tables I have concocted for specific advice and practices. Here are

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some general comments, gleaned from both types of studies, the empirical and anecdotal.

- Due to mobility and accessibility issues, disabled students may be late for tutoring sessions or may need more time. Try to be flexible.
- Disability is not a secret or a shame. You can talk about it freely and comfortably while maintaining appropriate confidentiality.
- Ask all tutees if they have any special learning or communication needs or preferences.
- For LD and dyslexic students, lack of information and disclosure appear to result in frustration for both tutor and tutee.

### **Needed Research**

As can be seen from the above tables and commentary, there is a true need for more research on disabilities in the writing center. I could find no published studies on the third most common disability among college students (ADD), and articles on the two most common disabilities (mental illness and physical impairment) are scant and far between. Empirical research needs to be done in the writing center context with all these populations, but specifically with mentally ill students, blind students, or autistic students, just to name a few. And while it's important to study tutees, there are no published studies whatsoever about tutors or directors with disabilities. As for research methods, true case study and teacher-research or action research are most suited to the writing center context (see Babcock "Examining"). I encourage members of the field to take what I've found and use it as leverage to propel ourselves forward into this crucial topic.

Table 1: Articles by disability, methods and suggestions.<sup>1</sup>

Article	Disability	Methods	Suggestions
Ameter & Dahl, 1990	Hearing Loss	Anecdote	Team approach, Use of ESL materials, use of kinesthetic techniques
Faerm, 1992	Deafness	Case Study	Maintain eye contact
Marron, 1993	Deafness	Anecdote	Use of visual techniques
Wood, 1995	Deafness	Anecdote	Use of computers
Weaver, 1996	Deafness	Case Study <sup>a</sup>	Cultural sensitivity
Nash, 2008	Deafness	Personal Experience	Use of interpreter, review steps in the writing process, consistency of tutor relationship, ask questions, use visual and spatial images, learn students' literacy history
Babcock, 2009	Deafness	Qualitative Study	Discuss students' goals, use visual techniques, attend to reading comprehension, use direct but open-ended questions, use interpreter, tailor grammatical explanations, study deaf culture
Schmidt et al, 2009	Deafness	Interview, anecdote, unclear	Use of visual techniques, focus on writing, consult with the deaf person re: communication needs
Babcock, 2010	Deafness	Qualitative Study	Use visual techniques, cultural and linguistic sensitivity, use more directive techniques, don't read aloud, pay attention to reading comprehension
Corrigain, 1997	Dyslexia	First-Person Account	Break assignments down, work step-by-step, talk out ideas, offer encouragement
Dillingham, 1998	Dyslexia	Personal Experience	Use of tape recorder, use of detailed outline; frequent appointments
Hout, 1988	Epilepsy	Anecdote	Modeling, provide structure, take dictation, have realistic expectations

Article	Disability	Methods	Suggestions
Crump, 1993	Learning Disability	Online Discussion	Diagnosis and disclosure, use of computers, patience
Lauby, 1985	Learning Disability	Observation	Extra help in proofreading, sensitivity, use of word processing, communication, education, be open-minded
Scanlon, 1985	Learning Disability	Personal Experience	Enhanced training, more directive tutoring, enhance calmness and confidence, use of computers, individualized assistance
Gills, 1989	Learning Disability	Bibliography w/ commentary	Only problems are specified
Gills, 1990	Learning Disability	None specified	Use learning inventories, provide structure, supervise computer instruction, pace students, concentrate on process over product, allow mistakes, use student's own writing as examples, model effective procedures, be patient and flexible
Schramm, 1991	Learning Disability	Anecdote	Use of tape recorder
Kiedaish & Dinitz, 1991	Learning Disability	Quantitative Study	Students should report disabilities to tutors, LD writers should speak at tutor-training sessions, tutors should offer more precise assistance
Konstant, 1992	Learning Disability	Anecdote	Multisensory approach
Brainard, 1993	Learning Disability	Personal Experience	Use of questions, encouragement, patience, sensitivity
Baker, 1994	Learning Disability	Bibliography	Read the resources
Mullin, 1994	Learning Disability	Program Self-Assessment	Use manipulatives, allow more time, team approach
Neff, 1994	Learning Disability	Library Research, Observation	Direct conversation and behavior, take dictation, use visual techniques, hands-on editing, time management, be flexible with rules and policies, be encouraging

Article	Disability	Methods	Suggestions
Addison, 1995	Learning Disability	Personal Observation	Use of computers; Ask about past writing experiences
Sherwood, 1996	Head Injury, Learning Disability	Anecdote	Patience
Wewers, 1999	Learning Disability	Qualitative Study	Be flexible, offer specific help, leave more time to answer questions, rephrase when necessary
Mullin, 2002	Learning Disability	None specified	Team approach, break down tasks, hire tutor w/LD, use visual techniques, attend workshops
Murray, 2005	Mental Illness	Internet Research & Anecdote	Have a code word to alert other tutors, adopt a soft tone of voice, put one's own emotions aside and respond in a helpful, not judgmental way, and refer the client to the director.
Grimm, 1999	Multiple Disabilities	Anecdote	Extra time, team approach, building relationships
Meyer & Smith, 1987	Physical Disabilities	None Specified	Use of computers
Babcock, 2011	Pragmatic Impairment	Qualitative Study	Explain the reasons behind questions, engage in meta-discourse about the tutoring session, offer up words or phrases when necessary
Berta, 1991	Unspecified	Annotated Bibliography	Read suggested texts
Deming & Valeri-Gold, 1986	Various Disabilities	None Specified	Use of special equipment, working "diligently", read to visually impaired, take notes for hearing impaired, assist "handicapped" with library research
Towns, 1989	Various Disabilities	Personal experience, library research	Tutor training, reading aloud, use of computers, other non-writing assistance
Berta, 1990	Various Disabilities	None specified	Use of computers with special hardware and software, more physical space for access

<b>Article</b>	<b>Disability</b>	<b>Methods</b>	<b>Suggestions</b>
Mills, 1980	Various Disabilities	Personal Experience	Use of special learning programs
Mills, 1982	Various Disabilities	None Specified	Patience, remediation, guidance
Pemberton, 1998	Various Disabilities	Literature Review	Tutors should be well-informed
Thompson, 1999	Various Disabilities	Personal Experience, Input from Colleagues	Questioning techniques, use of checklists, use of computers, encourage metacognition,
Hawkes, 2006	Various Disabilities	Library & Internet Research	Provide more space with less cluttered pathways, provide more time for explanations, patience, use of technology, make websites accessible
Keidaisch & Dinitz, 2007	Various Disabilities	Qualitative, Application and Analysis	Use of Universal Design
Sisk, 2001	Visual Impairment	Anecdote	Use of technology, reading aloud to student and making changes on document, bringing student to writing center during orientation, work together with Disabilities Services Coordinator



Table II: Suggestions categorized by disability

	Deafness	LD/dyslexia	Epilepsy	Physical Disability	Visual Impairment	Mental Illness	Pragmatic Impairment	Various/ Multiple
(Cultural) Sensitivity	○	○				○		
Build relationships	○	○						○
Directive tutoring	○	○					○	
Enhance physical access				○				○
Extra time/ Time management		○						○
Hands-on editing and proofreading	○	○						
Kinesthetic techniques	○	○						
Metadiscourse/ metacognition	○						○	○
Modeling		○	○					
Patience/ Flexibility/ Encouragement		○						
Provide structure		○	○					
Questioning Techniques	○	○						
Read aloud					○			○

	Deafness	LD/dyslexia	Epilepsy	Physical Disability	Visual Impairment	Mental Illness	Pragmatic Impairment	Various/ Multiple
Rephrase when necessary		○					○	
Take dictation	○	○	○					
Team Approach	○	○			○	○		
Tutor training		○						○
Use checklists/ inventories		○						○
Use of Computers/ Technology	○	○		○	○			
Visual Techniques	○	○						

## Notes

1. Faerm and Weaver both call their method “case study” but these do not actually qualify as formal case studies since they did not begin their investigations with specific research questions. They are more accurately classified as anecdote.
2. Dyslexia is one sub-type of learning disability, as are similar disorders of writing, math and “learning disorder not otherwise specified.” All these are now categorized under Specific Learning Disorders rather than learning disability in the DSM-5 (“Highlights”).
3. Please note that according to the DSM-5, ADD is no longer a diagnosis. AD/HD is classed in a new category called “Neurodevelopmental Disorders” (“Highlights”).
4. In the literature, deaf is used to represent auditory deafness and Deaf to represent cultural deafness. D/deaf is used to include both, and here I choose to use deaf as a neutral term. Although many scholars and Deaf people see the Deaf as a cultural and social minority rather than a disabled group, they are covered under the ADA.
5. Since no sessions in the study were conducted without an interpreter I am not able to comment on this practice; it is an open avenue for future researchers.
6. The student was not diagnosed with pragmatic impairment but rather with a learning disability that “...In the DSM-5...is called ‘social (pragmatic) communication disorder’” (“Highlights”).

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