

**SCHOOL PSYCHOLOGISTS' PERSPECTIVES: A QUALITATIVE ANALYSIS
OF DISABILITY LABELING AND IMPLICATIONS**

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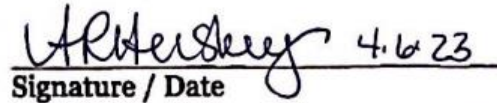
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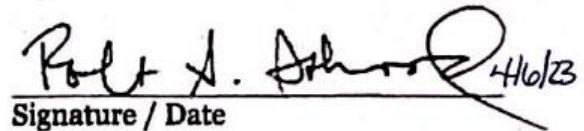
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ABSTRACT

Factors beyond legal regulations, ethical practice, and training influence the identification process conducted by school psychologists when labeling a child with a disability. Research has not sought to go to the source and directly question the process of identification from the perspective of school psychologists. This niche in the field of school psychology practice plays a larger role within special education, beckoning for an increased understanding of the cognitive dissonance and resolution processes experienced by school psychologists when labeling a child. Using a qualitative inquiry within a grounded theory, phenomenological framework, ten school psychologists from Berks County, Pennsylvania were interviewed. Interview transcript analysis was completed using manual, blending thematic coding, including inductive and deductive approaches. The research reveals insight into school psychologists' thoughts, feelings, and perspectives of assigning a disability label to a child; salient factors influencing school psychologist disability labeling; and the cognitive dissonance and resolution processes experienced by school psychologists when assigning disability labels. Results indicate the presence of a vast array of thoughts and feelings experienced by school psychologists during the process of disability labeling. Salient factors during school psychologist decision-making to inform disability labeling, beyond federal and state identification criteria, are examined. Extending the present field of research, cognitive dissonance during decision-making and disability labeling was identified, with reflections upon the broader implications across special education considered. In totality, school psychologists feel the very real pressure to navigate the myriad of

internal experiences and external factors to help students through disability identification and labeling.

Keywords: school psychologist, disability labeling, factors, cognitive dissonance, implications

PREFACE

We, school psychologists, do what we do because we believe in the power of education to transform lives. We also have an internal drive to help students, including their parents and teachers. There's a uniform hope that we can in some small way make a positive change in the lives of the children and adolescents we work with and serve.

Over time, through my experience and years of practice as a school psychologist in public education, there has been a growing, but quiet voice that comes and goes from my awareness. The voice questions the need to label a child so he/she can receive specialized services. The voice considers the harm that may be imparted upon the child's social, emotional, and academic development directly tied to the application of the label I've recommended to a multidisciplinary team.

The voice is frustrated with a system that takes my comprehensive psychoeducational evaluation and reduces it to whether or not a child qualifies under a certain eligibility category or disability label. The voice challenges the process, asking *why* I've taken the time to serve a student, their parents, and the educational team through assessing the child's strengths and needs, and subsequently outlining comprehensive educational programming, when in reality little has changed for the child when the label is assigned.

The voice, my voice, finally was heard, motivating me to endeavor upon this road of qualitative examination. Although the findings are limited in scope and generalization, it opens the door for honest and critical conversation. Ultimately, there has to be a starting point for the conversation to effect positive change for the students I'm dedicated to support. A *better* model for special education does exist.

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Chapter 1

Topic of Study

School psychologists are an integral component of the dynamic system of public education, offering expert guidance, training, and insight to parents and educators across the developmental, academic, behavioral, social-emotional, and educational needs of students. Furthermore, school psychologists are expertly trained practitioners with proficiencies and skills that direct the provision of special education. Within the 13 school-age disability categories under IDEA (2004), school psychologists are a required team member when making student eligibility recommendations to receive special education services and supports via the application of a disability label.

Laws, ethics, systems-level practices, social psychological influences, previous and current intervention provision, individual student strengths and needs, training and professional development, caseload demands, stakeholder input, and educational resources are among the vast factors which inform and influence school psychologist decision-making during the evaluation process (Castillo, Wolgemuth, Barclay, Mattison, Tan, Sabnis, Brundage, & Marshall, 2016). Consequently, these same factors influence school psychologist recommendations made to the multidisciplinary team (MDT) to inform disability eligibility under an identification label. These identified factors impact school psychologist eligibility decision-making, but there are additional internal factors which impact school psychologist decision-making. An additional factor, limited in experimental examination, includes the weighted consideration of the benefits of assigning a disability label to a child whilst knowing the contraindicative impact of a label upon identity development.

The Current Problem

A substantive factor, often fleeting in discourse and consideration, during disability decision-making is the impact of the assignment of the disability label upon the child's sense of self and long-term identity development, which is concerningly typical (Gove, 1980, as cited in Thomson, 2012). Throughout the researcher's review and literature search, little evidence examined the process and impact of disability labeling from the school psychologist lens. The current research endeavored to examine school psychologists' first-hand accounts regarding their thoughts, perceptions, and feelings about the process of disability labeling. It is asserted that school psychologists must rationalize or justify decision-making to resolve the potential incongruence in opposing thoughts, or cognitive dissonance, that arises during the eligibility determination process (Gove, 1980).

Additionally, the researcher intended to examine the cognitive processes practicing school psychologists employ to resolve the experience of internal dissonance (Festinger, 1957, as cited in Harmon-Jones & Mills, 2019). Considerations of the resolution process from the emergent cognitive dissonance, related to the potential repercussions of the assignment of the label upon the child's identity development balanced with the need to provide a disability label to secure special education services, were explored and reported.

School psychologists are trained in human development, including the impact of labeling. Although no formal research-based literature can be cited to substantiate the claim, the researcher asserts that school psychologists are aware of the duality of their recommendations. School psychologists acknowledge the influence of their

recommendations to multidisciplinary teams (MDT), specific to the application of a label to *open* the pathway to special education service provision while dually aware of the negative impact the label recommendation may exert upon the child's identity. During casual conversation and collaboration with colleagues in various venues, trainings, conferences, and such, school psychologists frequently discuss their inner perspectives, thoughts, and feelings about first hand influence upon the application of a disability label to garner educational supports and the co-occurring knowledge of the impact of the label upon a child's development.

These coffee-talk conversations often take place when consulting with colleagues (e.g., school psychologist to school psychologist conversations when consulting on cases), during professional conferences and membership meetings, as well as via internet-based platforms, (e.g., professional blogging or social media platforms). The basis of these professional conversations beckons empirical analysis. When systematically analyzed and assessed, the underlying cognitive processes and unfolding decision-making involved may inform school psychologist practice. Broader potential arises related to the current research, with intent to critically examine special education mandates requiring a disability label to allocate specialized services and programming.

The Broader Educational Context

The legal requirement for school psychologists to be involved in special education evaluations and eligibility recommendations was established by Dr. Robert G. Bernreuter in the 1930's (Guthrie & Fowler, 1997). Establishment of the legal role of school psychologists within special education continues to the present era of public education practices (IDEA, 2004; Pennsylvania Chapter 22, Title 14, 1990). Teachers,

administrators, parents, and support staff look to school psychologists for recommendations for special education eligibility and programming based upon the evaluation report conducted within the MDT framework. This legally-based, social influencing factor inherently causes a ripple effect in determination eligibility, as the school psychologist feels pressured by the team to recommend a disability label; this label is mistakenly perceived to be the only channel, or ‘gate’, to specialized opportunities to support educational programming. The resulting gatekeeper mindset, although unintended, places an unseen, but ever-present, pressure of stress and ill-placed responsibility upon one team member: the school psychologist.

School psychologists grapple with this positioning whilst knowing the repercussion of the disability label upon the child’s identity development. As such, a conflict between beliefs and knowledge versus immediate student need has the potential to develop into an internal cognitive dissonance, which must be resolved. Without dissonance resolution, school psychologists grapple with internal divergence of co-occurring thoughts or “aversive affective states” (McGrath, 2017, p.2). From the perspective of a school psychologist, the aversive affective state may manifest as a dissonance between identification recommendation for the purpose of specialized services while dually questioning the potential unintended negative impact of a disability label upon the student.

Critical Influencing Factors

Law, Ethics, and Training.

The American public education system has continually evolved, with a focus upon meeting the needs of those most vulnerable within public programming: students with

special needs and exceptionalities. The framework used to deliver special education is through a process outlined and guided by law, ethics, and professional training programs. The current status of public education focuses upon a needs-based model of individualized programming to deliver specialized services and support, via special education, to ensure that children receive an appropriate education matched to individualized strengths and needs. Special education services and supports are guided by federal regulations outlined in IDEA (2004). States are given autonomy and authority to either accept or refuse adoption of the federal regulations which outline special education services and supports.

Regulations and professional training programs inform school psychology service delivery implementation, as well as offer a plethora of guidance to ensure a consistent model of school psychology best practice. Even with all of these guiding influences, school psychologists are still often left to the role of *gatekeeper* when determining special education eligibility under Pennsylvania Chapter 22, Title 14 (Special Education Services and Programs, 1990) disability criteria related to: Autism, Emotional Disturbance, Intellectual Disability, Multiple Disabilities, Other Health Impairment, Specific Learning Disability, and Traumatic Brain Injury.

Not only is special education eligibility governed by federal and state regulation, but ethical principles set the gold standard for professional practice. Professional ethics and codes of conduct are engrained in the training of all psychologists. The standard of ethics school psychologists subscribe to is founded upon the conceptual pillar of *primum non nocere* (“first, do no harm”). The ethical training of school psychologists is influenced by the American Psychological Associations’ *Ethical Principles of*

Psychologists and Code of Conduct (2017) and *The Professional Standards of the National Association of School Psychologists* (2020b). As outlined in *A Blueprint for Training and Practice III* (NASP, 2006), school psychology practice is a highly specialized service within the broader field of psychology, as the role of a school psychologist combines knowledge of psychology, education, human development, law, and systems-level programming to provide service expertise to individuals, teams, and multi-tiered systems of support across both general education and special education.

Caseloads Limit Professional Growth.

A key element of school psychology practice is the completion of comprehensive student assessment to inform special education identification and eligibility. As outlined in IDEA (2004), school psychologists are required to be involved in eligibility decision-making under select disability categories. NASP (2021) reported, “There is a critical shortage in school psychology, both in terms of practitioners and in the availability of graduate education programs and faculty needed to train the workforce necessary to keep up with the growing student population.” This pigeon-holes the role of psychologists, leading to massive caseloads and limited time to practice beyond that of “tester.”

Furthermore, maxed caseloads place time constraints on other areas of practice which are directly tied to on-going professional growth. Specifically, the need for continuing professional development is placed at the end of a list of priorities, limiting much needed on-going professional refinement. Led by Farmer, Goforth, Kim, Naser, Lockwood, and Affrunti (2021), NASP conducted their five-year membership survey. Within the report (Farmer et al., 2021) it is evident that continued professional skill

development is minimal, simply due to the sheer amount of time school psychologists spend conducting evaluations and reevaluations for special education eligibility.

Social Theory and Phenomena.

Social Labeling Theory is drawn from the field of sociology and examines the broad impact of “labeling” through societal processes of categorization of differentiation between groups (Fairbanks, 1992; Sack-Min, 2007; Thompson, 2012). The process of disability qualification is ultimately framed upon classification systems constituting identified differences, governed and defined by federal and state regulation and statute. This framework places the identified needs as “deficits” within the child. Special education eligibility results in labeling a child. According to Social Labeling Theory, this inherently changes the child’s sense of self, as their identity is now linked to a qualifier of self that is deviant from the norm (Thomson, 2012). Furthermore, Thomson (2012) asserts that the label itself imparts devaluation of the child as “less than,” (Castillo et al., 2016; Hammer 2012).

Social Theory Phenomena also influence the process of evaluation decision-making for disability determinations. Klose et al. (2012) surveyed school psychologists’ decision-making from a social psychology lens and the impact of specific social psychology phenomena upon school psychologist general decision-making. Klose and colleagues (2012) reported that school psychologists’ decision-making is affected by several social psychology phenomena, but is most affected by the foot-in-the-door and risky shift social phenomena pressures.

Labeling Impact.

School psychologists use a categorical label to open the proverbial doors to special education programming that is individualized to student needs (Lauchlan and Boyle, 2007). Another justification for the use of labels is that it provides parents and educators with increased understanding as to why a child experiences significant difficulty in education and learning, and answers the lingering question of “*why*.” Lauchlan and Boyle (2007) reported indications supporting the use of labeling, as it serves to streamline understanding of students’ needs and inform educational programming matched to those needs.

However, in their analysis, Lauchlan et al. (2007) reported numerous counterarguments and contraindications to the aforementioned justifications supporting labeling, citing the negative impacts of student labeling to include: stigmatization, increased bullying, life outcomes (reduced opportunities), reduced expectations from parents and teachers, and misclassification. A meta-analysis, conducted by Osterholm, Nash, and Kritsonis (2007), supported these assertions.

Hammer (2012) provided a brief to the West Virginia Department of Education, summarizing the impact of classification and identification when finding a child as “exceptional.” Key findings of the synthesized research indicated that labels have an overwhelming negative impact, are stigmatizing, produce a negative self-image, lack long-term impact when compared to systems-level responsive programming included in Response to Intervention (RTI)/Multi-Tiered System of Support (MTSS), and school culture directly correlates to student treatment when identified as having a disability.

Variable Diagnostic Decision-Making.

Although highly trained, and working with a federally defined system, school psychologists continue to demonstrate difficulty with consistent diagnostic decision-making. Inconsistent data interpretation, teacher reports, recency of information provided, and perceived affinity for the student have all shown to be variables impacting the interpretation of data and diagnostic decision making (Huebner, 1990; Osterholm et al., 2007). School psychologists use outside mental health diagnoses during diagnostic decision-making for the intent of school-age disability identification. Another influencing factor during diagnostic decision-making, ultimately impacting eligibility determination, is the perception of “*how*” stigmatizing a disability category or label will be for a child.

Interestingly, Maki et al. (2018) indicated that the nature of diagnostic determinations impacts the label application. In other words, school psychologists are less confident in their diagnostic decision to identify the Learning Disability label when using RTI/MTSS when compared to the predicted-difference discrepancy analysis. School psychologist confidence decreased when the student’s achievement profile, including all measures of academic performance, were inconsistent.

Existing Research

Across the fields of education and psychology there is limited research specifically examining the internal experience a school psychologist traverses when mentally weighing the benefits and potential detrimental influences of assigning a disability label to a child. As previously cited, research is available which examines the influence of labeling upon a child’s development from the perspective of the child, parent, and

teacher lens; however, no research has targeted the experience of applying a label by those practitioners directly involved as a pivotal influence resulting in labeling a child with a disability. School psychologists need a platform to experimentally document their first-hand experience within the process of student identification specific to their thoughts, feelings, and perspectives across diagnostic decision-making, team decision-making influences, and dissonance resolution in the culminating recommendation of a label.

Significance of Study

Within the literature, it is clear that factors beyond legal regulations, ethical practice, and training influence the identification process conducted by school psychologists when labeling a child with a disability. Research has not sought to go to the source and directly question the process of identification from the perspective of school psychologists. This niche in the field of school psychology identification and labeling plays a larger role within special education practices. School psychologists' process of recommendation for disability labels is fundamental to increasing awareness of identification influences. Furthermore, this beckons an increased understanding of the cognitive processes experienced by the school psychologist when labeling a child, and the perceived impact or effect of that label upon a child's identity development and life trajectory.

Understanding *what* a school psychologist is thinking, *how* they are influenced during decision-making, and *why* they make the recommended identifications will inform self-reflection and internal growth within school psychology practice. It also brings a salience to the potential influence of the disability label, opening much needed

conversation about the impact of what is truly occurring: disability labeling to receive specialized services when the needed services could be provided without a disability label.

Delimitations

Several delimitations are noted within the current study. A primary limitation within the current research is the role of the researcher. As a practicing school psychologist within the field of public education, positionality inherently inserts the potential for implicit bias or influence within the nature of the research. Another limitation to the current study is the lack of triangulation available between the current semi-structured data collection tool and to quantitative data analysis, as no quantitative data exists specific to the current research study. A third limitation of the current research is the nature of the sample of selected participant interviewees. Generalization of findings may be limited to the current sample, a localized group of school psychologist practitioners within southeastern Pennsylvania.

Summary

School psychologists work within several macro-level systems (i.e., law, ethics, best practice training standards) when conducting assessments for the intent of determining student eligibility for special education services and supports. As specialists in the areas of psychology (behavior, learning, human development), education, and law, this positionality informs day-to-day decision-making when recommending student eligibility identification and programming to meet identified areas of student need.

However, eligibility determinations are not made within a well-controlled vacuum, and often, influencing pressures such as group expectations, long-term label impacts, and previous practitioner experiences or perspectives influence the recommendation to label a child under a special education disability category. The researcher endeavored to directly inquire, from school psychologists themselves, their thoughts, feelings, and perspectives of assigning a disability label to a child.

Clarification is needed to determine the salient factors that influence school psychologist disability identification beyond federal and state eligibility definitions/criteria. Of key interest is the examination of school psychologists' experiences related to cognitive dissonance when assigning disability labels. If indeed this incongruence causing psychological discomfort was present, the researcher intended to identify the cognitive processes school psychologists use to resolve this internalized discord.

Chapter 2

Review of the Literature

Education is a right under the 10th Amendment of the Bill of Rights. This right falls to the states to deliver and govern. Federal regulations, including the Individuals with Disabilities Education Act (2004), Americans with Disabilities Act (1990), and the newly revised Every Student Succeeds Act (2015), broadly regulate the delivery of education and specialized services. School psychologists are an integral member of multidisciplinary teams tasked with determining student eligibility for special education services and supports when student needs extend beyond general education programming and curriculum delivery.

Legal Regulations

The federal regulatory guidance delineating identification categories and qualifying criteria is outlined in the Individuals with Disabilities Education Act (IDEA; 2004). IDEA is adopted by states in order to receive federal funding for public special education programming across individual school districts. This federally governed provision of special education programming ensures all students with identified disabilities receive a free and appropriate education (FAPE) to meet identified individual student needs (IDEA, 2004). Special education service provision hinges upon student eligibility and demonstration of need under one of 13 federal disability identifications, outlined in IDEA.

Special education classification and identification is directly reported to each state's respective Department of Education to garner federal funding. The necessity of categorization to allocate and direct funds hinges upon student classification within

special education. Thus, a school psychologist's recommendation for disability labeling is inherently tied to the funding used by public education to operate special education budgets (IDEA, 2004).

Special education programming and specialized service provision is supported by federal funds disbursed through IDEA (2004) and Every Student Succeeds Act (ESSA; 2015), formerly titled No Child Left Behind (2001). ESSA (2015) is the federal regulation which ensures student growth and increased transparency of educational performance at the state level, for all students. Although states are not allocated educational funding through ADA (1990), this federal civil rights law protects the rights of students with disabilities who may not qualify for special education services or supports. However, ADA does exert influence over student educational accessibility, such that the law mandates the provision of support for all students with disabilities, beyond the 13 federally defined disability categories.

Adoption of IDEA (2004) is outlined in Pennsylvania (PA) Chapter 22, Title 14 (Special Education Services and Programs, 1990). It is the educational code governing school psychologists evaluation/reevaluation procedures in Pennsylvania. PA Chapter 22 reflects the 13 school-age disability categories under IDEA. Each disability category has set qualification criteria outlining student eligibility for special education under the respective disability category. Within PA special education, categorical systems are essential to managing and directing federal monetary resources.

Table 1. Federal and State Regulations

Federal and State Summative Influence

<i>IDEA (2004)</i>	<i>ESSA (2015)</i>	<i>ADA (2004)</i>	<i>PA Chapter 22 (1990)</i>
<ul style="list-style-type: none"> • Federal education law • Ensures FAPE • Applies to only children within the 13 disability categories • Ensures individualized services and supports for students with disabilities 	<ul style="list-style-type: none"> • Federal education law • Ensures all students demonstrate academic growth • Applies to all school age children K – 12 	<ul style="list-style-type: none"> • Federal civil rights law • Applies to all school age students with any disability • Ensures access to general education program and activities 	<ul style="list-style-type: none"> • State adopted education law • Ensures FAPE • Applies to only children within the 13 disability categories • Ensures individualized services and supports for students with disabilities

Within PA, school psychologists must be involved in the evaluation of students when considering eligibility under the following disabilities: Autism, Emotional Disturbance, Intellectual Disability, Multiple Disabilities, Other Health Impairment, Specific Learning Disability, and Traumatic Brain Injury (22 Pa. Code § 14.123). Although a school psychologist is not a required team member when determining disability eligibility under Deaf-blindness, Deaf and Hard of Hearing, Speech/Language Impairment, Visual Impairment, or Orthopedic Impairment (22 Pa. Code § 14.123), it is

best practice for their inclusion in team decision-making, as this informs the comprehensiveness of the child's evaluation and specialized programming. School psychologists' recommendations to educational teams directly influences student identification, which in turn is reported to the PA Department of Education, resulting in individual school district budget funding.

Matching Regulations to Ethical Guidance

In order to effectively and comprehensively fulfill the multifaceted roles and responsibilities of a knowledgeable and ethically driven school psychologist, training and practice is guided by training blueprints and ethics published by the National Association of School Psychologists (NASP; 2006) and ethical codes published by the American Psychological Association (APA; 2017). While regulatory laws, statutes, and case law can be viewed as the legal minimum standards, ethics can be viewed as the ideal that all school psychologists strive to meet during daily activities in the assistance of students, teachers, parents, and educational teams.

Within the governance of federal and state law, while striving to meet ethical standards, NASP training and professional development guidance sets the foundation for ethical application of school psychologists' skills and expertise in practice (NASP, 2006). As such, school psychologist training is an on-going, cumulative collection of experience and application of active service within the boundaries of law while seeking to aspire to the highest ethical standards.

Ethical Considerations

Professional ethics and codes of conduct are engrained in the training of all psychologists. The APA standard of ethics (2017) school psychologists subscribe to is

founded upon the conceptual basis of *primum non nocere* (“first, do no harm”). The primary focal point of care and concern is always at the level of the child or student body. Yet, this standard of ethical practice is challenged, albeit almost unknowingly, when asserting a disability label.

The ethical training of school psychologists is influenced by the American Psychological Associations’ *Ethical Principles of Psychologists and Code of Conduct* (2017) and *The Professional Standards of the National Association of School Psychologists* (2020b). The APA code of ethics contains five general aspirational principles, “intended to provide governance for psychologists,” (APA, 2017) and 10 ethical standards designed to give direct, explicit guidance. Taken together, the APA (2017) and NASP (2020b) principles and ethical standards are designed with the intent to inform practice to ensure the highest level of welfare is provided to the individuals and groups receiving psychological services: the child or a group of students.

Principle A of the APA code of ethics relates to beneficence and nonmaleficence. In summation, this principle outlines the responsibility of psychologists to do no harm, to safeguard the welfare and rights of the recipients of services, as well as to guard against potential harm that may result from the direct influence of their related involvement (APA, 2017, p. 3). Within the APA (2017) ethics code, Human Relations (Code 3.04), it is noted that “(a) Psychologists take reasonable steps to avoid harming their clients/patients [...] and others with whom they work, and to minimize harm where it is foreseeable and unavoidable,” (p. 6).

Lasser and Klose (2007) encourage school psychologists to serve as “dual citizens” during the evaluation and multidisciplinary team decision-making process to

minimize harm. This duality serves to work towards providing the best programming for students while stepping outside the group to ensure that group think and social conformity pressure does not sway decision-making (p. 497). School psychologists strive to adhere to ethical standards while practicing an art that has the potential for long-term negative impact. This potential long-term negative impact manifests from the very process of recommending students for a disability, as described within the field of social labeling theory (Gove, 1980; as cited in Thomson, 2012).

Blueprints for Training and Continuous Growth

School psychology practice is a highly specialized service within the broader field of psychology, as the role of a school psychologist combines knowledge of psychology, education, human development, law, and systems-level curricular programming to provide service expertise to individuals, teams, and multi-tiered systems. As delineated by *A Blueprint for Training and Practice III*, school psychologists, “training is clearly focused on the principles of psychology and education and the scientific method,” (NASP, 2006).

Furthermore, the training and continuous growth of school psychologists spans ten broad domains of practice and expertise within a tiered service delivery model, with outcomes focused upon students and building capacity at the systems level (NASP, 2006, p. 2). The ten domains of competency across an integrated service delivery model include (NASP, 2020b):

- 1) Domain 1: Data-Based Decision-making
- 2) Domain 2: Consultation and Collaboration
- 3) Domain 3: Academic Interventions and Instructional Supports

- 4) Domain 4: Mental and Behavioral Health Services and Interventions
- 5) Domain 5: School-Wide Practices to Promote Learning
- 6) Domain 6: Services to Promote Safe and Supportive Schools
- 7) Domain 7: Family, School, and Community Collaboration
- 8) Domain 8: Equitable Practices for Diverse Student Populations
- 9) Domain 9: Research and Evidence-Based Practice
- 10) Domain 10: Legal, Ethical, and Professional Practice

Training Focus: Assessment for Eligibility

The scope, depth, and breadth of school psychologists' practice is succinctly described in NASP's Position Statement outlining *School Psychologists' Involvement in Assessment* (2016):

[...] school psychologists are uniquely suited to promote best practices in assessment and evaluation and to determine, in collaboration with others, when assessment is warranted. School psychologists have completed in-depth and advanced preparation in conducting interviews, completing systematic observations, and selecting and administering tests and other assessment instruments supporting evidence-based and culturally sensitive practices. They are also well prepared to interpret and evaluate information obtained from assessments to guide educationally relevant decisions. Because of their expertise and training in these areas, school psychologists should

- a) plan and conduct assessments of individuals, groups, and systems,
- b) interpret assessment results, and

- c) engage in data-driven decision-making as part of school-based services supporting students (p. 1).”

This coherent framework of school psychologist training encompasses knowledge and skill application across ten domains of foundational and functional competency, which work, “in concert to achieve the broader aims of school psychology practice: improving student competence and building systems capacity,” (NASP 2006, p. 15). A core role, consuming the majority of time within a typical school psychologists’ career is assessment and evaluation for the intent of special education eligibility and service recommendations (NASP, 2006). According to the U. S. Bureau of Labor and Statistics (2021), there are approximately 57,110 school psychologists in the United States; all school psychologist have had comparable training in preparation for certification to enter education (NASP, 2006).

Professional Development or Lack Thereof

The NASP framework for training guides the role and function of school psychologists during completion of a minimum of 60 graduate credits, supervised practica, successful praxis testing, culminating in 1,200 hours of supervised internship effecting the knowledge and skills gained during graduate training across the ten domains of competency, earning the title of Nationally Certified School Psychologist (NASP, 2022). School psychologists then enter the field of education with intents to practice the skills and competencies gained across the 10 domains of expertise, but find themselves burdened by high caseloads and mounting requests for evaluations.

The *Blueprints* (NASP, 2006) clearly describe the need for continuous and on-going development to ensure best practices from the field of research to inform multi-

tiered service delivery, as well to continuously hone areas of needed professional refinement. Far too often, time restraints due to case load demands limit this area of necessitated, continuous training.

Led by Farmer, Goforth, Kim, Naser, Lockwood, and Affrunti (2021), NASP conducted their five year membership survey. Within the report (Farmer et al., 2021) it is evident that continued professional skill development is minimal, simply due to the sheer amount of time school psychologists spend conducting evaluations and reevaluations for special education eligibility. School psychologists, on average, are conducting more initial evaluations now than ever before, with an average of 55 comprehensive evaluations per year by each practitioner (Farmer et al., 2021). This does not include reevaluations which do not include comprehensive standardized assessment. School psychologist to student ratios continue to hover around 1:1200, ultimately limiting the time and mental effort available to invest in any other school psychologist duties falling outside the scope of responsibilities related to evaluation and identification (Farmer et al., 2021).

Specifically, using Kendall's τ_b test of significance, as student to school psychologist ratios increase, the role consistency within the NASP Practice Model and direct application of the domains of competency decreases (p. 10). Concerningly, the NASP 2020 Membership Survey noted a significant decrease in time spent in professional development (p. 9). Although comprehensive in demographics, practices, and characteristics, Farmer et. al. (2021) note that, "the data do not address whether school psychologists are happy with their current roles," (p. 14). This leads one to reasonably question how this trend impacts school psychologists' best practice related to

student identification and labeling, when training and continuous professional development are minimal in all domains of capacity. When considering the unique interplay between time constraints, high caseload demands, limited opportunities for professional development, minimal reflection of professional practice, and the impact of evaluation and eligibility upon the child, school psychologists can find themselves working within a limited scope of practice without time to consider the impact of daily decision-making and service recommendations.

Application of Ethical Guidance to School Psychologist Practice

Considering the aforementioned principles and ethical codes within the context of a best practice school psychology service delivery model, school psychologists are primarily concerned with the welfare of the students, and are ethically obligated to inform the necessary parties of potential harm to a student's identity development that may arise from psychological services. The unique training of school psychologists' manifests as a daily interweaving and interplay across capacities, specialized skills, and in-depth knowledge within the oversight umbrellas of legal and ethical guidance. One such interplay of application of capacities across the ten domains of training competencies, outlined in the training Blueprint (NASP, 2016), are the influence and intersecting roles of Domain 10: Legal, Ethical, and Professional Practice and Domain 1: Mental and Behavioral Health Services and Interventions (NASP, 2020).

An example of direct application of these intersecting domains of ethical practice is the provision of school psychological services during the evaluation process, resulting in the recommendation to qualify a child for special education via disability identification under one of the 13 disability categories to receive academic, behavioral,

or mental health services. This assignment of a disability label to open the gateway to service and supports has the potential to cause harm upon the identity development, self-esteem, and sense of self-efficacy on the part of the receiving child.

The principles and codes indicate that benefits shall outweigh harm, but when harm cannot be avoided, the school psychologist is required to have a conversation with all vested parties (NASP, 2006, 2020a, 2020b). The school psychologist is directed to comprehensively inform all those involved of the intended benefits of receiving special education by gaining a disability identification, as well as the potential harm that may be incurred by the child when labeled with a disability. Additionally, from the lens of a school psychologist, a sense of cognitive dissonance has the potential to arise when identifying a child with a disability in order to gain access to specialized services and supports within special education. The potential arises that the disability label may trigger a negative association in the child related to their sense of self or identity due to this disability (Osterholm, Nash, & Kritsonis, 2007). Ethical standards are clearly delineated (APA 2017; NASP 2020b), but school psychologists are often challenged to maintain this ethical autonomy when pressured by stakeholders to “*do something*” to help a struggling student. This is especially true when previous intervention efforts have been fruitless in supporting a child’s academic or behavioral growth or remediation.

School psychologists receive intense training and are exceptionally skilled practitioners, with consistency in the training across graduate programs based upon guidance within the NASP *Blueprints* (2017), yielding a consistent continuum of care. Alas, the knowledge and skill base of school psychologists is often halted after formal graduate training due to work demands. This equates to a lack of on-going professional

development and long-term decay of previous skill development across capacities beyond the role of evaluation and disability assignment (Sadeh et al., 2017). Limited continuing professional development within a demanding caseload pressures sound and ethical decision-making, reducing the aspirations of practicing at a level of ethical actualization and legal exactness.

Social Labeling Theory Overview

Social Labeling Theory is drawn from the field of sociology and examines the broad impacts of “labeling” through societal processes of categorization for differentiation between groups. Gove (1980, as cited in Thomson, 2012) outlined two stages within labeling, “the process that results in labelling and the consequences of labeling,” (p. 159). Within special education, the two stages of Social Labeling Theory manifest as: 1) the process of evaluation to determine student special education eligibility under one of the 13 disability categories (i.e., labels), and 2) the resulting consequences of that identification, both positive and negative. The process of qualification is ultimately framed upon classification systems constituting identified differences, as outlined by federal and state regulation and statute. This frames the qualifiers for identification as “exceptional” and in need of individualized educational programming to meet the identified “deficits” within the child.

Social Labeling Process

As cited in Thompson (2012), Fairbanks (1992) describes the process of labeling as inherently problematic, in three specific ways: “1) labels are negative in their depiction of deficits; 2) labels become the defining characteristic of the person, denying their complex whole; and 3) the use of labels for identifying special education needs fails

to properly assign failure to the education system,” (p. 161). In other words, the identification of a student within one of the 13 disability categories does not adequately describe a student's needs, the label then becomes the defining factor of a child's education when it is one factor among many of a complex child, and the label asserts the problem is within the child, or organic, rather than the resulting deficits of public education, forcing children to fit a predetermined mold. As Sack-Min (2007) succinctly states, the application of a disability label, “is a profound decision that affects the rest of his or her educational career and life,” (p. 23).

Social Labeling: Basic Impact

Labeling a child inherently changes their sense of self, as their identity is now linked to a qualifier of self that is deviant from the norm (Thomson, 2012). Thomson's (2012) synthesis of the current field of social labeling research, intersecting across education, psychology and sociology, encapsulates the potential for harm: labeling can result in harm to the development of the child, specifically his or her sense of self-esteem, self-efficacy, and long-term development. Furthermore, Thomson (2012) asserts that the label itself imparts devaluation of the child as “less than.” The label informs the child how he or she should perceive himself/herself, and the label leads to the culmination of a self-fulfilling prophecy of the perspectives from others. Then, it is internalized and adopted as the child's demonstrated manifestation or display of inadequacy.

Social Labeling: A Synthesis of Impact

Castillo et al., (2016) endeavored to systematically assess the facilitators and barriers to school psychologists' comprehensive service provision within education that

are discussed in the research literature, but often not experimentally queried via primary reports. Within their qualitative analysis of associated factors, Castillo and colleagues (2016) investigated school psychologists' first-hand perspectives specific to emergent themes within service provision. Several factors were cited as necessary for reform, or requiring a level of change. One participant noted;

[...] the problem is not within the kids themselves. The problem is with the systems and the structure that we have. If we can improve those then we can improve how the children function rather than focus on what's wrong with kids. (p. 652)

On behalf of the West Virginia Department of Education, Hammer (2012) provided a brief to the state to summarize the impact of classification and identification. The intent of Hammer's synthesized research was to provide a briefing of the state of affairs across specialized programming while labeling a child as "exceptional." Several key findings were garnered from this synthesis of almost 40 years of labeling research:

1. Although overwhelmingly negative, labels have mixed influence dependent upon the mitigating variables present to each unique child's situation.
 - a. Labels have a negative impact, such as by altering and lowering teacher expectations, parent expectations, and peer friendships.
 - b. Labels can have a positive impact, such as providing a perceived description for parents to account for their child's functioning or provide validation for their child's behavior. Labels also yield access to specialized programming and services.

2. Students report experiencing a direct impact of their label through “enacted stigma” manifested in the form of being “tease[d], ridiculed, and bullied,” (p. 8).
3. Students often feel negatively about themselves due to their label, reporting embarrassment for their disability and peer avoidance due to association with a child with a perceived deficit.
4. Certain labels are preferable to other labels.
5. RTI/MTSS accomplishes the same results of a disability label assignment.
6. School culture directly impacts the likelihood of student maltreatment if identified with a disability.

Labeling: Indications and Contraindications

Categorization is necessary to create a common language for educators, specialists, parents, and school psychologists. Categorization in education is synonymous with the terms ‘category’ or ‘label.’ When students with exceptional needs, beyond what can be provided within the general education curriculum are evaluated, school psychologists use a categorical label to open the proverbial doors to programming that is individualized to student needs (Lauchlan and Boyle, 2007). Another justification for the use of labels is that it provides parents and educators with increased understanding regarding their child’s substantial difficulties in education and learning, and answers the lingering question of “*why?*” (p. 40).

Furthermore, in their synthesis of the literature, Lauchlan and Boyle (2007) reported that certain researchers support the use of labels, as they streamline understanding of students’ exact needs and inform educational programming matched

to those needs. Lauchlan et al. (2007) also described and cited counterarguments to the justifications above, indicating the negative impacts of labeling to include “stigmatization, bullying, reduced opportunities in life, a focus on within-child deficit, misclassification, and lowered expectations about what a “labelled” child can achieve,” (p. 43).

Similar research examining the utility of labels was conducted by Osterholm, Nash, and Kritsonis (2007), focusing solely upon identification of students with a learning disability. Osterholm and colleagues examined trends across research from 1970 through 2000. During the three decades of research, they found 34 quantitative and qualitative studies which specifically examined the impact of labeling a child with a specific learning disability. The culminating meta-analysis yielded four salient themes across the included studies: expectations, stereotypes, and attitudes; stigmatization, rejection, and social isolation; attitudes don’t always predict actions; and, a differential influence of the label when matched with other salient information (Osterholm et al., 2007. p. 4). Each theme, framed within social labeling theory, supported the assertion that the specific learning disability label itself has a net negative result outweighing the intended benefit (Osterholm et al., 2007).

Sadly, Osterholm (2007) indicated that students with a label experienced significantly reduced peer friendships. Moreover, and consistent with the findings later briefed by Hammer (2012), students with disabilities: demonstrated increased physical and emotional isolation and separation from peers, teachers and parents maintained lower expectations for students with formal disability labels, and students experienced stigmatization and rejection from peer and adult groups as a result of their label.

Diagnostic Decision-Making

Huebner (1990; as cited in Osterholm et al., 2007), analyzed the diagnostic and clinical decision-making of school psychologists. Within their study, they provided school psychologists with a plethora of demographic and diagnostic information regarding students identified as either typically developed with no identified needs or students receiving special education services due to identified needs. Key findings asserted that the school psychologists' decision-making process to determine learning disability identification was mediated by current test scores. They also reported that previous identification status had limited influence upon current recommendations. In other words, when a child is already identified as having a specific learning disability, current assessment data was given more weight when informing student needs versus previous assessment report findings or data. As such, "the LD label loses potency when additional information is available to moderate it," (Osterholm et al., 2007). These findings suggest that the recency of data available plays a role in school psychologist decision-making.

Due to the restrictive nature of the 13 school-age disability identification categories, school psychologists assign labels to students that may be misleading, offer limited insight into the child's needs, and/or minimize consistency between the coordination of care across community agencies or service providers (Barnard-Brak et al., 2013). Barnard-Brak and colleagues (2013) probed the nature of this diagnostic disability decision-making and label assignment through random selection of practicing school psychologists in Texas. Within their study, Barnard-Brak et al. (2013) examined the school psychologists' diagnostic decision-making process of disability labeling

specific to a child's mental health diagnosis. Mental health illness aligned to the *Diagnostic and Statistical Manual of Mental Disorders – Fourth Edition, Text Revised* (APA, 2013), were matched to the school-age disability labels, with the consideration of which label would best serve the child in school, as well as the perceptions of the assigned label.

Their findings indicated that school psychologists do consider outside mental health diagnoses during diagnostic decision-making for the intent of school-age disability identification, but decisions are mediated by the perceived nature of the school-age disability identification likely to best serve the child in the school setting (Barnard et al., 2013, p. 573). In other words, outside mental diagnoses are considered in the process and viewed as correct, but do not dictate school psychologists' determination of which label is perceived to best support a child's needs in school. A significant finding garnered from the research by Barnard-Brak et al. (2013) is the impact of the perception of "how" stigmatizing a disability category or label will be for a child. School psychologists are less hesitant to identify learning disorders than other categories associated with increased stigmatization (i.e., bipolar disorder or schizoaffective disorders under an emotional disturbance label; p. 574).

When considering the results gathered by Barnard-Brak et al., (2013), the study is limited in the scope of defining a child's *needs*. The findings indicated that a child's needs impacted disability labeling and differential decision-making between labels. The limited definition of *need*, within their study, was restricted to academic performance, which could ultimately influence the reported results across the school psychologists included in the sample. In other words, the limited scope of *need* may not accurately

portray diagnostic decision-making for students when identified *need*, such as social or emotional needs, extend beyond the limited domain of academic achievement.

Another significant limitation within the available literature, not limited to the works of Barnard-Brak et al., (2013) or Huebner (1990), is the use of vignettes and Likert scales to assess school psychologists' perceptions of labeling and how they predict they'd respond in contrived scenarios. A deeper and richer first-hand account is needed to better understand school psychologists' decision-making, specific to labeling, and their first hand lived experience of the process of labeling a child with a disability. This qualitative, phenomenological, grounded theory approach is essential to truly understanding the influences at play during identification labeling and the impact upon school psychologists' thoughts, perceptions, and feelings of the process, as well as their perceptions of the impact amongst the stakeholders involved, most importantly the children and families served.

Labeling and Legal Ambiguity

Special education disability criteria outlining qualification for special education appear to be clear cut and straightforward. School psychologists are reported to experience similar training and certification requirements across the nation (NASP, 2020). Federal law (IDEA 2004) sets the precedence for state-adopted standards (22 Pa. Code § 14), yielding a framework of special education that would appear to be nationally consistent. Still, there continues to be ambiguity within legal decision-making related to causality and intended meaning or definitions of legal terms within the identification process, including terms such as “educational performance”, and “adverse impact,” (Sadeh & Sullivan, 2017). This ambiguity is often left to the individual school

psychologist to interpret or decipher while advising school-based multidisciplinary teams (Sadeh et al., 2017).

This extreme disconnect in regulation versus actual practice results in a gray area of diverse eligibility determinations. In an effort to understand school psychologists' assessment and diagnostic decision-making practices during Emotional Disturbance (ED) identification labeling (which is one of the 13 disability categories, with its' own unique set of criteria to meet eligibility, including qualifying and disqualifying criteria), Hanchon and Allen (2013) investigated school psychologist assessment practice. Within their report, a notable finding was legal regulations and definitions produce, "an environment in which inconsistent assessment practices and decision-making are almost inevitable," (p. 193).

Scardamalia, Bentley-Edwards, and Grasty (2018) highlight the ambiguity which is confronted within the field. They examined the poorly operationalized definition and impact upon school psychologist identification when considering the ED label. In addition to an evident impact of poorly operationalized terms and lacking a set of clear processes to determine ED eligibility, Scardamalia et al. (2018) found that school psychologists' recommendation for special education via an ED label yielded: poor consistency between participant eligibility determinations, low consistency in the criteria used to determine ED eligibility, and differing participant perceptions of the students labeled ED versus those not found to be ED. Furthermore, Bal, Betters-Bubon, and Fish (2019) reported that these influencing factors during ED identification result in abhorrent disproportionality of ED identification labeling among minority youth.

Although limited to examination of school psychologists' decision-making and perceptions of ED eligibility via vignette and questionnaire analysis, Scardamalia et al., (2018) underscored the salient factors in school psychologist disability labeling decision-making. Deciding factors within the framework of ED categorization, confounded by an unclear operationalization of ED, and varying assessment practices, all complicate the application of an ED label by a school psychologist.

Label Preferences and Disproportionality

Another element of school psychologist decision-making when determining if an identification label is appropriate is the associated perceptions and meaning of the differing disability labels by those within the educational setting (Barnard-Brak, Stevens, Robinson, & Holt, 2013). Simply put, certain labels are preferred to other labels, and certain labels are more likely applied to certain groups of students more than other groups of students. One such example is the alarming rate ED labels are assigned to minority students. Despite systems-level attempts to increase equitable service delivery, special education identification disproportionality continues:

Three categories of Special Education have been characterized as high incidence and have been reported to have the highest rates of disproportionality: learning disability, mild intellectual disabilities, and emotional/behavior disorders (Arnold & Lassmann, 2003, as cited in Scardamalia et al., 2019).

Furthermore, African American students are twice as likely to be identified with an ED label compared to Caucasian students (Scardamalia et al., 2019, p. 571). Although Scardamalia et al. do not directly discuss the contributing factors leading to disproportionality, they do reference factors influencing disproportionality as

potentially residing within the categorical disability definitions and misinterpretation of behavior from a culturally informed lens (Scardamalia et al., 2019).

Osterholm et al. (2007) noted the tendency for educational psychologists to opt to use certain labels over others (i.e., learning disability versus emotional/behavioral disorder). Although their work was limited to research conducted between 1970 through 2000, the meta-analysis of pertinent findings is supported by the lived experience of school psychologists working in the field today. Two relevant findings provided by Osterholm et al. (2007) offer hope for children within the current system of categorization and labeling. Attitudes and perceptions reflected upon the child due to the disability label did not translate into negative actions by peers or adults. Furthermore, negative prejudice didn't equate to negative discrimination (p. 7).

Intersection of Ethics, Law, and Practice

Sadeh et al. (2017) reviewed the legal and ethical impacts experienced by school psychologists within the multidisciplinary team decision-making process. In addition to consideration of federal regulation and ethical guidelines, a vast array of case law was considered, noting additional factors which were suggested as influential to school psychologist identification and decision-making, summarized as:

- 1) pressure from vested stakeholders within the multidisciplinary team is applied to come to a preferable conclusion,
- 2) preference for qualification for services under one disability category versus others (i.e., Other Health Impairment versus Emotional Disturbance) was noted,

- 3) availability of services and resources pre- and post- labeling influences eligibility,
- 4) potential legal ramifications if an identification conclusion by the school psychologist is not a preferred recommendation is considered,
- 5) causality of determination is not always based upon the available data or best-practice decision-making,
- 6) previous implementation of interventions within a Multi-Tiered System of Support (MTSS) influences eligibility, and
- 7) potential suppression of divergent opinions during decision-making is often present in decision-making processes.

Social Psychology: Cognitive Dissonance

School psychologists must weigh numerous considerations and factors from a vast array of systems and stakeholders when identifying and recommending student disability labels. Versed in the impact of labeling upon identity development, as posited by social labeling theory, school psychologists must also consider their role in potentially negative outcomes for students. When faced with the need to identify a student with a disability to secure special education services and supports, paired with the negative impact of a label upon the child's identity, the affective dissonance or disconnect between these thoughts is termed cognitive dissonance (Festinger, 1957; as cited in Harmon-Jones & Mills, 2019). This internalized difference or dissonance in thoughts creates psychological discomfort, which must be resolved by the individual experiencing the psychological state. To date, no research has empirically assessed this process of cognition within school psychologist eligibility determination when

recommending student disability identification for the intent of services while assigning an identity-changing label.

Social Psychological Phenomena

Klose, Lasser, and Reardon conducted a case study (2007), and later an empirical analysis (2012), of school psychologist decision-making from a social psychology lens. The impact of specific social psychology phenomena upon school psychologist general decision-making, not solely identification decision-making, was considered. Social psychology phenomena analyzed in their research included: foot-in-the-door or sequential-request compliance, group think, risky shift decision-making, social pressure to conformity, obedience to authority, fear appeals, and informational influence.

Klose and colleagues (2012) reported that school psychologists' decision-making is affected by all of the aforementioned social psychology phenomena, but is most affected by the foot-in-the-door and risky shift social phenomena pressures. The research is limited by the method of analysis and scope of the experimental design conducted (i.e., use of vignettes and Likert responses); however, Klose et al. (2012) garnered first-hand hypothetical perspectives from practicing school psychologists regarding perceived factors related to decision-making beyond legal and ethical influences. School psychologists are likely to make small concessions to team members, later leading to larger concessions to team member demands, and not necessarily aligned to the data (Klose et al., 2012). Additionally, Klose et al. (2012) noted the sudden and significant change in recommendations to teams based upon the group pressure placed upon the school psychologist.

School Psychologists' Confidence

Additional factors (beyond legal regulations, ethical codes, training experience, social pressures, diagnostic practices, and perceptions) influence disability labeling. Maki, Burns, and Sullivan (2018) examined school psychologists' self-reported confidence in diagnostic decision-making specific to the identification and application of the specific learning disability (LD) identification category. Currently, legal regulations (IDEA 2004) outline qualification criteria for the LD disability label. The two unique methods of diagnostic LD decision-making include the predicted difference discrepancy analysis method or the RTI/MTSS method.

Maki et al. (2018) found that school psychologists were less confident in their diagnostic decision to identify the LD label when using RTI/MTSS compared to the predicted-difference discrepancy analysis model. School psychologist confidence decreased when the student's achievement profile, including all measures of academic performance, were inconsistent. Interestingly, Maki et al. (2018) produced no difference in school psychologist confidence in LD qualification when considering school psychologists' years of experience (i.e., no difference in LD identification confidence between 0 to 5 years of experience versus more than 6 years of experience). No difference in confidence of accurately identifying an LD label dependent upon level of training was found (i.e., no difference in reported confidence of LD identification between master's level, specialist's level, or doctoral level school psychologists). Self-reported confidence was not found to statistically predict consistency in LD identification.

Summary of the Literature

Sadeh et. al (2017) offers a poignant critique of the myriad of factors which are uniquely influential during student eligibility determination and labeling, almost opining, “*What is an ethical school psychologist to do?*” (Sadeh et al. 2017, p. 1142). Each of the discussed factors are in constant fluctuation, to varying degrees. School psychologists are continuously tasked with managing, evaluating, analyzing, and determining what is best for the child, and report back to a team with a final recommendation for consideration. All factors, current and future, are under continual and constant consideration by school psychologists.

The researcher proposed that a necessary first step is the direct questioning of school psychologists to determine what themes and patterns influence disability labeling, and the imparting impact the application of the label has upon the cognitive processes of the school psychologists involved. Furthermore, the researcher aimed to examine the presence of cognitive dissonance, and if this imparts influence upon the school psychologists’ process of evaluation for label identification.

Purpose of the Current Study

School psychologists are an integral member of educational teams, expertly trained in cross-competency domains, one of which is the intricate evaluation process to determine student eligibility for special education. Specialized services and supports often hinge upon the recommendation of the school psychologist to the multidisciplinary team. The recommendation of the school psychologist bears a net weighted influence on team decisions when assigning a disability label to a child. Research across the fields of law, education, psychology, and special education has

examined factors which influence school psychologists' decision-making during the process of disability determination. There is also research which examines the impact of a disability label upon a child's identity.

Yet, limited research exists which has gained first-hand accounts from school psychologists regarding their thoughts, perceptions, and feelings about the process of disability labeling and possible repercussions of the decision to recommend a disability label(s). As a practicing school psychologist, the researcher posited that school psychologists' perceptions and process of student disability identification are influenced by factors beyond federally and state defined qualifying criteria. Social impacts, educational team dynamics, knowledge of assessment, diagnostic decision-making confidence, social phenomena, training, professional development, and demanding caseloads all influence decision-making. Research is scarce regarding the perceptions of the actual "utility and beneficence" of the process of labeling for the intent of specialized programming.

The current status of the school psychologist psyche within role responsibilities is a balancing act of juggling stakeholder demands with student needs. On one hand, the school psychologist maintains the knowledge of the impact of a disability label upon student identity development, but is also compelled to identify the student with a label to open the pathway to special education. This has the potential to cause an internal cognitive dissonance when providing services to a child in need through labeling and disability identification.

The decision to find a child eligible for special education may be unconsciously contraindicated by the potentially negative impact of altering a student's identity

development and sense of self-efficacy. Experimental studies have attempted to assess pieces of this intricate puzzle of student disability labeling by providing surveys, vignettes with Likert ratings, or questionnaires to school psychologists to gain insight. Yet, no research has assessed the first-hand perspective of the keystone professionals perfectly positioned to inform current practices: school psychologists.

Research Questions

The researcher gathered direct, qualitative input from the school psychologist practitioners themselves, attempting to yield rich and insightful knowledge to inform and reform current disability labeling practices. Through completion of the current qualitative study, the researcher directly sought answers to the following:

- 1) What are school psychologists' thoughts, feelings, and perspectives of assigning a disability label to a child?
- 2) What salient factors influence school psychologist disability identification beyond federal and state eligibility definitions/criteria?
- 3) If school psychologists experience cognitive dissonance when assigning disability labels, how is this cognitive process resolved?

Need for the Study

Within the literature, it is clear that factors beyond legal regulations, ethical practice, and training influence the identification process conducted by school psychologists when labeling a child with a disability. Additional factors, such as the nature of the label, the data available to the psychologist, social pressures, the confidence of the school psychologist, opportunities for service provision based upon eligibility, legal and ethical requirements, and knowledge of labeling impacts are a few

of the factors which influence school psychologists' identification practices. However, research has not sought to go to the source and directly question the process of identification from the perspective of school psychologists.

This niche in the field of school psychology identification and labeling plays a larger role within special education practices. School psychologists conduct comprehensive evaluations of students' strengths and needs, with matched educational recommendations for targeted programming, independent of the special education disability label. Special education funding hinges upon the identification recommendations made by school psychologists to multidisciplinary teams.

Understanding the factors at play, and increasing salience to those factors, ultimately may change the trajectory of special education decision-making. School psychologists' process of recommendation for disability labels is elemental to increasing awareness of identification influences. This then beckons for increased understanding of the cognitive processes experienced by the school psychologist when labeling a child, and the perceived impact or effect of that label upon a child's identity development and life trajectory.

The researcher gathered qualitative input through semi-structured interviews to collect and analyze firsthand accounts of school psychology practice of labeling, to answer the proposed hypotheses. Understanding *what* a school psychologist is thinking, *how* they are influenced during decision-making, and *why* they make the recommended identifications will inform self-reflection and internal growth within school psychology practice and special education processes at large. The current research also brings a salience to the potential influence of the disability label, opening

much needed, over-due conversation about the impact of what is truly occurring: disability labeling to provide students with specialized services when the child's identified needs could be supported without a disability label.

Concluding Declarations

Special education services and supports are an integral component of public education. The gateway to such services begins with an evaluation of the child to determine if significant needs exist and qualify a child for such support. School psychologists are an integral member of a multidisciplinary team, charged with making the recommendation of what disability label a child may qualify under, and the nature of need for specialized programming. Legal, ethical, and training guidelines attempt to make the process clear by producing regulations and guidance; however, as a deeper analysis of the process is conducted, it is clear that the practice of labeling a child becomes exceptionally intricate.

Factors beyond cut-off criteria and disability definitions play a major role in a school psychologists' diagnostic decision-making process, and the impact of the label upon a child's development cannot be ignored. School psychologists' firsthand accounts of their internalized cognitive processes and experiences need to be examined. A better understanding of their perceived role in the process of identification will inform best practice and relevant student outcomes. The research gained resulted in increased understanding and self-reflection of professional practices during the evaluation process. Additionally, the knowledge gained can be cited within school psychologists' advocacy for student intervention pre-evaluation and result in ensuring identification is absolutely necessary to provide individualized, targeted services and supports. The

salient factors influencing recommendations for labeling, and school psychologists' internal resolutions of potential cognitive dissonance as a result of labeling, is not yet truly researched or understood. There is a pressing need to better understand school psychologists' thoughts, feelings, and perspectives when assigning a disability label to a child.

Chapter 3

Action Plan

Using the phenomenological framework to formulate grounded theory answering the three key research questions, the researcher explored and elicited direct feedback from school psychologists. Framed within the phenomenological process of inquiry, the researcher attempted to gain first-hand accounts from the actors directly involved: school psychologists (Creswell & Creswell, 2018). Grounded theory unfolded as the researcher interviewed and gained first-hand reports and perspectives of practicing school psychologists regarding their thoughts, feelings, and opinions specific to the three research questions guiding the study (Patton, 2015). This laid the foundation and framework for endeavoring to answer the yet unquestioned and untouched domain of study of school psychologists' first-hand perspectives.

Using a qualitative research inquiry, semi-structured interview questions were posed to each participant to target the hypotheses. The format of the semi-structured interview directly presented questions to each participant, targeting the hypotheses while allowing for open-ended follow-up questioning, as responses guided the conversations amongst each participant. The nature of data collected were documented interviews collected by the researcher, coded for themes and sub-themes. Semi-structured interviews were initially conducted. The methodology was intentionally designed to allow the research to conduct secondary follow-up interviews if additional explanation or clarification was required by the researcher. Follow-up interviews were determined by the researcher based upon the potential need to gain further information or clarification regarding intended meaning by the participants during their initial

interviews. Completion of the ten interviews spanned a total of one month. The following table outlines the researcher's actions after successfully gaining dissertation committee review and IRB approval in December 2022.

Table 1. Steps in Data Collection

Research Action Steps

<i>Step</i>	<i>Action</i>
1.	Email to gain participants sent to BSPA list-serv December 2022.
2.	Interested participants emailed researcher December 2022.
3.	Researcher gained demographic information from interested participants to stratify sample.
4.	Researcher reviewed informed consent with selected participants, with signature of informed consent secured and filed per university regulation.
5.	Interviews scheduled and conducted with initial set of selected participants in December 2022.
6.	Second email to gain participants sent to BSPA list-serv in January 2023.
7.	Interested participants emailed researcher in January 2023.
8.	Researcher gained demographic information from interested participants to stratify sample, fulfilling participant sample size of 10.
9.	Researcher reviewed informed consent with selected participants, with signature of informed consent secured and filed per university regulation.
10.	Interviews scheduled and conducted in January 2023 with the remaining eight selected participants.

11.	Researcher transcribed 10 semi-structured interviews in January 2023.
12.	Researcher manually coded transcripts to examine emergent themes in January 2023.

Research Questions

The semi-structured interviews between the researcher and the school psychologist participants targeted the three hypotheses noted below. The research questions (RQ) guiding the semi-structured interview questions, asked of each participant, included:

- 1) What are school psychologists' thoughts, feelings, and perspectives of assigning a disability label to a child?
- 2) What salient factors influence school psychologist disability identification beyond federal and state eligibility definitions/criteria?
- 3) If school psychologists experience cognitive dissonance when assigning disability labels, how is this cognitive process resolved?

Based upon the literature and theoretical foundations, the researcher hypothesized the following:

Table 2. Null Hypotheses and Predictions

Guiding Questions.

<i>Research Questions</i>	<i>Researcher Hypotheses Predictions</i>
RQ1:	

What are school psychologists' thoughts, feelings, and perspectives of assigning a disability label to a child?	School psychologists experience similar thoughts and feelings, which include consistent thoughts, feelings, and perspectives when assigning a disability label to a child.
<p>RQ2:</p> <p>What salient factors influence school psychologist disability identification, beyond federal and state eligibility definitions/criteria?</p>	School psychologist disability identification is influenced by a multitude of factors (i.e., ethics, legal regulation, district/school resources, past interventions, key stakeholders), including knowledge of social labeling, internal variables, and external social influences.
<p>RQ3:</p> <p>If school psychologists experience cognitive dissonance when assigning disability labels, how is this cognitive process resolved?</p>	School psychologists experience cognitive dissonance, caused by a dynamic interplay between the need to secure specialized services through assignment of a label whilst understanding the potentially negative and enduring impact caused by labeling a child with a

	disability, resolved by focusing upon the immediate needs of a child while selectively ignoring long-term labeling impacts.
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Internal Review Board Approval

Upon approval of the proposed study by the researcher's committee, the researcher submitted the required documentation to Slippery Rock University – Internal Review Board (IRB). The study was considered to incur minimal risk to the participants, and was submitted to the IRB under expedited review due to the participant population. Participants within the current study were not reimbursed for their participation. Participation was voluntary, with discontinuation of involvement allowed during any point of interview or inclusion.

When participants emailed the researcher indicating initial interest for inclusion in the research, informed consent was reviewed with each interested participant. Informed consent was again reviewed prior to beginning the semi-structured interview, with signature documentation gained from each school psychologist prior to beginning any audio-recorded interviews. Signed consent forms are maintained per SRU regulation three years post completion of the concluded investigation.

Participant Informed Consent and Letter of Intent

Intent and purpose of the current research was disbursed using the Slippery Rock University – Informed Consent Form (Appendix A). During the participant recruitment phase of the study, the form was outlined in an informational email sent to all potential

participants and presented as Slippery Rock University – Informational Letter (Appendix B). This introductory letter, emailed to Berks County School Psychologist Association (BSPA) list-serve, formed the basis of the content sent to the pool of participants, detailing the goals of the research, as well as participant and researcher roles and responsibilities. The informed consent form was directly emailed to each participant, with each participant returning a scanned copy to the researcher via email prior to initiating interviews. Informed consent forms from each participant were confidentially stored by the researcher following SRU IRB guidelines.

Purposeful Sampling

In order to gain information-rich data, group characteristics sampling technique was employed to select participants for the current study. Using positionality as a practicing school psychologist, based within a phenomenological framework, as well as national demographic data (NASP, 2020c), the researcher designed demographic criteria that commonly characterize school psychologists across training and experience within the field of school psychology. Purposeful sampling resulted in selecting and interviewing 10 active and practicing school psychologists within Berks County, Pennsylvania.

Each participant identified for inclusion within the research accumulated a minimum of three years of experience working within public education and were each Pennsylvania Department of Education certified school psychologists. Three years of experience within public education was determined to be an appropriate minimum baseline demographic for participant inclusion in the current study. Three years of experience supported the accumulation of professional competency required to

adequately respond with informed understanding of the current research questions (NASP, 2018).

Participant Recruitment

The initial set of participants were selected through a recruitment email sent to Berks County School Psychologist Association (BSPA), which is the local professional school psychologist network within Berks County, Pennsylvania. At the time of research development and proposal, the researcher contacted the BSPA board of officers regarding the intended study. The local professional network provided the researcher with pre-approval to solicit research participants using the BSPA email list-serv upon IRB approval of the current research.

The researcher then drafted an informed consent letter and participant recruitment email, disseminated using the BSPA list-serve. The BSPA Board forwarded the drafted email to all members of the local school psychologist organization. From the recruitment email, motivated and interested BSPA participants, holding active school psychologist certification under the PA Department of Education, were directed to contact the researcher, with contact information included in the recruitment email. Additionally, the drafted informed consent email directed interested recipients to respond directly to the researcher using the Slippery Rock University email address. In their response email, participants were asked to provide stratification demographics to allow the researcher to selectively identify participants who optimize demographic categories prior to selection for inclusion in the study.

Sample Stratification

Within the BSPA network, members included school psychologists holding varying levels of certification and education (e.g., M.Ed., Ed.S., and Ed.D.). BSPA school psychologist members served the 18 school districts located in Berks County, Pennsylvania. Each district varies in demographics; there is a notable variance across: school psychologist to student ratio, geographical location, racial composition, socio-economic status of students, and roles and responsibilities of school psychologists serving each district.

As outlined in Table 2, the researcher stratified the sample of participants through selection of school psychologists serving in rural, suburban, and urban districts. School psychologists serving a range of elementary, middle, and high school students were targeted. School psychologists holding varying levels of education, training, and years of experience were also preferred. Additionally, participant volunteers were intentionally selected from those who do and do not hold national certification (Nationally Certified School Psychologist; NCSP).

Due to cross-qualifying criteria, selected participants satisfied more than one stratification demographic (e.g., male, doctoral level education, serves rural and suburban districts, middle school and elementary level students, no NCSP credential). Stratification occurred at the initial point of participation email volunteerism, with demographic questions posed to the participant before commitment to inclusion in the present research. Demographic questions used to stratify the sample selection included those cited in the Semi-Structured Interview, Question 1: Demographics (Appendix C), and outlined below.

Table 3. Stratification Demographics*Participant Sampling Stratification: Demographic Categories*

Demographic Domain	Number of Intended Participants
Level of Education:	
• M.Ed. + Certification	1
• Ed.S.	1
• E.D./Ph.D.	1
Years of Experience:	
• 3-5 years	1
• 6-10 years	1
• 11-15 years	1
• 16-20 years	1
• 21 + years	1
School District Socio-Economic Status	
Designation:	
• Title 1 / Low	1
• Middle	1
• High	1
National Certification:	
• NCSP Credential	1
School-Age Population Served:	
• Elementary	1

<ul style="list-style-type: none"> • Middle • High 	1 1 Total Stratified Sample Goal = 10 Participants
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After sending the second recruitment email in January 2023 (Table 1, step 6), BSPA members were encouraged to forward the recruitment email to their known colleagues in their respective networks of school psychologists who may not be BSPA members. Additional school psychologist participants were not required after sending the second recruitment email, as the researcher fulfilled the intended initial sample size.

Data Collection

Using the semi-structured interview questionnaire (Appendix C), with the potential for secondary, follow-up interviewing as necessary (Appendix D), the researcher conducted individual interviews with identified participants. The researcher-created interview questions were purposefully designed to gain in-depth perspectives, yielding first-hand data, with intentional focus upon detail, context, and nuance. The interviews were timed to record the length of each interview. Locations of the interviews were determined by the researcher and the participant. All participants elected to conduct the interviews via an online teleconferencing platform due to the ease and accessibility of virtual meetings. This modality of interviewing resulted in participant comfort, convenience, and was conducive to confidentiality. Interviews were

held during participant selected hours during the school work day/week, as well as during evenings, weekends, and school holidays.

The intended plan, when follow-up interviews were deemed necessary to clarify any content, patterns, or themes, was to follow the same process described above and used during the initial phase of interviewing. However, no follow-up interviews were deemed necessary by the researcher, as all participant interviews were comprehensive, and clarity of intended meaning was present.

Data Security

When selecting participants and scheduling semi-structured interviews, participant emails were printed and permanently deleted from the email server used by the researcher. Participant interview names, as well as school districts of employment, when discussing findings and research results, were not disclosed to ensure participant confidentiality. The participant informed consent forms were stored in a secure filing cabinet. Recorded interviews with transcriptions were saved under word processor data files, each encrypted and pass-word protected on an external hard-drive to ensure confidentiality. Upon interview transcription, all interview audio-recordings were deleted. Hard copy transcriptions were printed, and electronic word document files then deleted. Legal names of participants were saved solely on the original semi-structured interview form used by the researcher during the semi-structured interviews. Upon completion of the research study, the original paper files were shredded. Coded transcripts were saved in the researcher's personal dissertation research folder, secured in a locked filing cabinet in a secure location.

Data Analysis

The researcher used a mixture of guided and experiential learning to complete the process of coding for the intent of theme analysis. A dynamic approach of coding, including manual tools (e.g., colored highlighters, sticky notes, bracketing, etc.) and methodological research guidance, were employed by the current researcher, resulting in a research-based approach to analysis ensuring accurate interpretation of emergent themes. This mixed modality of coding approach is supported as by Patton (2015), Maher and colleagues (2018), and Creswell and Creswell (2018). The noted qualitative data analysis approach ensured rigorous data extrapolation and interpretation, resulting in sound interpretation of the researcher's reported findings.

Within the current study, the unit of data analysis were the individual interviews completed with each participant. Analysis across interview content was conducted to determine emerging themes within the reports provided by each participant. Upon completion of all interviews, the researcher began cyclical coding of the transcribed interviews. The grounded theory, phenomenological discovery process produced emergent themes supporting qualitative reports of the research questions previously described.

Guidance provided by Leech and Onwuebugzie (2011), as well as Patton (2015), asserts that several types of qualitative analysis approaches are likely to yield insightful findings specific to the current data set. While maintaining a purposefully reflexive positionality and scientist-practitioner intentionality, the researcher conducted mixed-modality coding of the collected interviews using the several qualitative methods:

constant comparison, classical content, and domain analysis methods. Across all three methods, content was coded by the researcher according to content, resulting in themes.

Leech and Onwuebugzie (2011) succinctly describe the three methods of qualitative analyses. Constant comparison coding used text analysis to demonstrate themes. Classical content analysis, similar to constant comparison, added a count to emergent themes. Domain analysis examined cultural meaning within the language used. Furthermore, it asserted that, “Domain analysis is based on the concept that language incorporates symbols,” (Spradley, 1979, as cited in Leech & Onwuebugzie, 2011). These qualitative methods were used to test and substantiate the asserted themes and patterns within the researcher’s reported findings, using the language provided by participants as the core pillar informing theme development (Creswell & Creswell, 2018).

Site Permission

Due to the qualitative design, site permission was not required for the current researcher when conducting semi-structured interviews with volunteer participants. Participants were provided with an overview of the study (informed consent), as well as provided with a description of the research intentions, outlining the parameters of their participation and rights under informed consent. No incentives were provided by the researcher to the participants for their voluntary inclusion in the current study. Institutional Review Board (IRB) approval was gained by the researcher from Slippery Rock University of Pennsylvania. No vulnerable populations were directly included in the current research, significantly reducing the potential for participant harm. Prior approval to solicit participants was gained from BSPA, to ensure the

proposed methodology of the current study was feasible before the researcher sought IRB; as such, the researcher ensured the feasibility of the recruitment plans without undue delay in the implementation of the intended research.

Results

Upon receiving SRU IRB research approval on December 12, 2022, the doctoral researcher emailed the initial Informational Email (Appendix B) for participant recruitment purposes to the BSPA listserv on December 14, 2022. At that time, two BSPA members responded with intent to participate in the research study. A second participant recruitment email was sent on January 3, 2023, to the BSPA listserv in an attempt to garner additional participants. The second email resulted in eight additional volunteers indicating willingness to participate in semi-structured interviews for the purpose of the research study.

Sample Demographics

All participants selected were acting School Psychologists within Berks County, Pennsylvania, and maintained Pennsylvania Department of Education School Psychologist Certification. When volunteers emailed the researcher indicating their willingness to participate, the researcher responded to each volunteer's initial email by asking for their demographic indicators as outlined in item 1 of the Semi-Structured Interview (Appendix C). Participant demographic responses were then used to determine volunteer inclusion in the present study. All initial volunteers were selected for inclusion in the research, as each perfectly matched the researcher's intended stratification needs. Due to cross-qualifying criteria, all participants satisfied several stratification demographics, outlined in Table 4 through Table 10 (cited below).

Additionally, several sub-categories emerged within stratification demographics. Several participants indicated conferred degrees and licensure outside their roles as professional school psychologist, including one participant who is a licensed clinical practitioner/therapist, one participant who is a licensed clinical psychologist, and one participant who has a Ph.D. in biomedical engineering. A few participants work in districts, serving different schools, which fall within two or more socioeconomic status levels, as well as varying geographical demographics. Several psychologists serve across elementary, middle, and high school building levels. Sample demographics, including gender, education, national certification, and years of experience were all consistent with national school psychologist demographic averages (NASP, 2020c).

Table 4. Gender

Participant Sampling Stratification: Gender

Gender	Total
Female	8
Male	2

Table 5. Level of Education

Participant Sampling Stratification: Level of Education

Level of Education	Total
M.S./M.Ed.	3
Ed.S./CAGS	4
Ed.D./Ph.D./Psy.D.	3

Other (<i>Additional Professional Credentials Outside the Field of Special Education</i>)	(3)
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Table 6. NCSP*Participant Sampling Stratification: NCSP*

NCSP – Y/N	Total
Yes	5
No	5

Table 7. Years of Experience*Participant Sampling Stratification: Years of Experience*

Years of Experience	Total
3-5	1
6-10	1
11-15	2
16-20	4
21+	2

Table 8. Demographic of Employment*Participant Sampling Stratification: Demographic of Employment (Rural, Suburban, Urban, Mix, All)*

Dem. Of Employer	Total
Rural	2
Suburban	2
Urban	2
Mixed Employer Demographic	2 (Both Rural and Suburban)
All (Serve All Community Designations)	2

Table 9. Student Population Served

Participant Sampling Stratification: Student Population Served (Elementary, Middle, High, Mix, All):

Student Pop	Total
Elementary	3
Middle	0
High	1
Mixed Student Level	2 (1 - Serves Elementary and High Schools) (1 - Serves Middle and High Schools)
All (Serve All School Levels)	4

Table 10. SES

Participant Sampling Stratification: School District Socio-Economic Status (SES)

Designation (Title 1 / Low SES, Middle SES, High SES, Mix, All)

SES of District	Total
Title 1 / Low SES	4
Middle SES	3
High SES	0
Mix	1 (Serves Low and Middle SES)
All (Serve All SES Levels)	2

Conducting Semi-Structured Interviews

All interviews were conducted from December 2022 through January 2023. All selected participants were full-time employees from 10 different districts across the 18 school districts located within Berks County, Pennsylvania. All of the 10 interviews were conducted via Zoom teleconferencing, as this was the preferred interview modality selected by all participants. Interviews ranged between 25 to 55 minutes in length. No interviewees required a follow-up semi-structured interview, as the initial data gained was deemed rich, comprehensive, and concise. Interviews were transcribed immediately upon completion of each semi-structured interview.

Data Analysis Framework

The researcher's coding analysis used a blended approach to analysis, implementing both inductive and deductive coding methodologies (Creswell & Creswell, 2018; Linneberg & Korsgaard, 2019; Saldana, 2013, p. 62). Framed within the grounded

theory methodology, inductive extrapolation resulted in person-centered codes and themes. Deductive analysis framed participant interviews within the context of the available research and the cited theories within the researcher's literature review, which guided understanding of participant input and responses across the hypotheses.

Aligned with the grounded theory approach, driving the framework of the current research, inductive coding was employed to gain first-hand input from the participants. (Linneberg & Korsgaard, 2019; Rogers, 2018). Specifically, inductive coding was applied to the data gained from the participants' own responses. This methodology of general inductive reasoning allowed the researcher to identify the "multiple meanings that are inherent in the text," (Thomas, 2003). The first-hand accounts and self-reported thoughts, feelings, and perceptions across each semi-structured interview question formed the basis of inductive data analysis.

Deductive coding was used to validate the researcher's identified codes. Linneberg and Korsgaard (2019) detail the significance of deductive coding analysis, as this approach ensures "structure and theoretical relevance." This "top-down" approach was employed by comparing the identified codes to the cited literature review (Chapter 2), which outlined the systems-level governance and myriad of influential factors school psychologists navigate within the processes of special education evaluation, determination of disability eligibility, and student labeling. Deduction in coding analysis was essential during data analysis to ensure the validity of the current findings to the available literature, especially during analysis of research question 3 (Patton, 2015).

Data Analysis Process

To begin the qualitative data analysis process, the researcher transcribed and then read each interview (Roberts & Hyatt, 2019; Saldana, 2013). As shown in Figure 1, the researcher conducted a first cycle coding review of each transcribed interview (Patton, 2015; Saldana, 2013). Each semi-structured interview question response (Appendix C), across each participant, was coded for segments, clusters of words, or sentences which elicited “summative, salient, or essence-capturing” meaning (Rogers, 2018).

Codes were bracketed and assigned values by: 1) the respective semi-structured interview question the code was identified under, and 2) the application of sequential numbers identifying unique meaning within each participant response. For example, when asked question #3 from the semi-structured interview (*Describe your experiences when evaluating students across all 13 disability categories*), a common report from participants was school psychologists’ involvement, to varying degrees, in identification of students meeting eligibility across all 13 disability categories. The resulting code identifying this summative unit of information was code “3.1: Involvement all 13 Spec Ed categories.”

A second and third cycle of reflexive manual coding was completed to refine and merge codes of similar meaning or duplication under each interview question (Patton, 2015; Rogers, 2018; Saldana, 2013). This second and third cyclical process of codifying resulted in the merger of several initial codes, significantly reducing the overall total of codes identified by the researcher. The identified codes were then grouped within

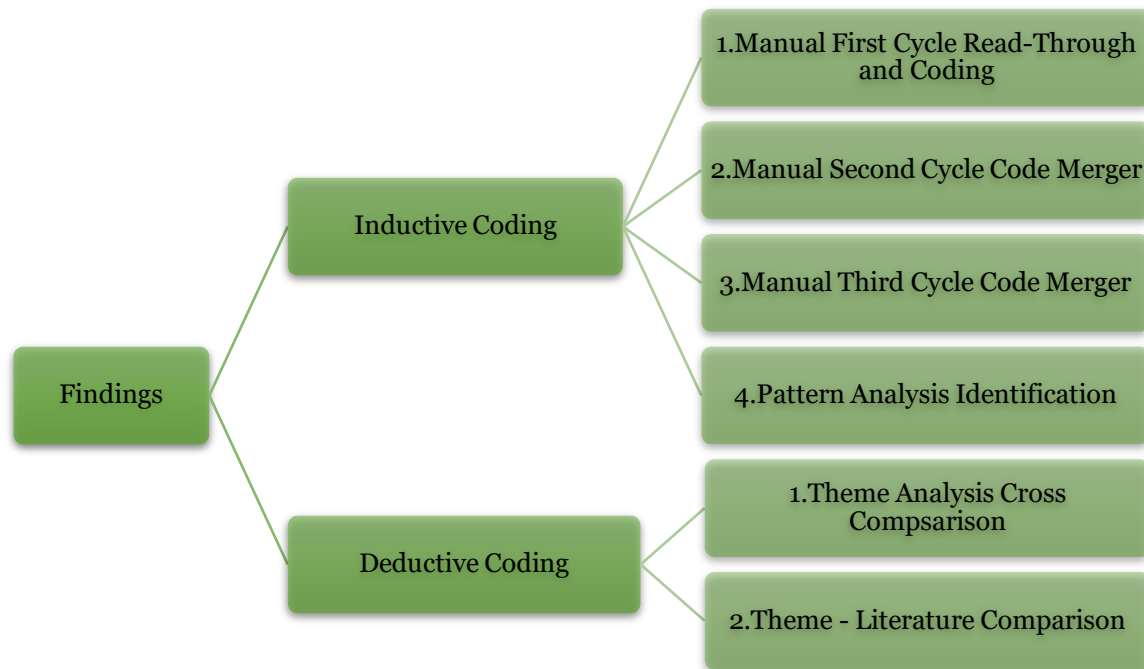
emergent patterns, yielding themes consistently present across participant reports. (Creswell & Creswell, 2018; Linneberg & Korsgaard, 2019; Saldana, 2013).

With guidance from Patton (2015), Creswell and Creswell (2018), Roberts and Hyatt (2019), and Maguire and Delahunt (2017), thematic analysis was initiated. The researcher listed each research question on a separate piece of paper, subsequently matching semi-structured interview questions to the research question. Each respective interview question was aligned to the three research questions, outlined in Appendix E.

Consistent with the phenomenological, grounded theory approach, codes of similar meaning resulted in the emergence of conceptual categories, and were endorsed across all participants (Creswell & Creswell, 2018; Saldana, 2013, p. 249). The researcher merged codes across participants and questions, resulting in the formation of consistent themes under each targeted research question. Using the stratification demographics outline in Table 1 through Table 8, the researcher compared the resulting themes for consistency and incongruity across the reports gained from each individual participant. This allowed for a secondary, top-down deductive review of the conceptualized theme results. Theoretical concepts detailed in the literature review were also applied to the resulting theme identification to ensure credibility to the resulting themes.

Figure 1. Data Extraction Process

Inductive and Deductive Analyses Using Blended Manual Coding



Future Presentation of Results

The results gained from the grounded theory research were presented to stakeholders (i.e., participants and research committee) after the culmination of the current study. Emergent themes were discussed and visually displayed, with implications for the field of school psychologist practice detailed within Chapter 4 of the present research. The researcher intends to develop professional posters, conference presentations, and professional seminars from the completion of the grounded theory, phenomenological research. The researcher will share out findings with the local professional association, as well as submit for presentation at the state and national association of school psychologists' yearly conferences.

Within the descriptive written research findings (Chapters 4 and 5), key findings gained through qualitative coding analysis were reported as emergent themes and patterns, yielded by the first-hand reports of the participants included in the study.

Tables, figures, and graphs were used to supplement written analysis and interpretation. Key quotes emphasizing person-first meaning were embedded to highlight participant thoughts, feelings, and perspectives.

Limitations

Several limitations are noted within the current study. The researcher is a practicing school psychologist. As a current scientist-practitioner within the field of education, positionality inherently inserts the potential for bias or influence within the nature of the research. Awareness of this potential for influence was key to ensuring that the structure and delivery of the semi-structured interview questions by the researcher were framed in a manner to intentionally not influence participant responses. Reducing personal influence, employing self-awareness and reflexive thinking during data analysis, were essential during coding to increase credibility of the results gained and reported.

Another limitation to the current study is the lack of triangulation available between the current interviewing collection tool and previous research. The semi-structured interview questions were developed by the researcher and based upon the factors perceived to influence school psychologist's decision-making, as well as the perceived impact of assigning disability labels to students. This lack of triangulation when formulating the interview questions resulted in no comparative theme validity analysis across studies. However, this was one of the quintessential reasons motivating the researcher to examine the current topic through a grounded theory, phenomenological approach to inquiry.

The essence of qualitative inquiry is to gain rich knowledge to inform and understand the practice of an identified group or culture. A limitation of the current research is the nature of the sample gained and the limited sample size. The sample was narrowly drawn from one county with Pennsylvania, quite small in comparison to the total population of school psychologists working with the state of Pennsylvania. The findings from the current sample of school psychologists cannot be generalized to the total population of practicing school psychologists in the state due to the limited geographical demographic within Pennsylvania. However, the researcher asserts that the current study provides an essential starting point for a line of inquiry that is presently left unstudied.

The current research aimed to begin an examination into the first-hand accounts of school psychologists who are in the trenches and experiencing duality during high-stakes decision-making and disability labeling. Although the results may not generalize beyond a limited sub-sample within the larger population pool of school psychologists, the research certainly sets a foundation for framing future research specific to this niche line of inquiry. The research results gained will, hopefully, lead to continued examination of influences present within a broader context: the field of school psychologist practice during student disability labeling and person-first perceptions of the practice.

Chapter 4

Findings

Gained through a reflexive perspective, and coding based within a phenomenological, grounded theory approach, several themes emerged from the data. In an effort to directly describe the results gained from analysis, theme description was analyzed within the context of each research question. Findings are reported in a manner to directly answer each research question. Of note, no notable differences were identified in the presentation of themes, across all research questions, when examined within the context of participant demographics. For review, the research questions qualitatively evaluated:

- 1) What are school psychologists' thoughts, feelings, and perspectives of assigning a disability label to a child?
- 2) What salient factors influence school psychologist disability identification beyond federal and state eligibility definitions/criteria?
- 3) If school psychologists experience cognitive dissonance when assigning disability labels, how is this cognitive process resolved?

Research Question 1

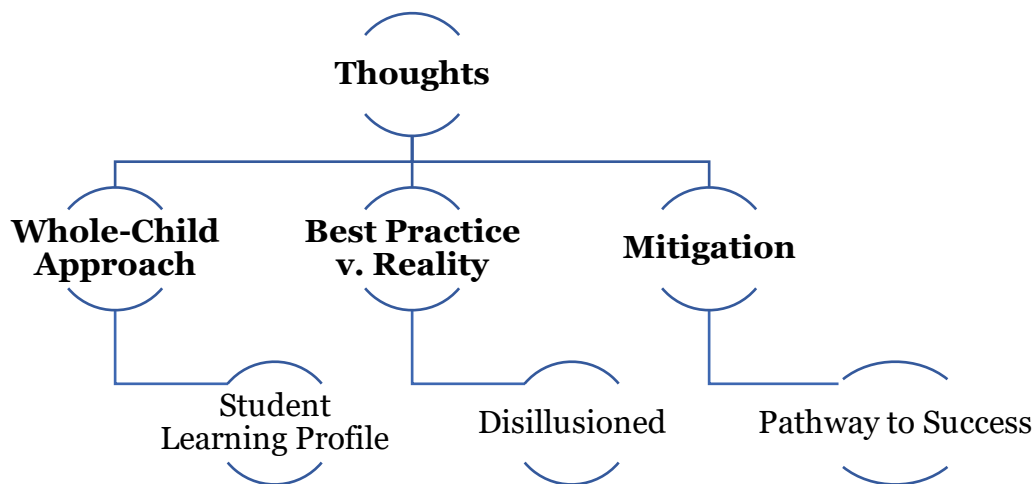
The first research question asked: *What are school psychologists' thoughts, feelings, and perspectives of assigning a disability label to a child?* Using the semi-structured interview tool, participant interview responses were coded for themes identified under each domain across thoughts, feelings, and perspectives when considering school psychologists first-hand reports of student labeling and disability identification.

Thoughts.

School psychologist participants described various thought patterns regarding the assignment of a disability label to a child. Three key themes were identified regarding the thought patterns commonly expressed by school psychologist participants. The themes were identified as: *whole-child approach*, *best practice v. reality*, and *mitigation*. Within the theme of whole-child approach, a central sub-theme was *student learning profile*. Within best practice v. reality them, one notable sub-theme was identified as *disillusioned*. A *pathway to success* was a sub-theme that emerged within the mitigation of efforts theme.

Figure 1. Thoughts

School Psychologist Thoughts Regarding Student Disability Labeling



Whole-Child Approach.

When working through the evaluation process to determine student eligibility for special education services and supports under a disability category, participants all referenced aspects to the evaluation process that represented a *whole-child approach*. This thought process to determining student need under a disability category was

integral to adequately identifying student need, and ultimately student eligibility under an identification category. As one psychologist described, “I learned to really try to get as much information from all stakeholders as possible,” with another describing her thoughts of the process of evaluation and student label assignment, “It’s so complex.” Without a whole-child thought process, participants indicated they did not believe they had the information necessary to confidently identify a label. One participant reported his thoughts on labeling when missing essential information, referencing the process as, “a coin toss.”

Beyond standardized assessment scores and scales, this whole-child approach included garnering student background information (i.e., medical history, vision and hearing screenings, absences/truancy, overall school attendance), personal demographics (i.e., culture, native language), trauma history, mental health, classroom performance, profile of achievement across grade levels, pre-post Covid performance, and stakeholder input (i.e., student perceptions, teacher feedback, parent insight). A “big picture” frame of mind was referenced by one participant as essential:

I like to back off and see what other factors are going into that and try to collect information from multiple sources and observations. That way we can get the full picture of what that student’s needs are, especially based on the past several years, I really try to focus in on mental health.

Student Learning Profile.

Within the whole-child thought process when determining student eligibility and determination of a disability label, school psychologists frequently commented on the utility of forming a *student learning profile*, including strengths and weakness. This

was a consistent thought reported, even when students were not recommended for a disability label, as noted by one psychologist:

It's always interesting to kind of figure out what a student's strengths are, and what a kid's weaknesses are. All right, even if the kid doesn't qualify for something, like how do they become more aware of those strengths and weaknesses so that they can address them as they move forward.

Best Practice v. Reality.

A consistent theme reported by the school psychologists were thoughts regarding *best practice versus the reality* of student labeling and subsequent service provision. The central thought is that the label will open the doors to services which will meet all the needs of the student, with services and supports then implemented at a rate and intensity to remediate skill deficits and close the gap of deficit academic performance. This is aligned with best practices guiding evaluation and student labeling recommendations. The realistic thought, voiced by participants, is such that special education often falls short of intended promises, noted by one participant as, “[E]ven once this kid qualifies, he probably will not really get what he should get, but he definitely won’t get it if he doesn’t qualify (which is horrible, but that’s the reality of it).”

School psychologists also reported their thoughts regarding the utilization of a label as a guiding force to student programming, rather than utilization of the evaluation/ reevaluation report to inform student individualized education plans. Furthermore, participants spoke to their thoughts regarding the influence of the label upon student placement, often to the detriment of the student. This was reported when considering student placement in learning support classrooms that are instructed at

slower and lower levels than student need. On a related note, participants referenced team placement in programs based upon labels, such as students with ED due to anxiety, but team placement in more restrictive ED classrooms that are too restrictive for the student's actual need (i.e., itinerant level of support needed versus placement in a supplemental level of support program). Participants indicated their thoughts of how the label is used long-term. The label is thought to be viewed as an unintentional stereotype informing programming years after student disability identification, leading to negative post-secondary outcomes:

They're anxious. You know the anxiety falls under ED, but I'm much more included to maybe stretch and say their anxiety is impacting them more under OHI because ... if I give a kid an ED label, and they want to go into the military, they're going to have a hell of a time going into the military.

Disillusioned.

School psychologists are *disillusioned* with the thought of labeling students to secure special education services to meet student needs. This was consistently voiced as a thought related to the lack of student service provision even with the application of a label, and then the resulting minimal student growth leading to exiting from special education. As one participant described her disillusioned thoughts regarding labeling:

I sort of feel like if we didn't have to give a label, I don't think parents would mind. They don't really care about the label. It's not about the label for most folks. There's a few that it'll be about the label, but the majority of parents, I think, would be perfectly happy for their kids to get whatever they need to learn. They don't care how they get there.

Another psychologist interestingly questioned the process of labeling for service provision and the long-term impact of such services to affect academic growth. Specifically, the presumed thought is such that the label results in service provision that will meet student needs and close the identified gaps of performance so the child is on-grade level across all domains of expected performance. However, as one psychologist openly surmised:

We don't see the benefits right away, but I am part of the process to identify needs and get kids what they need. However, I feel uncomfortable wondering how our progress monitoring is going to prove they need exited from special education because special education is flawed... How many kids are actually exited from special education? I would like to know that.

Mitigation.

School psychologists reported an awareness of the negative impact a label can impart upon a student, including impacts that extend to peers, parents, and teachers. As such, participants discussed several key thoughts they have regarding mitigation of the impact of assigning disability labels. Eight out of 10 participants indicated that when a student demonstrated needs qualifying for special education, the selection of a label was not, as one participant stated, "something to get hung-up on." In other words, the concise application of a label, per regulations, was mitigated to reduce stigma and increase acceptability amongst stakeholders. Furthermore, school psychologists often mitigate the impact of a label by purposefully selecting certain labels over other labels due to associated negative stigma surrounding certain labels, specifically the label of ED, with another psychologist openly reporting:

What are the emotional aspects for this kid? Like, the ED label really weighs on me. I would say that I am much more inclined to go OHI versus ED, and I know there's other people that are like, '*No, they're ED.*'

Participants often commented about their thoughts regarding decisive delivery of the “news” of a label to parents and students, with attempts to “soften the blow.” One participant described her thoughts on mitigating the initial delivery of the label impact, reporting, “I always try to keep it more or less focused on what the child’s needs are and how this will help the child be most successful.”

Participants discussed their efforts to use their connections to change the thoughts of their colleagues to shift perspectives of students with disabilities, and simultaneously what teachers are willing to do to support students (e.g., delivery of interventions in the general education classroom). One psychologist indicated her tendency to shift teacher thoughts and practices by “cashing in on interpersonal capital and connections.”

Pathway to Success.

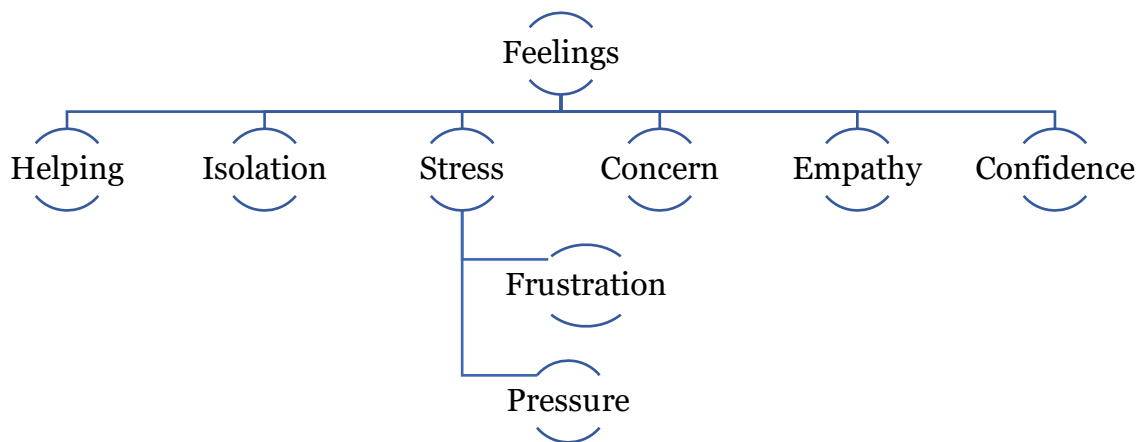
A consistent sub-theme within mitigation efforts is the thought that a label opens doors to a pathway of success by garnering the necessary supports to implement and lead to student growth. Participants commonly reported that the label is essential to gaining related services and learning support that is specialized to student need, succinctly described by one participant. When referencing the thought that the label is a pathway to success, she commented that in order, “to get the services they need, to the frequency and the intensity, they need a disability label.”

Feelings.

School psychologists consistently reported similar feelings regarding the assignment of disability labels to students. Six key *feelings* themes were consistently expressed, including: *helping*, *isolation*, *stress*, *concern*, *empathy*, and *confidence*. Within the feeling of *stress*, *frustration* and *pressure* were endorsed sub-themes.

Figure 2. Feelings

School Psychologist Feelings Related to Student Disability Labeling

***Helping.***

The primary feeling most commonly reported first was the emphasis of *helping* students, families, teachers, and administrators through the process of special education evaluation to ultimately identify and subsequently develop programming to meet the immediate needs of the students with educational challenges. School psychologists view their role as one of a helper, trained to identify student strengths, needs, and align services and supports to the areas of academic need. Their role is directly tied to ensuring students receive what is identified as a significant need requiring additional

support, with one participant stating, “I often just want to help them and be someone that they trust.” Another participant remarked:

I always look forward to working with the students and getting to know them. And, you know, I feel like I’m kind of like a detective figuring out, you know, what’s going on with this kid. What can we do to help them to be more successful, whether they qualify or don’t qualify?

Another participant described her helping role, stating:

There’s definitely the feeling that I am making a difference. We are helping teams (parents, students, teachers) understand the student as a learner and how their barriers to learning are impacting them. We don’t see the benefits right away, but I am part of the process to identify needs and get kids what they need.

And, another spoke to long-term benefits as a helper:

So I think long-term. Particularly for kids with intellectual disabilities, is access to waiver funding and adult services. They will not have access to it if they don’t have a label. That’s one of the things where it’s so important. Without that label, those students will not get access to adult services.

Isolation.

The second feeling school psychologists reported experiencing was *isolation*. Participants commonly referenced this feeling, emphasizing their experience as though they are working on an island. Although special education evaluations were often referenced by the school psychologists as a Multi-disciplinary Team (MDT) process, school psychologists consistently remarked about the feeling of singularity in the final identification determination. The label determination is by law regarded as a team

decision (i.e., MDT), but the lived reality of the school psychologists is they often gather the data and make identification recommendations to the team. The process feels isolating, as participants reported that MDTs look to the school psychologist for a label to inform programming, resulting in a gatekeeper mentality:

We often talk about the team, but the reality is the team is us. The school psychologist is supposed to make a decision, and then everyone else just does what we tell them to do. So I think it is often like, *‘Just tell us what to do, and we’ll do it.*

Another psychologist described her perception of isolation as, “I’m pretty much like the architect of the whole thing. In my district, I really do the whole thing.”

Stress.

A concerning report from school psychologist is the overwhelming *stress* they report when assigning a disability label. As one participant noted, this stress is a result of several factors during the process of identification, before the actual final label identification or recommendation. Stress is reported when there is inconsistency in the data reported:

The times where there is inconsistencies in the information that we gather, or you know we’re seeing something different than what the parents are seeing, or certain teachers see different things, or they [teachers] think something different, but that’s all different than from what we’re finding with the scores that we get. You know, those situations can definitely be stressful.

Stress is also endorsed during the delivery of the label identification to team members. School psychologist report a consistent awareness of what team members

will think about a student qualifying or not qualifying for special education, the disability identified as the label qualifying for services, and whether stakeholders will agree. Of most commonly cited concern was parent response to labeling. One school psychologist spoke to the stress when delivering label identification recommendations to parents:

So, knowing that I have to share that information with the family is difficult, as well. And then there's some of the students, like students who we know are functioning in the intellectually disabled range, and maybe I don't know where the parents are. If they kind of thought that, or if they're going to be totally surprised ... I feel I get stressed out about having to share that information.

Another school psychologist described the stress experienced when delivering the news to a high schooler identified under emotional disturbance (ED), describing the stress involved when trying to mitigate impact of the ED label:

With the high school students, it [labeling] doesn't feel good at all, especially when I'm doing initial evaluations because the kids at that age, it's like such a stigma on them. They don't, most of them, want it. They feel bad that they have it, but they need it. ... It's kind of like the kids who get retained, how they tell you year after year, *'I'm supposed to be in the next grade.'* ... I think it means they feel like they're stupid. ... I just think of my former student, and how she would cry because she didn't want an IEP. She wasn't the only student who has felt that way, but what they need and what they want are different.

Frustrated.

An identified stress subtheme are school psychologists' reports of feeling *frustrated* with the process of eligibility. The process of labeling is frustrating, marked by one participant's comment, "I am usually looking forward to meeting the student. But then, once I get all the information, sometimes it's like, '*Okay. Now I got to figure out what's going on.*'" The process of identification evokes frustration related to prior interventions, as well, with a participant keenly referencing prior intervention history, or lack thereof:

I think, if you're not using a good pre-referral system, and if your using a tiered intervention system and you're not doing it well, it's very hard to track that and know what exactly has been done. If you don't really know all of those pieces, it's hard to even factor that into your decision.

Pressure

A second subtheme is the feeling of *pressure* from stakeholders to either qualify a child or to not qualify a child, based upon the positionality of the stakeholder asserting the pressure. One parent pressure reported by a participant was the feeling that, "Many parents have a clear agenda that they're pretty up front about; they want that identification so they can get benefits." Another participant cited parent pressures looking for the answer to *why* their child is struggling in school, cited by one psychologist when referencing a parent as, "*Something is wrong here. I don't know what's going on with my child*". Teachers exert pressures upon school psychologists to apply labels as a means to change placement or programming, resulting in feelings of frustration discussed by a seasoned psychologist:

I feel as students get older, there's less willingness to do things outside the box.

And you know, if students don't conform to the system, "*This is what we do for kids, and if you don't learn that way, the too bad,*" unless you have an IEP.

Another school psychologist voiced her frustration with teachers regarding delivery of instruction upon the application of a label:

The teacher that knows the child the best, the one that's the best person to do interventions with that child, their regular education teachers, is pawning them off on somebody else to do support because they don't want to deal with it.

School psychologists experience frustration-related stress from pressure exerted by administrators, who respectively experience their own stressors, which may result in a trickle-down effect to school psychologists. One such example was provided by a participant describing a new student at a middle level SES school district:

Now he doesn't fit in, and he's used to dealing with kids who bring knives and guns in to the school, gang stuff. He got into trouble [at previous school] and now he's coming here, and it's like, "*We don't do that here.*" So like, now our administration just wants him out. ... I got pressure from that supervisor to change disabilities from ID to something else.

School psychologists experience pressure from administration when determining label eligibility, with pressure to select certain categories based upon desired programming options, reported by one participant:

... I did get the Spec Ed director involved. He was like, '*Well, I don't ever ask this, but if you could avoid that Autism label because they don't do that Autism label where he's at.*'"

Lawyer or advocate involvement in evaluations when determining eligibility and label identification is stressful, exerting pressure on school psychologists. One school psychologist described the influence of outside entity impact when describing a disability label recommendation citing, “It would have played out differently if there were no advocate.”

Concern.

The fourth feeling theme identified was school psychologists’ *concern* with the application of a disability label. Concerns reported by participants related to the changed expectations of the student from parents, teachers, and students themselves due to the application of the label. Concern also centered around labeling to garner services. The capacity of special education services and supports is lacking in efficacy to meet the identified needs of students qualifying for services while serving as, one psychologist described, “a dumping ground.”

Related to general concern is the hesitation to label due to concern regarding an awareness of the long-term impact of the label assignment to the identity development of the child. This was commonly referenced by the participants, with one school psychologist explicitly remarking, “I’ve had conversations with parents who had disabilities, saying, ‘*I had Special Ed growing up,*’ so they’re telling me they don’t want *this* for their kid.”

Concern was indicated related to the lowered or altered expectations of the child’s performance from teachers and parents. As one participant stated, “It lowers everybody’s expectations,” continuing later to describe concern with the application of labels and changed expectations:

It clouds the student's mind and the whole situation, as saying, *'Yes, there's something wrong with this kid. That's why they do this.'* And then it's okay, and my expectations for that child have been lowered. There's definitely some where it's legitimate, but there's definitely many that it's not legitimate. I think if we just even say, *'Yeah, they have a disability, but we need to keep pushing them to do better and expect them to do better.'* But, if they're grouped around kids where the instruction is lowered? It's a Catch 22.

Another psychologist emphasized concern with the changed expectations of the application of the label, and reduced teacher expectations:

There are cases where you know a child gets assigned a disability label, and then they meet those expectations, and so maybe standards aren't set as high for the child, or it can be used as an excuse for the child. *'Well, they have this diagnosis so no wonder they do that.'*

Additionally, concern was endorsed regarding the impact of the label and resulting student placement. Participants spoke to the impact of labels determining placement within special education programs. The resulting effect posited by school psychologists is student placement in programs that may ultimately not be well-suited to student needs, but match the label, with one psychologist asking:

What are other teams in the future going to think? If someone picks up a report and sees ED, are they going to program based upon that label, or are they going to think long and hard about appropriate recommendations rather than the label?

Misunderstanding regarding the label itself was a notable concern. This misunderstanding resides within parents, teachers, administrators, and student perceptions, as they often do not understand what the label actually means. One psychologist spoke to concern from school staff regarding what constitutes eligibility or related criteria under state and federal regulations, commenting on referrals, “They’re like, oh, we have this eval for you. They’re clearly ED, and it’s like they’re not clearly ED.” Another similar example of concern related to teacher inconsistencies in reports. The school psychologist remarked, “Teachers are like, *‘Oh yeah, this kid definitely needs to qualify.’* And then you send out teacher rating scales and stuff, and you get ... well, nobody said they had a problem.”

The frustration of the process, and misunderstanding of a label, results in the potential of imparting a negative, life-long impact upon the student, keenly reported by one school psychologist:

They don’t understand what the process is, what the label means. And, you know, I’ll talk to adults that are still confused about their IEP from school. They’ll say, *‘I know that I’m stupid,’* and I’m like, *‘Well, that’s not what that means ... You know it actually means you’re not stupid. This disability makes it more difficult for you to do these things.’* I think sometimes that kind of gets lost on students and families.

Another participant spoke to concern for student’s sense of self, reporting, “They feel like they’re stupid. They’re not. They’re not less intelligent or less worthy. Like, there’s nothing wrong with them.”

Empathy.

School psychologists overwhelmingly reported a sense of *empathy* (fifth identified feeling theme), for both the students receiving the label, as well as the parents of the children identified for special education. School psychologists described their efforts to understand the perspective of the student receiving the label. As one psychologist explained, “I want kids to succeed, but maybe not have that bruise on their sense of self. I know, like when I was in high school, I don’t think I would have wanted it.” School psychologists reported compassion for parents, especially when hearing a disability label for the first time and trying to understand all of the information that is provided within an evaluation to determine disability labeling. Once psychologist empathized, and recalled:

It can be somewhat shocking for parents to see the numerical scores on the Evaluation reports. I say this as a parent that felt that way. It was just a speech eval, but seeing low standard scores for your child, it is a hard pill to swallow.

There’s definitely like an emotional reaction, and that was a very minor thing.

The same participant went on to expand the essence of a school psychologist’s empathy:

There’s a short-term grieving process for families, particularly with intellectual disability or Autism. Maybe with some other labels, too, but particularly with low-incidence labels. In the short-term there might be an immediate reaction, but then over-time it like of like ebbs and flows, *‘What is my child’s disability mean for their life? What does it mean for the likelihood that they’re going to get married? Have children? Be employable? Able to live independently?’*

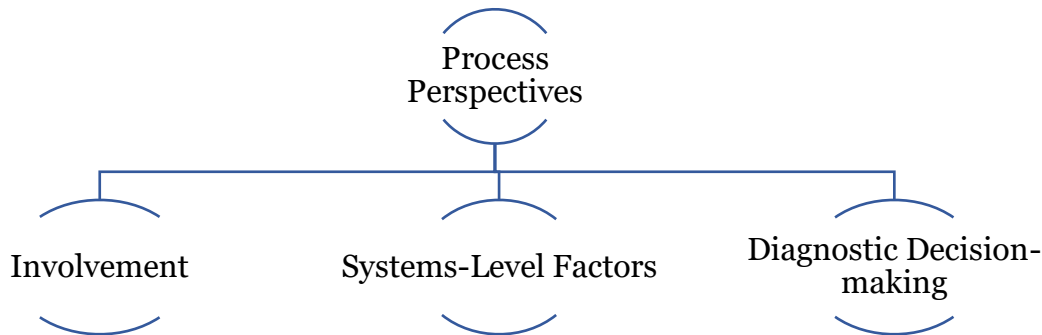
Confidence.

Lastly, *confidence* was a consistent theme reported across school psychologists. As school psychologists progress through their career, they described increased confidence in their willingness to be bold in their recommendations to teams, including identification of labels *or* recommending results which do not indicate a disability label. This was illustrated by one psychologist stating, “I feel a bit more comfortable with, you know, telling people how I feel, and it was probably a little different for me, you know, in my first couple of years of work.” Confidence was also a reported product of data-collection and interpretation, with one psychologist citing, “I’m usually confident in all the data that I’ve gathered. But, let’s pretend someone’s disagreeing with you. I’m not nervous or scared. Nothing like that because I’m confident in the data.” Another psychologist provided the following when describing her feelings about recommending disability labels:

So because of my experience at this point, I’ve been able to start to put aside what I’m worried about other people thinking, or what’s going to happen. I don’t know if that’s good or bad, but I just kind of feel like it’s my job. I do it, and I just put it out there.

Process Perspectives.

School psychologist participants consistently reported consistently in their viewpoint perspectives of the process of assigning disability labels to students. Several consistencies emerged, with the following three themes identified under the umbrella of process perspectives of disability labeling, including: *involvement*, *systems-level factors*, and *diagnostic decision-making*.

Figure 3. Process Perspectives.*School Psychologist Perspectives of the Student Disability Labeling Process****Involvement.***

School psychologist participants reported their *involvement*, or lack thereof, in the pre-referral process of student referral for a special education Evaluation. Five out of 10 school psychologists reported no involvement in student programming or intervention prior to receiving a referral packet requesting a special education evaluation. Amongst these participants, they consistently remarked on their desire to be involved in the student's educational team prior to receiving the evaluation request. Specific reasons for this perspective included a need to help teams design pre-referral interventions, with one participant asking, "If there hasn't been a lot of intervention in place, how do I help the team determine if there is truly a disability?"

School psychologists also referenced the need to be involved pre-referral for evaluation in order to guide teams on "what" exactly constitutes a warranted or substantial referral for an evaluation, as well as the need help direct the collection of information necessary for an evaluation. School psychologist pre-referral involvement was cited as necessary to support students prior to falling below grade-level

expectations, commonly referenced by participants as the *wait to fail model*. One participant described her lack of pre-referral involvement, citing her difficulty in deciphering information when not involved prior to the request to evaluate:

Generally, you're trying to see what they provided, and then figure out how you can get what more you need to decide. You know, whether or not basically if the child has been given the appropriate education to begin with.

When involved in the pre-referral process, reported by participants as involvement in determining student skill levels and matching interventions to areas of deficit or team-based meetings to review student performance, school psychologists' perspectives of the process increased positive outcomes and feelings specifically regarding the application of the label or conversely the determination that a child does not qualify upon completion of the evaluation. Involvement in pre-referral evaluations increased the confidence of the label and the perspective of applying labels. A prime example of pre-referral involvement was detailed by one psychologist, citing:

At my placement, I am involved beginning to end, starting with the student referral to the student concern meeting. All members meet and review intervention data, and I sum up what is recommended, as well as the options. Moving forward with evaluation, I gather data, consult with the team, complete relevant testing, and student eligibility is made. I attend IEP meetings, and then help the IEP team to develop what needs to be done.

Systems-Level Factors.

Perspective of the process of student labeling is influenced by *district systems-level factors*. Participants referenced differences in the services provided to students

upon disability labeling dependent upon the school within a district, as well as differences in service provision and student expectations across differing districts within Berks County.

I have two buildings in my district, one of which is lower SES, not horribly low, but overall much higher free lunch. That kind of thing. Then I have another building that's a bit more average. I get more referrals from the above average building than I do from the other building.

Another commonly cited systems-level factor impacting the perception of the application of a label is district level systematic intervention, such as MTSS, RTII, and PBIS. Participants commonly remarked on the impact of intervention and their perception of applying student disability labels to qualify for special education. The ability to draw upon systems-level intervention data to examine student growth within the area of referral (i.e., oral reading fluency), or lack there-of, impacted school psychologist's perspective of the application of disability labels to students in their respective districts, with one psychologist describing her perspective as:

The history of intervention is really important to me because we are supposed to do something before the evaluation, and if we haven't, that's a problem for me. I'm trying to focus in on that and help teams to develop these interventions.

District demographics were commonly cited by participants when describing their perspective of labeling students. Psychologists described the impact of common core curriculum, district socio-economic status, and school community culture. A commonly cited systems-level factor impacting perspectives was district socio-economic status, as lack of resources could more accurately account more for student performance

than the assignment of a label thought to explain performance. Within districts, common core curriculum deficits, leading to significant skill deficits across entire school buildings, changed the perspective of applying disability labels, as the label was reported to inaccurately place the deficit within the child rather than reflecting the true issue:

For example, let's say in the beginning of the year you've got like a little more than half of your kids on benchmark for reading, and after 3 months of instruction you repeat your benchmark assessments. Now, you've got less than half there, less than 50% of kids on benchmark. That's a problem in the core curriculum.

Lastly, school community culture, was cited as a perspective that impacted student identification. Some school communities emphasize the need to intervene and remediate skill deficits while other district school cultures have no effective intervention process prior to evaluation, and disability labels are then normalized within the school community culture. Feeling disillusioned, one psychologist commented on the current state of intervention in her district, "I think everybody says they do MTSS or RTII and we give kids what they need, but ultimately they are not." Within context of her interview, the status of intervention within the process of identification changed her perspective of labeling.

Diagnostic Decision-Making.

Diagnostic decision-making was referenced by all participants as influencing perspectives of the process of student label. Overwhelmingly, school psychologists do due diligence to gather as much information as possible to inform label recommendations. When considering labeling, diagnostic decision-making was a

perspective that was endorsed by all. Specifically, when data was confirmatory, diagnostic decision-making was cited within identification processes. School psychologists referenced diagnostic decision as impacting their confidence in final decisions to identify a disability. When data was questionable in nature, or data was scattered and offered limited consistency, participants reduced citation of data-based decision-making in their reported perspectives of student labeling. As one participant described when referencing information gained from others on an educational team in light of data collected (e.g., benchmarking, progress monitoring, classroom examples, teacher reported student performance), “Nobody knows how to drill down and figure out the issue, and so they’re not doing the right interventions.”

Related to the perspective of labeling when approached from a data-based decision perspective, when data is inconsistent or lacking, *what* participants reported under their perspectives of labeling was just as informative as *what was not* reported by participants when discussing their perspectives. When lacking confirmatory data, or data that was not substantiated as valid, school psychologists relied less upon perspectives of diagnostic decision-making to inform label identification. Rather, they relied more upon the previously discussed and cited feeling and thoughts themes to inform labeling, endorsed by the collective narrative responses from the included participants.

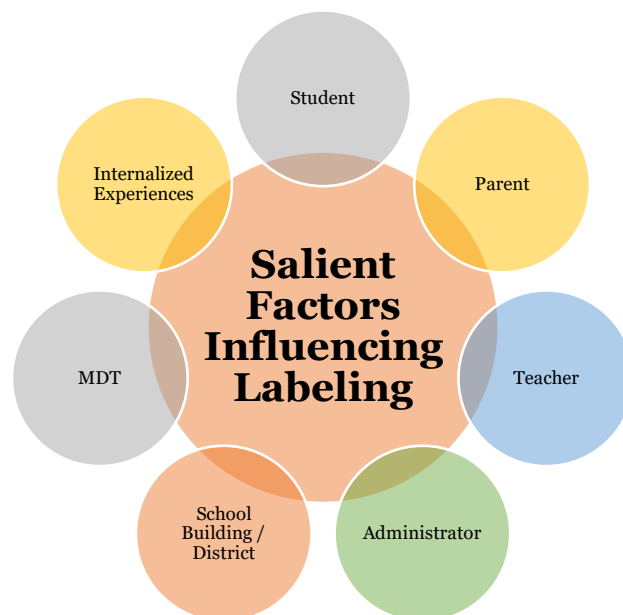
Research Question 2

The second research question targeted: *What salient factors influence school psychologist disability identification beyond federal and state eligibility definitions/criteria?* Using the semi-structured interview tool, across participant

interview responses, several themes were identified related to factors beyond federal and state eligibility criteria which influence school psychologist decision-making when determining recommendations for disability identification. The emergent themes identified included factors related to the: *student, parent, teacher, administrator, school building/ district, multidisciplinary team, and school psychologists' internalized experiences.*

Figure 4. Other Salient Factors Identified

School Psychologists' Reported Salient Factors When Determining Label Identification Beyond Federal and State Regulations



Student.

When participants were asked to describe factors which influence disability identification, a commonality in responses were factors specific to the student. School psychologists consider a vast number of factors related to the whole-child including medical history, school screening results, attendance, discipline history, history of

drug/alcohol use, home life, trauma history, transiency, fit to school culture, virtual schooling history (i.e., cyber or charter school enrollment), history of prior special education services, current and past grades, past history of interventions, and the impact of the Covid pandemic. As one participant remarked, “There’s so many [student] factors you have to weed through.” School psychologists also consider the impact of the label upon the child due to the stigmatization associated with the application of a disability label, characterized by participants questioning *how* the label will impact the student (*discussed in further detail under the theme school psychologists’ internalized experiences.*)

Parent.

When considering the application of a disability label, school psychologists always commented on parent perceptions and parental pressures. School psychologists are keenly aware of *what* a parent is hoping for when outcomes of an evaluation are completed, and this awareness is considered when determining disability label identification and special education qualification. When parents include lawyers and advocates within the educational team, this is a factor that considerably weighs upon school psychologists’ decision-making. Lastly, when parents provide educational teams with outside clinical evaluations which identify mental health diagnoses, this is a factor considered by school psychologists when making eligibility determination, as school psychologists reported pressure to conform findings and label identification to outside evaluations. As one participant illustrated:

The outside evaluation changed the course of the evaluation. It was hard though because there were criteria met under ED. The team felt ED was more

appropriate, but there was an advocate involved and an outside eval identifying Autism. Autism was more accepted by the parent and the advocate. We wondered, *'Do we need to make it more contentious that it already is?'* Again, it would have played out differently if there were no advocate or outside Autism diagnosis.

Teacher.

When determining if a student is eligible for special education, school psychologists frequently discussed their consideration of the quality of instruction delivered within the general education classroom as it relates to student achievement levels. In other words, school psychologists consider the quality of instruction as it pertains to student achievement and progress within the core curriculum and the reliability of the referral for a special education evaluation. School psychologists are hesitant to identify a disability label if they question the basis of the quality of instruction in the classroom that is leading to referral for a special education evaluation and expected label, as one participant described, "I worry about the methodologies that often are used."

Another teacher factor commonly reported by participants was the perceived validity of the referrals for a special education evaluation. School psychologists' perceptions were that many referrals are made to special education for an evaluation because teachers don't know how else to help a student, whether it's due to a lack of resources or a lack of intervention training. Teachers are also unaware of what can be provided upon assignment of a disability label, and misunderstand the nature and role of special education programming. School psychologist perceptions of teacher referrals

was illustrated, by one participant, as teachers believing a label results in a, “cure-all for student problems.” Nonetheless, school psychologists indicated that the nature of teacher referrals, made by specific teachers, for the intent of completion of an evaluation, was a factor considered during the process of disability labeling.

Administrator.

School psychologists reported the impact of administration when determining disability label identification. Many school psychologists indicated that their school administrators, including building principals and special education directors, were supportive of their conclusions, and as such, reported feeling confidence when selecting and applying label identifications. Half of the participants noted school administrator positionality as a reported influence when assigning or not assigning certain labels. School psychologists noted pressure to not identify students under certain categories, while assigning administrator-preferred alternative labels. This was reported as a influencing factor, as school psychologists were assigning preferred labels to accommodate administrators seeking to strategically place students in certain programs, often out of district. One such example is from a participant detailing administrator influence related to preferred label identification, “And you know, when a director comes in and they say you can’t classify kids with ADHD. You know I had an issue with a supervisor about that once.”

School Building/District.

When determining appropriateness of disability identification and qualification for special education for a student, participants described school and district factors which played a role when determining disability labels. Participants referenced district

level factors, such as: the quality of the common core instruction, MTSS and RTII implementation, PBSP programming, district politics, school-board positionality, demographic qualifiers related to socio-economic status, and district level response to remedial learning due to the COVID pandemic. One participant commented on such considerations of district factors, stating, “I just think the levels and the populations in the particular district also influences who would be referred for an evaluation. If they would go to a different district though, maybe they either would be referred, or not.”

Consistently reported by all psychologists was consideration of the services that would be provided upon identification. In other words, a factor in decision-making was consideration of what services, supports, and intervention that would be provided dependent upon the student’s school level (i.e., elementary school versus high school), and building level comparison within district (i.e., elementary school ‘A’ versus elementary school ‘B’ within the same district). Differences in services pre- and post-label identification was a considered factor in light of programming availability. Psychologist awareness of the availability of services, supports, and interventions upon disability labeling versus without disability labeling influenced decision-making dependent upon the district and school was described by one psychologist:

I definitely have different approaches depending on the district. Like I’ll approach a kid in *this* district differently than I’ll approach a kid in *that* district, their needs through a different lens. If there’s a kid that’s like on the fence at a school where you know that they are going to receive true, like tiered interventions and things like that, that will continue to support them, I don’t find myself frantically digging. But then, in a different district I am digging. Like, all

right man. I really feel like, even though this kid is not quite there, if we could find a way to get him there, that would really be good for this kid.

Multidisciplinary Team.

When working through an evaluation process, leading to the end result of determination of the appropriateness of a disability label, participants often referenced the multidisciplinary team (MDT) as a factor in identification. School psychologists consider the viewpoints of the stakeholders on the MDT when determining a student's identification, including the quality of input provided by team members, the quality and intensity of intervention data gained pre-referral for evaluation, specific team member expectations of disability identification outcomes, and the utility of the team problem-solving approach.

School psychologists who reported feeling as though they worked in isolation through the evaluation process did not report the MDT as an influencing factor; however, school psychologists who reported working in districts with moderate to well-developed MDTs indicated this was a significant factor considered during student identification. School psychologists often indicated their consideration of how the information would be received by colleagues. This influencing factor was related to the desire to appease colleagues and other team members, described by one participant as, "I worry about disappointing others."

School Psychologists' Internalized Experiences.

School psychologists, as one participant described, are individuals with their own experiences, thoughts, and impressions that need to be acknowledge when identifying a disability label:

So I am a human being, and I have my own personal experiences in life, and with students that I've working with my career that probably biases some of how I approach or experience things, and sort of thinking ahead to where this is probably going to go. How I approach them is to always listen to the concerns and the referral questions, and try to back up and see the big picture. Get the whole sense.

As such, every participant described an awareness of their own personal perceptions and feelings during an evaluation, paired with the purposeful intent to act in an unbiased manner when conducting student evaluations to determine disability identification. Whether it is at the forefront of their thoughts or tucked away and selectively unattended to, every school psychologist indicated an awareness of the significance of their role when applying a disability label to a child.

School psychologists reported attempts to do their best to try to not assign a disability label due to awareness of the impact of the label upon the development of the child. Mitigation attempts were a commonly referenced factor, such that participants described efforts to gain student supports and general education interventions without moving to the level of special education identification labeling. As one psychologist described her attempts to get support in place to reduce the likelihood of a referral for an evaluation to gain a label, "I do pretty good with finessing the system in a way to help the kid and make people like, you know, try something different, but it's hard. I try and mitigate the impact of that label." Another school psychologist described her efforts, stating, "I can try to get them help without the label, because I know what the label means for them." Another described his efforts to mitigate a label pre-referral:

I want intervention. We need interventions. We need some kind, even if it's on the parent, some kind of something. Somebody doing something. Please help me here. Is there a tutor involved after school? Is there someone sitting down with the kid in school and helping to get organized?

When the application of a label was necessary, participants actively described their intent to be selective with label application due to the perceptions of the label by others, including the student, parents, and teachers. One participant boldly stated, "I hate the term Emotional Disturbance! It's so outdated." Another participant described her selectively with label application, citing, "But it's heavy, Emotional Disturbance, like there's something wrong with them that it's a disturbance. That's the label that is like the hardest for me to apply. I probably under apply it as a result." She went on to say, "I've never had a family fight for ED because I think it does carry a weight that the other categories don't."

Psychologists reported an internalized awareness to do justice for the child (i.e., implement interventions, convince teachers to 'do more') whilst managing and navigating the vast intricacies of the evaluation process described thus far. Participants often remarked about their consideration of the life-long impact of the label upon the student coupled with the need to help the child in the present, described by one school psychologist as:

So I see it both positively like it could be a start to, you know, learning skills to be empowered, or it could also be that we're giving you a label, and now you have a reason to, you know, sort of be taken care of.

Another psychologist described her internalized thought processes when considering label identification and the invisible adjoining considerations factored into decision-making:

Anytime I am doing it I struggle because I know this is changing a child's life. I think that there are times where it's definitely clear with the data that we have that the child meets the criteria. And so, even though I know it's a significant change in their life, I know that's what they need in order to function in our systems, but there are definitely times where it is very difficult to make a determination. ... What is the benefit and cost to the student qualifying or not?

Research Question 3

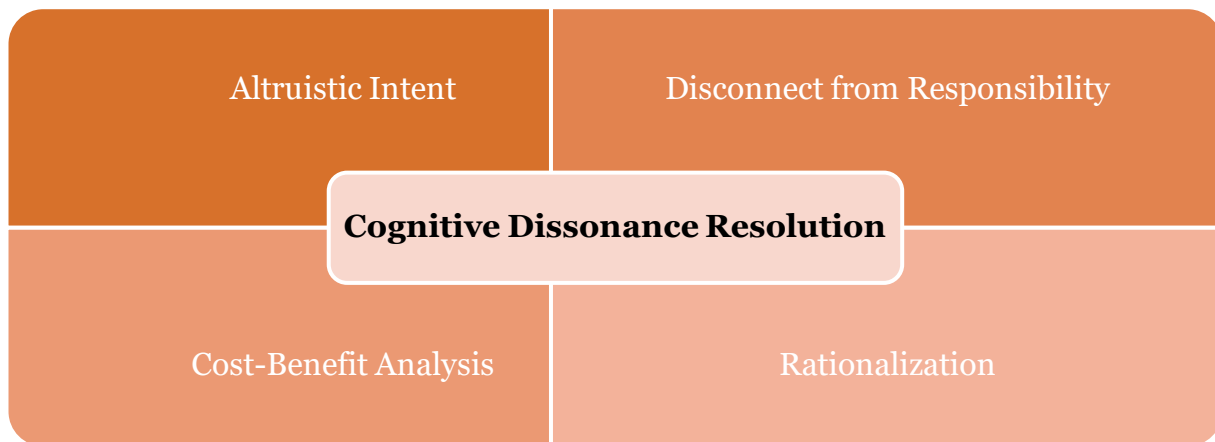
The last research question examined cognitive dissonance, specifically asking: *If school psychologists experience cognitive dissonance when assigning disability labels, how is this cognitive process resolved?* Of all three research questions, this question was primarily analyzed from a macro-view across participant dialogue. One participant cited her direct experiential awareness of cognitive dissonance when assigning disability labels to students. Another participant directly stated he did not experience cognitive dissonance within the context of applying disability labels to students, remarking, "It's my job." A holistic analysis of each individual interview, cross-compared across all participant interviews, resulted in themes yielding answers to the third research question.

In short, whether cognizant or aware of the dissonant phenomenon, all participants experienced varying degrees of cognitive dissonance when assigning disability labels, including the participant who initially explicitly stated he did not.

Differences in cognitive dissonance resolution were revealed in the processes participants used to navigate the internalized experience of dissonant thoughts and feelings while managing the salient influencing factors. Themes central to research question three emerged, including the following four core themes: *altruistic intent*, *disconnect from responsibility*, *cost-benefit analysis*, and *rationalization*.

Figure 5. Cognitive Dissonance Resolution

School Psychologists' Internalized Processes to Resolve Cognitive Dissonance



Altruistic Intent.

School psychologist participants all reported in their interviews an internalized desire to help students, deemed *altruistic intent*. The altruistic intent manifested in participant interviews as the drive to help students gain whatever supports necessary to remediate skill deficits and make educational gains. This internalized desire to “do good” was referenced within the context of disability identification and labeling. The feeling of doing good for a student counteracted the application of the labels. School psychologists reported they are helping to meet the needs of students while offering unconditional supports based on what a child was identified as requiring. As

summarized by one psychologist, “We’re here as human service providers. In one way or another we’re trying to help kids any way we can.”

Altruistic intent manifested in participant interviews, as well, while discussing their desire to support educational teams and parents, described by one participant, “I mean it’s always kind of a pleasure, you know, to sit down with the parents and say they qualify. We did all this stuff and the parents have good feelings about that.” School psychologists viewed it as their role to help parents navigate special education and secure additional help for their children.

School psychologists reported feeling a sense of altruistic fulfillment serving as *the* team member who had the positionality to tell educational teams and parents what exactly a student required to be successful, and then the influence to ensure that those identified services and supports were indeed included in a student’s individualized education plan (IEP). One psychologist discussed her influence upon team decision-making and supporting students specific to educational programming to meet student needs:

I have been much more specific in my recommendations. For a long time I really didn’t do that. I just did the report and said they qualified, but I have been much more specific in my recommendations because I think then they have to put that in the IEP, and then they’re bound to stick to it.

School psychologists resolved awareness of disability label influence with the immediate altruistic satisfaction each experienced by helping students, parents, and teachers. School psychologist participants described an altruistic desire to help others; more specifically, school psychologists were positioned to help parents and teachers

understand student learning profiles, and further influence the implementation of recommended programming. One psychologist illustrated her influence and the long-term hope of educational success, “The hope would be that interventions would be so robust that you know, by the time they graduate they no longer even have a gap.” School psychologists maintained this altruistic intent via the hope that student skill deficits would be remediated in the long-term, closing the identified performance gap. One participant described her first-hand desire to help students with the goal of closing an educational gap when she commented, “You really want to try to get them caught up and get back in the mainstream.” In essence, the sense of helping, forged as altruistic intent, minimized the awareness of the impact of the disability label upon the student.

Disconnect from Responsibility.

School psychologist participants discussed their role as one intended to identify student strengths and needs, as well as to identify services and supports to remediate identified needs. School psychologists resolved their internalized conflict by a process of *disconnect from responsibility* of the potential for negative outcomes as a result of the label. Participants all discussed their role within the larger educational system, and as such, focused upon their role versus the systems-level issues which negatively hinder student development. School psychologists question the necessity of the application of a label to secure specialized services and supports, but framed this questioning within the broader context of the educational system outside personal responsibility. This was hallmarked by one participant who stated, “My job is to determine eligibility, and the state determines the regulations.”

Another participant demonstrated her disconnect from responsibility, stating:

Special education is flawed and the special education programming and progress monitoring we are using, ‘*Could it be better?*’ Sometimes I feel uncomfortable because I don’t know how the programming will go and where the kid will be or how they will do. There are pros and cons, but all we can do is the best we can with the information we have, and that’s how I sleep at night.

As such, responsibility for potential negative outcomes experienced by students when given a disability label was shifted from that of “self” to “system” level responsibility. In order to resolve the cognitive dissonance experienced by serving as the individual recommending a disability label, school psychologists consistently referenced the broader educational system as the governing system holding responsibility, with school psychologists indicating they are bound by the legal restrictions of the special education system.

This emerged in participant discussion when referencing their broader role within special education to help students within the special education system, as one participant succinctly described, “This is the label. This is the service. They might not receive all services if they don’t have the matching label.” Another participant described her role within the broader educational context, “We don’t see the benefits right away, but I am part of the process to identify needs and get kids what they need.” Another participant described her rationalization, citing, “I basically oversee it to make sure that they’re following the legal procedure appropriately.”

Cost-Benefit Analysis.

School psychologists reported engaging in a process of *cost-benefit analysis*. Cost-benefit analysis was a theme demonstrated by the participants when trying to

determine disability label application, summarized as: a constant consideration of what services, supports, and interventions will be provided with a disability label versus what will or will not be provided without a disability while simultaneously weighing that consideration against the long-term impact of a disability label upon a child's development and education. This cost-benefit analysis was described by one participant as:

I can see benefits and I can see negatives to it. I think it really depends on each particular student whether it is a benefit or a negative impact for the student. I think I feel that giving this label is making sure that the kids are getting the supports that they need in school. I feel more confident that they're getting them having that label, especially as they progress through the grades. So overall, I think that does outweigh the costs.

When working through this process of cost-benefit analysis to resolve cognitive dissonance, one strategy school psychologists employed was consideration of what the potential long-term trajectory of a student's education would result in with and without access to special education and an IEP. A common strategy school psychologists employed was "reverse engineering", which included the cerebral development of an IEP and related services for a student. This mental development or design of an IEP, which included how a child could be supported based upon their needs at the time of disability determination, often resulted in disability labeling based upon the student's theoretical benefits from the label and resulting IEP. Across all participants, immediate educational benefits always outweighed the potential negative long-term costs, succinctly described by one participant who questioned, "If they don't get a disability

label, then what do they receive?” Another participant described his process of reverse engineering, stating, “I work backwards, like, ‘*What would the IEP goal be for this child?*’

Rationalization.

The sense of “making a difference” was a central theme present in school psychologist participants’ reports when discussing their role within the larger context of evaluation to determine student disability labeling and special education service provision. Similar to the *cost-benefit analysis* theme, this process of *rationalization* resolved internalized discomfort that emerged when directly discussing their thoughts and feelings about the short-term and long-term benefits and potential negative outcomes of disability labeling.

School psychologists rationalize their decisions by emphasizing the potential immediate benefit of the application of a label and detaching from the potential negative impacts imparted by a disability label. In essence, labeling is rationalized by the resolution of the immediacy of the presenting problems, as posited by one participant, “How do I help the kids get what they need in the moment? What’s our immediate solution?” By focusing on the immediate needs, school psychologists rationalized the need to identify a label whilst also openly recognizing the impact of the label upon the child’s holistic development.

Key Points of Summation

Using a grounded theory approach, based within a phenomenological design, the researcher directly interviewed 10 practicing school psychologists working within Berks County, Pennsylvania schools. Participants were strategically stratified across targeted

demographics to purposefully collect diversified perspectives with varied experiences in the field of school psychology evaluation and disability identification for the intent of disability labeling. All participants engaged in a semi-directed interview yielding qualitative data targeting:

- 1) What are school psychologists' thoughts, feelings, and perspectives of assigning a disability label to a child?
- 2) What salient factors influence school psychologist disability identification beyond federal and state eligibility definitions/criteria?
- 3) If school psychologists experience cognitive dissonance when assigning disability labels, how is this cognitive process resolved?

Consistency in narrative, first-hand experiences and perceptions emerged across all participants independent of the demographic qualifiers used to stratify participant involvement. When examining school psychologists' thoughts, feelings, and perspectives when assigning a disability label to a child, targeted via research question one, several themes emerged within each of the three categories. School psychologist thoughts characterizing disability labeling included: whole-child approach (including student learning profiles), best practice versus reality (yielding thoughts of disillusion), and mitigation (as a pathway to success). Feelings associated with school psychologists' role when assigning a disability label to a child included themes related to: helping, isolation, stress (including frustration and pressure), concern, empathy, and confidence. First-hand perspectives of the process of disability labeling included themes referencing: involvement, systems-level factors, and diagnostic-decision-making.

The second research question specifically examined factors which influence the application of a disability label, beyond the regulations outlined in federal and state eligibility criteria when determining student qualification under one of the 13 disability categories. School psychologists reported numerous factors that were considered during decision-making and ultimately influenced determinations. Themes unfolded across several micro and macro level factors, including those related to the: student, parent, teacher, administrator, school building/district, multidisciplinary team, and school psychologists' internalized experiences.

Lastly, school psychologists discussed their perceptions of disability labeling and described internalized, disjointed experiences and cognitions qualified in the literature as cognitive dissonance. When indirectly asked to describe their thoughts, feelings, and perceptions of the process of identification, the application of a disability label to a child, and the potential short and long-term impacts of a disability label, themes consistent with the presence of cognitive dissonance were identified, with resolution of dissonance gained through: altruistic intent, disconnect from responsibility, cost-benefit analysis, and rationalization.

Table 1. Themes Identified

School Psychologists' Narrative Themes Identified Aligned to the Research Questions

<i>Research Questions</i>	<i>Themes Identified</i>
RQ1:	Thoughts: Whole-Child Approach Student Learning Profile

<p>What are school psychologists' thoughts, feelings, and perspectives of assigning a disability label to a child?</p>	<p>Best Practice v. Reality</p> <p>Disillusioned</p> <p>Mitigation</p> <p>Pathway to Success</p> <p>Feelings:</p> <p>Helping</p> <p>Isolation</p> <p>Stress</p> <p>Frustration</p> <p>Pressure</p> <p>Concern</p> <p>Empathy</p> <p>Confidence</p> <p>Process Perspectives:</p> <p>Involvement</p> <p>Systems-Level Factors</p> <p>Diagnostic Decision-making</p>
<p>RQ2:</p> <p>What salient factors influence school psychologist disability identification, beyond federal and state eligibility definitions/criteria?</p>	<p>Salient Factors:</p> <p>Student</p> <p>Parent</p> <p>Teacher</p> <p>Administrator</p> <p>School Building/District</p>

	Multidisciplinary Team School Psychologists' Internalized Experiences
RQ3: If school psychologists experience cognitive dissonance when assigning disability labels, how is this cognitive process resolved?	Yes: Altruistic Intent Disconnect from Responsibility Cost-Benefit Analysis Rationalization

Chapter 5

School psychologists are an integral component of the dynamic system of public education, offering expert guidance, training, and insight to parents and educators across the developmental, academic, behavioral, social-emotional, and educational needs of students, and aligned to law and ethical standards (APA, 2017; NASP, 2020b). Furthermore, school psychologists are expertly trained practitioners with proficiencies and skills that direct the provision of special education (NASP, 2016). Laws, ethics, systems-level practices, social psychological influences, previous and current intervention provision, individual student strengths and needs, training and professional development, caseload demands, stakeholder input, and educational resources are among the vast factors which inform and influence school psychologist decision-making during the evaluation process (Castillo, Wolgemuth, Barclay, Mattison, Tan, Sabnis, Brundage, & Marshall, 2016).

Consequently, these same factors influence school psychologists' recommendations made to the multidisciplinary team (MDT) to inform disability eligibility under an identification label . This array of differing factors impact school psychologist eligibility decision-making, but there are additional internal factors which impact school psychologist decision-making, still left to experimental study from the lens of the school psychologist practitioner. The current study was guided by the researcher's desire to examine school psychologist's first-hand reports of the process of disability identification and influencing factors, as well as an additional factor limited in experimental examination: labeling cognitive dissonance.

A substantive factor, often fleeting in discourse and consideration during disability decision-making, is the impact of the assignment of the disability label upon the child's sense of self and long-term identity development, (Gove, 1980, as cited in Thomson, 2012). Throughout the researcher's review and literature search, minimal experimental examination exists specifically assessing the process and impact of disability labeling from the person-centered school psychologist lens. Framed within a grounded theory, phenomenological approach (Creswell & Creswell, 2018; Patton, 2015), the researcher examined school psychologists' first-hand accounts regarding their thoughts, perceptions, and feelings about the process of disability labeling using semi-structured interviews.

Summary of Disability Labeling Influences

School psychologists are an integral member of educational teams, expertly trained in cross-competency domains (NASP, 2006), one of which is the intricate process of evaluation yielding student eligibility for special education. Specialized services and supports often hinge upon the eligibility recommendation of the school psychologist to the multidisciplinary team (IDEA, 2004; NASP, 2016). The recommendation of the school psychologist bears a net weighted influence on team decisions when assigning a disability label to a child. Research across the fields of law, education, psychology, and special education have examined factors which influence school psychologists' decision-making during the process of disability determination (Sadeh et. al., 2017).

Within a macro-view analysis of school psychologist practice, regulatory laws, statutes, and case law outline the legal criteria governing student evaluation for the

intent of disability identification and labeling. Ethical standards then set the ideal, or gold standard, for best practices permeating school psychologist service to students, teachers, parents, and educational teams (APA, 2017; NASP 2020b). Lasser and Klose (2007) succinctly described the duality of ethical school psychology, citing the essence to serve as “dual citizens” during the evaluation and multidisciplinary team decision-making processes to minimize harm to the student.

To increase consistency across clinical practice within federally defined eligibility criteria, the NASP *Blueprints* (2006) outline training standards that permeate university school psychologist certification programs. This coherent framework of school psychologist training encompasses knowledge and skill application across ten domains of foundational and functional competency, which work, “in concert to achieve the broader aims of school psychology practice: improving student competence and building systems capacity,” (NASP 2006, p. 15).

While macro-level factors guide and frame school psychologist practice within the evaluation process to determine student disability eligibility, micro-level factors equally influence school psychologist practice. With high caseload demands, limited opportunities for continued professional development, and daily time constraints, school psychologists find themselves working within a limited scope of evaluation-based practice without time to intentionally consider the impact of daily decision-making and service recommendations (Farmer et al., 2021). The confidence of the practitioner during diagnostic decision-making, and the internalized feeling of *needing* to help secure services for students through disability labeling, are a few notable micro-level factors influencing school psychologists’ identification practices.

School psychologists are faced with constraints imparted by the federal system in which labeling is defined and delineated (IDEA, 2004). Due to the restrictive nature of the 13 school-age disability identification categories, school psychologists assign labels to students that may be misleading, offer limited insight into the child's needs, and/or minimize consistency between the coordination of care across community agencies or service providers (Barnard-Brak et al., 2013). School psychologists' final disability determinations are influenced by outside clinical diagnoses and psychological evaluations. Disability labeling is influenced by the impact of the perception of "how" stigmatizing a disability category or label will be for a child (Barnard-Brak et al., 2013), with school psychologists electing to apply certain disability labels due to the stigma associated with certain identifications (Scardamalia et al., 2018).

Diagnostic decision-making is often ambiguous due to limited clarity of intended meaning or definitions of legal terms within the identification process, including terms such as "educational performance", and "adverse impact," (Sadeh & Sullivan, 2017). This ambiguity is often left to the individual school psychologist to interpret or decipher while advising school-based multidisciplinary teams (Sadeh et al., 2017). While legal ambiguity confounds eligibility determinations, stakeholder influences assert additional pressures to school psychologists' determinations. School psychologists are likely to make small concessions to team members, later leading to larger concessions to team member demands, to appease vested parties (e.g., parents, teachers, and/or administrators; Klose et al., 2012).

School psychologists are internally confronted, albeit typically in an unspoken and distant awareness, with the knowledge of social labeling theory relative to the

assignment of a disability label to a child or adolescent. Fairbanks (1992) described the process of labeling as inherently problematic, in three specific ways: “1) labels are negative in their depiction of deficits; 2) labels become the defining characteristic of the person, denying their complex whole; and 3) the use of labels for identifying ‘special education needs’ fails to properly assign failure to the education system,” (p. 161).

Versed in child development and social labeling theory, school psychologists are left to rationalize this knowledge through a process of cognitive dissonance resolution (Harmon-Jones & Mills, 2019). To date, no research has empirically assessed this process of cognition within school psychologist eligibility determination when recommending student disability identification for the intent of services while assigning an identity-changing label.

The Problem

Limited research exists specifically targeting first-hand accounts from school psychologists regarding their thoughts, perceptions, and feelings about the process of disability labeling and possible repercussions of the decision to recommend a disability label(s). As a practicing school psychologist, the researcher posited that school psychologists’ perceptions and process of student disability identification are influenced by factors beyond federally and state defined qualifying criteria. Social impacts, educational team dynamics, knowledge of assessment, diagnostic decision-making confidence, social phenomena, training, professional development, and demanding caseloads all influence decision-making. Of peak researcher interest, and limited in experimental examination, is the consideration of the perceptions of the actual “utility and beneficence” of the process of labeling for the intent of specialized programming.

The current status of the school psychologist psyche within role responsibilities can be characterized as a balancing act of juggling stakeholder demands with student needs. On one hand, the school psychologist maintains the knowledge of the impact of a disability label upon student identity development. On the other hand, the school psychologist is compelled to identify the student with a label to open the pathway to special education. This has the potential to cause an internal cognitive dissonance when providing services to a child in need through labeling and disability identification.

The decision to find a child eligible for special education may be unconsciously contraindicated by the potentially negative impact of altering a student's identity development and sense of self-efficacy. Experimental studies have attempted to assess pieces of this intricate puzzle of student disability labeling by providing surveys, vignettes with Likert ratings, or questionnaires to school psychologists to gain insight. Yet, no research has assessed the first-hand perspective of the keystone professionals perfectly positioned to inform current practices.

The researcher has found no evidentiary research targeting the cognitive dissonance experience of applying a label by the practitioners themselves, school psychologists, directly involved as a pivotal educational specialist resulting in labeling a child with a disability. School psychologists need a platform to experimentally document their first-hand experience within the process of student identification to critically reflect upon: thoughts, feelings, and perspectives across diagnostic decision-making; team decision-making influences; and dissonance resolution in the culminating recommendation of a label.

Research Intent

This niche in the field of school psychology identification and labeling plays a larger role within special education practices. School psychologists' process of recommendation for disability labels is fundamental to increasing awareness of identification influences. Furthermore, this beckons an increased understanding of the cognitive processes experienced by the school psychologist when labeling a child, and the perceived impact or effect of that label upon a child's identity development and life trajectory.

Ultimately, understanding *what* a school psychologist is thinking, *how* they are influenced during decision-making, and *why* they make the recommended identifications will inform self-reflection and internal growth within school psychology practice. It also brings a salience to the potential influence of the disability label, beckoning for over-due conversation concerning the impact of what is truly occurring: disability labeling to receive specialized services when the needed services could be provided without a disability label. Compounding the situation at hand is the knowledge that special education funding hinges upon the identification recommendations made by school psychologists to multidisciplinary teams. Understanding the factors at play, and increasing salience to those factors, has the potential to change the trajectory of how special education decision-making is conducted. School psychologists' process of recommendation for disability labels is elemental to increasing awareness of identification influences.

Using purposeful semi-structured interviews within a grounded theory, phenomenological framework (Creswell & Creswell, 2018; Patton, 2015), the researcher

endeavored to answer the following hypothesis by directly, and simply, asking the primary source:

- 1) What are school psychologists' thoughts, feelings, and perspectives of assigning a disability label to a child?
- 2) What salient factors influence school psychologist disability identification beyond federal and state eligibility definitions/criteria?
- 3) If school psychologists experience cognitive dissonance when assigning disability labels, how is this cognitive process resolved?

Figure 1. Hypotheses Key Predictions

Research Question (RQ) Predictions

RQ1	RQ2	RQ3
<ul style="list-style-type: none"> • School psychologists experience similar thoughts and feelings, which include consistent thoughts, feelings, and perspectives when assigning a disability label to a child 	<ul style="list-style-type: none"> • School psychologist disability identification is influenced by a multitude of factors (i.e., ethics, legal regulation, district/school resources, past interventions, key stakeholders), including knowledge of social labeling, internal variables, and external social influences. 	<ul style="list-style-type: none"> • School psychologists experience cognitive dissonance, caused by a dynamic interplay between the need to secure specialized services through assignment of a label whilst understanding the potentially negative and enduring impact caused by labeling a child with a disability, resolved by focusing upon the immediate needs of a child while selectively ignoring long-term labeling impacts.

Key predictions, based upon the available literature and researcher positionality as a practicing school psychologist, postulated the following results relative to respective hypotheses (see Figure 1.). In response to RQ 1, the researcher proposed school

psychologists experience similar thoughts and feelings, which include consistent thoughts, feelings, and perspectives when assigning a disability label to a child. When examining RQ 2, the scientist-practitioner hypothesized that school psychologist disability identification is influenced by a multitude of factors (i.e., ethics, legal regulation, district/school resources, past interventions, key stakeholders), including knowledge of social labeling, internal variables, and external social influences. Lastly, and of peak interest under examination within RQ 3, the researcher theorized school psychologists experience cognitive dissonance, caused by a dynamic interplay between the need to secure specialized services through assignment of a label whilst understanding the potentially negative and enduring impact caused by labeling a child with a disability, resolved by focusing upon the immediate needs of a child while selectively ignoring long-term labeling impacts

Methodology

Qualitative design was influenced using the guidance offered by Patton (2015), Maher and colleagues (2018), and Creswell and Creswell (2018). Using the phenomenological framework to formulate grounded theory answering the three key research questions, the researcher explored and elicited direct feedback from participants currently employed as school psychologists. Framed within the qualitative process of inquiry, the researcher attempted to gain first-hand accounts from the actors directly involved (Creswell & Creswell, 2018). Grounded theory unfolded as the researcher interviewed and gained first-hand reports and perspectives of practicing school psychologists regarding their thoughts, feelings, and opinions specific to the three research questions guiding the study (Patton, 2015). This laid the foundation and

framework for endeavoring to answer the yet unquestioned and untouched domain of study of school psychologists' first-hand perspectives.

Using a qualitative research inquiry, semi-structured interview questions were developed by the researcher, reviewed and approved by the research committee for credibility and integrity, and then posed to each participant during a confidential teleconference. The format of the semi-structured interview directly presented questions to each participant, targeting the hypotheses, while allowing for open-ended follow-up discussion as responses guided the conversations amongst each participant. The unit of data extrapolation were documented interviews transcribed by the researcher, coded for themes using several rounds of inductive and deductive cyclical, multi-step coding.

Participants, Data, and Analyses

The researcher gained all of the participants from the BSPA, the local professional school psychologist association located within Berks County, Pennsylvania. Within this population pool, participants included school psychologists holding varying levels of education and years of experience, serving for a minimum of three years within public education. BSPA school psychologist members selected for inclusion in the research each served in 10 different districts across the 18 school districts located in Berks County, Pennsylvania, further stratifying the sample. Additional stratification demographics which guided participant selection included geographical location of district employment, socio-economic status of students served, student grade level assignment (i.e., elementary, middle, and high school levels), and both nationally and non-nationally certified school psychologists.

Using the semi-structured interview (Appendix C), the researcher conducted individual semi-structured interviews with identified participants via teleconferencing, as all participants elected this platform due to the ease and accessibility of virtual meetings. This modality of interviewing resulted in participant comfort, convenience, and was conducive to confidentiality. The unit of data analysis were the individual interviews completed with each participant. The researcher used a mixture of guided and experiential learning to complete the process of coding for the intent of theme analysis.

The researched employed a reflexive, cyclical approach to data analysis. Embedded within this cyclical process, the researcher blended inductive and deductive analysis to support thematic development (Leech & Onwuebugzie, 2011; Linneberg & Korsgaard, 2019; Rogers, 2018; Saldana, 2013). The researcher examined the factors influencing disability labeling recommendations and the cognitive processes practicing school psychologists employ to resolve the experience of internal discord between thoughts, feelings and knowledge, known as cognitive dissonance (Festinger, 1957, as cited in Harmon-Jones & Mills, 2019). Considerations of the cognitive dissonance resolution process were evaluated to increase understanding of school psychologists' internalized experience when managing the potential repercussions of the assignment of the label upon the child's identity development, balanced with the need to provide a disability label to secure special education services.

The Major Findings

At the onset of the development of the present study, the researcher endeavored to systematically undertake the process of gaining school psychologists' first-hand

reports specific to special education evaluations and the resulting disability labeling process applied to students requiring additional educational supports. Using guidance from the literature base, paired with first-hand experiences as a practicing school psychologist, the analysis unfolded by first posing 12 targeted questions to colleagues in the field of school psychology. Using participant responses, the researcher was able to answer each of the intended hypotheses:

- 1) What are school psychologists' thoughts, feelings, and perspectives of assigning a disability label to a child?
- 2) What salient factors influence school psychologist disability identification beyond federal and state eligibility definitions/criteria?
- 3) If school psychologists experience cognitive dissonance when assigning disability labels, how is this cognitive process resolved?

Research Question 1

Participant interview responses, coded for consistency and yielding theme development, resulted in several themes qualifying the *thoughts, feelings, and perspectives* school psychologists report when considering student eligibility and disability identification. Thoughts, feelings, and perspectives were analyzed across three separate processes of cyclical analysis and transcript coding. Thought patterns consistently resulted in themes across a *whole-child approach, best practice v. reality, and mitigation*. Within the theme of *whole-child approach*, a central sub-theme was *student learning profile*. Within *best practice v. reality*, one notable sub-theme was identified as *disillusioned*. A *pathway to success* was a sub-theme that emerged within the *mitigation of efforts* theme.

Thoughts.

When working through the evaluation process to determine student eligibility for special education services and supports under a disability category, participants all referenced aspects to the evaluation process that represented a *whole-child approach*. This thought process to determining student need under a disability category was integral to adequately identifying student need, and ultimately student eligibility under an identification category. Without a whole-child thought process, participants indicated they did not believe they had the information necessary to confidently identify a label.

This whole-child or ‘big picture’ approach included garnering student background information (i.e., medical history, vision and hearing screenings, absences/truancy, school attendance), personal demographics (i.e., culture, native language), trauma history, mental health, classroom performance, profile of achievement across grade levels, pre-post Covid performance, and stakeholder input (i.e., student perceptions, teacher feedback, parent insight). Within the whole-child thought process when determining student eligibility and determination of a disability label, school psychologists frequently commented on the utility of forming a *student learning profile*, including strengths and weakness.

A consistent theme reported by the school psychologists were thoughts regarding *best practice versus the reality* of student labeling and subsequent service provision. The central thought is that the label will open the doors to services which will meet all the needs of the student, with services and supports then implemented at a rate and intensity to remediate skill deficits and close the gap of deficit academic performance.

This thought is aligned with best practices guiding evaluation and student labeling recommendations. The challenging reality voiced by participants is that special education often falls short of intended promises. School psychologists also reported their thoughts regarding the utilization of a label as a guiding force to student programming, rather than utilization of the evaluation/ reevaluation report to inform student individualized education plans. The label is thought to be viewed as an unintentional stereotype informing programming years after student disability identification and leading to negative post-secondary outcomes.

Related to the thoughts concerning best practice versus the reality are school psychologists' thoughts characterized by a sense of reported *disillusion* with the thought of labeling students to secure special education services to meet student needs. This was consistently voiced as a thought related to the lack of student service provision even with the application of a label, and then the resulting minimal student growth leading to exiting from special education. Best practice dictates students qualify and receive special education to remediate skill deficits, but the thought held by participants was that students rarely closed a gap to exit special education.

School psychologists reported an awareness of the negative impact a label can impart upon a student, including changed perceptions that extend to peers, parents, and teachers. As such, participants discussed several key thoughts they have regarding mitigation of the impact of assigning disability labels. These thoughts encompassed a reduced focus on the exactness of a label. Participants discussed their efforts to use their connections to change the thoughts of their colleagues to shift perspectives of students with disabilities. Ultimately, the thought by participants was that a label opens

doors to a pathway of success by garnering the necessary supports to implement and lead to student growth, even if reality demonstrates otherwise.

Feelings.

School psychologists consistently reported similar feelings regarding the assignment of disability labels to students. Six key *feelings* themes were consistently expressed, including: *helping, isolation, stress, concern, empathy, and confidence*. Within the feeling of stress, *frustration* and *pressure* were endorsed sub-themes.

The primary feeling most commonly reported first was the emphasis of *helping* students, families, teachers, and administrators through the process of special education evaluation to ultimately identify and subsequently develop programming to meet the immediate needs of the students with educational challenges. School psychologists view their role as one of a helper, trained to identify student strengths, needs, and align services and supports to the areas of academic need.

The second feeling school psychologists commonly reported experiencing was isolation. Participants commonly referenced this feeling as though they are working on an island, emphasized by the feeling of *isolation*. Although special education evaluations were often referenced by the school psychologists as a MDT process, school psychologists consistently remarked about the feeling of singularity in the final identification determination. The label determination is by law regarded as a team decision (i.e., MDT decision), but the lived reality of the school psychologists is they often gather the data and make identification recommendations to the team. The process feels isolating, as participants reported that MDTs look to the school psychologist for a label to inform programming, resulting in a gatekeeper mentality.

A concerning report from school psychologists is the overwhelming *stress* they report when assigning a disability label. As one participant noted, this stress is a result of several factors, before the actual label identification (involving the process of identification). Stress is reported when there is inconsistency in the data. Stress is also endorsed during the delivery of the label identification to team members. School psychologists report a keen awareness of what team members will think about a student qualifying or *not* qualifying for special education, the disability identified as the label qualifying for services, whether stakeholders will be in agreement, and parent response to labeling. An identified stress subtheme was school psychologists' reports of feeling *frustrated* with the process of eligibility. A second subtheme was the feeling of *pressure* from stakeholders to either qualify a child or to not qualify a child, based upon the positionality of the stakeholder asserting the pressure, including parents, teachers, administrators, lawyers, and parent advocates.

The fourth feeling theme identified was school psychologists' *concern* with the application of a disability label. Concerns reported by participants related to the changed expectations of the student from parents, teachers, and students themselves due to the application of the label. Concern also centered around labeling to garner services, but the lacking capacity of special education services and supports to efficaciously meet the identified needs of students qualifying for services without serving as, one psychologist described, "a dumping ground." Related to general concern is the hesitation to label due to concern regarding an awareness of the long-term impact of the label assignment to the identity development of the child.

Additionally, concern was endorsed regarding the impact of the label and resulting student placement. Participants spoke to the impact of labels determining placement within special education programs. Misunderstanding regarding the label itself was a notable concern. This misunderstanding resides within parents, teachers, administrators, and student perceptions, as they often do not understand what the label actually means.

School psychologists overwhelming reported a sense of *empathy* (fifth identified feeling theme), for both the students receiving the label, as well as the parents of the children identified for special education. School psychologists described their efforts to understand the perspective of the student receiving the label. School psychologists reported compassion for parents, especially when hearing a disability label for the first time and parental understanding of all of the information that is provided within an evaluation to determine disability labeling.

Lastly, *confidence* was a consistent theme reported across school psychologists. As school psychologists progress through their career, there was a direct increase in their reported confidence in a purposeful willingness to be bold in their recommendations to teams, including identification of labels or conversely results which do not endorse a disability label.

Process Perspectives.

School psychologist participants consistently reported similar viewpoint perspectives of the process of assigning disability labels to students. Several consistencies emerged, with the following three themes identified under the umbrella of

process perspectives of disability labeling, including: *involvement*, *systems-level factors*, and *diagnostic decision-making*.

School psychologist participants reported their *involvement*, or lack thereof, in the pre-referral process of student referral for a special education evaluation. Five out of 10 school psychologists reported no involvement in student programming or intervention prior to receiving a referral packet requesting a special education evaluation. Amongst these participants, they consistently remarked on their desire to be involved in the student's educational team prior to receiving the evaluation request. Specific reasons for this perspective included a need to help teams design pre-referral interventions.

School psychologists also referenced the need to be involved pre-referral in order to guide teams on "what" exactly constitutes a warranted or substantiated referral for an evaluation, as well as the need help direct the collection of information necessary for an evaluation. School psychologist pre-referral involvement was cited as necessary to support students prior to falling behind grade-level expectations, commonly referenced by participants as the "wait to fail model."

When involved in the pre-referral process, reported by participants as involvement in determining student skill levels or matching interventions to areas of deficit, school psychologists' perspectives of the process increased positive outcomes and feelings specifically regarding the application of the label, as well as the determination that a child does not qualify for special education upon completion of the evaluation. Involvement in pre-referral evaluations increased the confidence of the label and the perspective of applying labels.

Perspective of the process of student labeling is influenced by district *systems-level factors*. Participants referenced differences in the services provided to students upon disability labeling dependent upon the school within a district, as well as differences in service provision across differing districts within Berks County. Another commonly cited systems-level factor impacting the perception of the application of a label is district level systematic intervention, such as MTSS, RTII, and PBIS. Participants commonly remarked on the impact of intervention and their perception of applying student disability labels to qualify for special education. The ability to draw upon systems-level intervention data to examine student growth within the area of referral, or lack there-of, impacted school psychologist's perspective of the application of a disability labels to students in their respective districts.

District demographics were commonly cited by participants when describing their perspective of labeling students. Psychologists described the impact of common core curriculum, district socio-economic status, and school community culture. A commonly cited systems-level factor impacting perspectives was district socio-economic status, as lack of resources were believed to more accurately account for student performance than a disability label. Within districts, common core curriculum deficits, leading to significant skill deficits across entire school buildings, changed the perspective of applying disability labels, as the label was often perceived to inaccurately place the deficit within the child rather than reflecting the true issue. Lastly, school community culture was cited as a district -level perspective that impacted student identification. Some school communities emphasize the need to intervene and remediate skill deficits while other district school cultures were described as utilizing no

effective intervention process prior to evaluation, and as such, disability labels are normalized within the school community culture.

Diagnostic decision-making was referenced by all participants as influencing perspectives of the process of student labeling. Overwhelmingly, school psychologists do due diligence to gather as much information as possible to inform label recommendations. When considering labeling, diagnostic decision-making was a perspective that was endorsed by all. Specifically, when data was confirmatory, diagnostic decision-making was cited within identification processes. School psychologists referenced diagnostic decision as impacting their confidence in final decisions to identify a disability. When data was questionable in nature, or data was scattered and offered limited consistency, participants reduced citation of data-based decision-making in their reported perspectives of student labeling.

Related to the perspective of labeling when approached from a data-based decision perspective when data is inconsistent or lacking, *what* participants reported under their perspectives of labeling was just as informative as *what was not* reported by participants when discussing their perspectives. When lacking confirmatory data, or data that was not substantiated as valid, school psychologists relied less upon perspectives of diagnostic decision-making to inform label identification and more upon the aforementioned feelings and thoughts themes, to inform labeling, which was endorsed by the collective narrative responses from the participants.

Research Question 2

The second research question targeted: *What salient factors influence school psychologist disability identification beyond federal and state eligibility*

definitions/criteria? Using the semi-structured interview tool, across participant interview responses, several themes emerged as influencing factors during eligibility determination, including emergent themes related to the: *student, parent, teacher, administrator, school building/ district, multidisciplinary team, and school psychologists' internalized experiences.*

Student.

When participants were asked to describe factors which influence disability identification, a commonality in responses were factors specific to the student. School psychologists consider a vast amount of factors related to the whole-child, including medical history, school screening results, attendance, discipline history, history of drug/alcohol use, home life, trauma history, transiency, fit to school culture, virtual schooling history (i.e., cyber or charter school enrollment), history of prior special education services, current and past grades, past history of interventions, and student acceptance of a disability label.

Parent.

When considering the application of a disability label, school psychologists always commented on parent perceptions and parental pressures. School psychologists are keenly aware of *what* a parent is hoping for when outcomes of an evaluation are completed, and this awareness is considered when determining disability label identification and special education qualification. When parents include lawyers and advocates within the educational team, this is a factor that considerably weighs upon school psychologists' decision-making. Lastly, when parents provide educational teams with outside clinical evaluations which identify mental health diagnoses, this is a factor

considered by school psychologists when making eligibility determination, as school psychologists reported pressure to conform findings and label identification to outside evaluations.

Teacher.

When determining if a student is eligible for special education, school psychologists frequently discussed their consideration of the quality of instruction delivered within the general education classroom as it relates to student achievement levels. In other words, school psychologists consider the quality of instruction as it pertains to student achievement and progress within the core curriculum and the reliability of the teacher referral for a special education evaluation. School psychologists are hesitant to identify a disability label if they question the basis of the quality of instruction in the classroom that is leading to the referral for a special education evaluation and expected label. Another teacher factor commonly reported by participants was the perceived validity of the referrals for a special education evaluation. School psychologists indicated that the nature of teacher referrals, made by specific teachers, for the intent of completion of an evaluation was a factor considered during the process of disability labeling.

Administrator.

School psychologists reported the impact of administration when determining disability label identification. Half of the participants noted school administrator positionality as a reported influence when assigning or not assigning certain labels. Many school psychologists indicated that their school administrators, including building principals and special education directors, were supportive of their conclusions when

assigning disability labels. This yielded school psychologists endorsing feelings of confidence when selecting and applying label identifications. School psychologists noted pressure to not identify students under certain categories, while assigning administrator-preferred alternative labels. This was reported as an influencing factor, as school psychologists were assigning preferred labels to accommodate administrators seeking to strategically place students in certain programs, often out of district.

School Building/District.

When determining appropriateness of disability identification and qualification for special education for a student, participants described school and district factors which played a role when determining disability labels. Participants referenced district level factors, such as: the quality of the common core instruction, MTSS and RTII implementation, PBSP programming, district politics, school-board positionality, demographic qualifiers related to socio-economic status, and district level response to remedial learning due to the COVID pandemic.

Consistently reported by all psychologists was consideration of the services that would be provided upon identification paired to student grade level and school district. In other words, a deciding factor was consideration of what services, supports, and intervention would be provided dependent upon the student's school level (i.e., elementary school versus high school), and building level comparison within a district (i.e., elementary school 'A' versus elementary school 'B' within the same district). Differences in services pre- and post- label identification was a considered factor in light of programming availability.

Multidisciplinary Team.

When working through an evaluation process, leading to the end result of determination of the appropriateness of a disability label, participants often referenced the multidisciplinary team (MDT) as a factor in identification. School psychologists consider the viewpoints of the stakeholders on the MDT when determining a student's identification, including the quality of input provided by team members, the quality and intensity of intervention data gained pre-referral for evaluation, specific team member expectations of disability identification outcomes, and the utility of the team problem-solving approach.

School psychologists indicated their consideration of how the information would be received by colleagues on the MDT. School psychologists who reported feeling as though they worked in isolation through the evaluation process did not report the MDT as a significant influencing factor; however, school psychologists who reported working in districts with moderate to well-developed MDTs indicated this was a significant factor considered during student identification.

School Psychologists' Internalized Experiences.

Every participant described an awareness of their own internalized perceptions and feelings during an evaluation, paired with the purposeful intent to act in an unbiased manner, when conducting student evaluations to determine disability identification. Whether it was at the forefront of their thoughts or tucked away and selectively unattended to, every school psychologists indicated an awareness of the significance of their role when applying a disability label to a child. School psychologists

reported attempts to do their best to try to not assign a disability label due to awareness of the impact of the label upon the development of the child.

Mitigation attempts were a commonly referenced factor, such that participants described efforts to gain student supports and general education interventions without moving to the level of special education identification labeling, especially when Emotional Disturbance (ED) was a disability under consideration for student eligibility. When the application of a label was necessary, participants actively described their intent to be selective with label application due to the perceptions of the label by others, including the student, parents, and teachers. Psychologists reported an internalized awareness to do justice for the child (i.e., implement interventions, convince teachers to ‘do more’) whilst managing and navigating the vast intricacies of the evaluation process described thus far. Participants often remarked about their consideration of the life-long impact of the label upon the student coupled with the need to help the child in the present.

Research Question 3

The last research question examined the presence of cognitive dissonance during the process of disability labeling, specifically asking: *If school psychologists experience cognitive dissonance when assigning disability labels, how is this cognitive process resolved?* Of all three research questions, this question was primarily analyzed from a macro-view across participant dialogue. A holistic analysis of individual interviews, cross-compared across participant interviews, resulted in themes yielding answers to the third research question. In short, yes: school psychologists do experience cognitive

dissonance when assigning disability labels for the intent of gaining much-needed student support.

All participants experienced varying degrees of cognitive dissonance when assigning disability labels, even the one participant who initially explicitly stated he did not. Differences in cognitive dissonance resolution were revealed in the processes participants used to navigate the internalized experience of cognitive dissonance. Themes central to research question three emerged, including the following four core themes: *altruistic intent*, *disconnect from responsibility*, *cost-benefit analysis*, and *rationalization*.

Altruistic Intent.

School psychologist participants all reported in their interviews an internalized desire to help students, deemed *altruistic intent*. The altruistic intent manifested in participant interviews as the drive to help students gain whatever supports necessary to remediate skill deficits and make educational gains. This internalized desire to “do good” was referenced within the context of disability identification and labeling. The feeling of doing good for a student counteracted the application of the labels. School psychologists reported they are helping to meet the needs of students while offering unconditional supports based on what a child was identified as requiring.

School psychologists reported feeling a sense of altruistic fulfillment serving as *the* team member who had the positionality to tell educational teams and parents what exactly a student required to be successful, and then the unfolding influence to ensure that those identified services and supports were indeed included in a student’s individualized education plan (IEP). School psychologists resolved awareness of

disability label influence with the immediate altruistic satisfaction each experienced by helping students, parents, and teachers. School psychologists maintained this altruistic intent via the hope that student skill deficits would be remediated in the long-term, closing the identified performance gap. In essence, the sense of helping, forged as altruistic intent, minimized the internal discomfort of the potential of imposing a label with the potential to impart a negative impact upon the child.

Disconnect from Responsibility.

School psychologist participants discussed their role as one intended to identify student strengths and needs, as well as to identify services and supports to remediate identified needs. School psychologists resolved their internalized conflict by a process of *disconnect from responsibility* of the potential for negative outcomes as a result of the label. Participants discussed their role within the larger system, and as such, focused upon their role versus the systems-level issues which negatively hinder student development. School psychologists questioned the necessity of the application of a label to secure specialized services and supports, but framed this questioning within the broader context of the educational system outside personal responsibility.

As such, responsibility for potential negative outcomes experienced by students when given a disability label was shifted from that of “self” to “system” level responsibility. In order to resolve the cognitive dissonance experienced by serving as the individual recommending a disability label, school psychologists consistently referenced the broader educational system as the context in which school psychologists function, bound by the legal regulations guiding role responsibility. This emerged in

participant discussion when referencing their broader role within special education to help students within the education system.

Cost-Benefit Analysis.

School psychologists reported engaging in a process of *cost-benefit analysis*. Cost-benefit analysis was a theme demonstrated by the participants when trying to determine disability label application, summarized as: a constant consideration of what services, supports, and interventions will be provided with a disability label versus what will or will not be provided without a disability, while simultaneously weighing that consideration against the long-term impact of a disability label upon a child's development and education.

When working through this process of cost-benefit analysis to resolve cognitive dissonance, one strategy school psychologists employed was consideration of what the potential long-term trajectory of a student's education would result in with and without access to special education and an IEP. A common strategy school psychologists employed was "reverse engineering", which included the cerebral development of an IEP and related services for a student. This mental drafting or design of an IEP, which included how a child could be supported based upon their needs at the time of disability determination, often resulted in disability labeling based upon the student's theoretical benefits from the label and resulting IEP. Across all participants, immediate educational benefits always outweighed the potential negative long-term costs.

Rationalization.

The sense of "making a difference" was a central theme present in school psychologist participants' reports when discussing their role within the larger context of

evaluation to determine student disability labeling and special education service provision. Similar to the *cost-benefit analysis* theme, this process of *rationalization* resolved internalized discomfort that emerged when directly discussing their thoughts and feelings about the short-term and long-term benefits and potential negative outcomes of disability labeling. School psychologists rationalize their decisions by emphasizing the potential immediate benefit of the application of a label and detaching from the potential negative impacts imparted by a disability label. In essence, labeling is rationalized by the resolution of the immediacy of the presenting problems. By focusing on the immediate needs, school psychologists rationalized the need to identify a label whilst also openly recognizing the impact of the label upon the child's holistic development.

Conclusionary Findings

Using a grounded theory approach, based within a phenomenological design, the researcher directly interviewed 10 practicing school psychologists working within Berks County, Pennsylvania schools. Participants were strategically stratified across targeted demographics to purposefully collect diversified perspectives with varied experiences in the field of school psychology evaluation and disability identification for the intent of disability labeling. Consistency in qualitative interviews of first-hand experiences and perceptions emerged across all participants independent of the demographic qualifiers used to stratify participant involvement, offering further validation to the reported thematic developments gained.

The current qualitative inquiry gives voice to the school psychologists charged with leading educational teams in the determination of student disability labeling to

inform educational programming. When considering the holistic motivation behind the study, the researcher has met the set intention of the investigation by answering the questions under examination, as well as giving voice to school psychologists. When the research questions are considered in tandem, the data supports the researcher's declaration: school psychologists have consistent thoughts, feelings, and perspectives that inform disability labeling when managing a multitude of influencing factors in the determination process of labeling to meet student needs, school psychologists mentally weigh the cost-benefit impact of the label to the child, and cognitive dissonance is resolved via a focus upon immediate needs of the child and a duty to serve students, teachers, parents, and administrators while disconnecting from the involvement of the potential negative outcomes of a disability label.

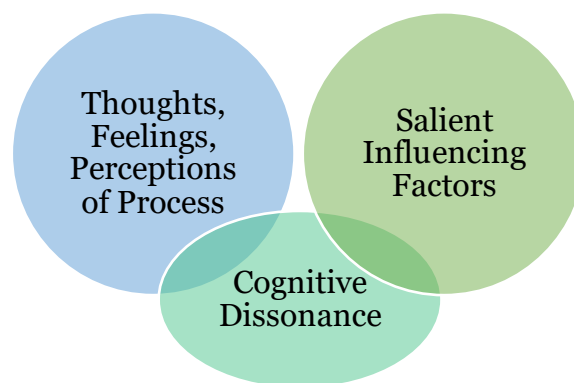
School psychologists experience a vast array of feelings and thoughts which influence their perspective of the process of disability labeling. Divergent thoughts and feelings, often qualified as both positive and negative in nature, lead to internalized cognitive discord. Salient factors present during school psychologist decision-making to inform disability labeling add an additional layer of significant complexity in the experience of school psychologists' perceptions of the process of applying a label to a child or adolescent. When faced with this myriad of dynamic internal states and external pressures, school psychologists are faced with the daunting task of deciding "what is best" for the child.

Within this unique dynamic, school psychologists maintain a focus to help by meeting the immediate needs of the student, but are affected by cognitive dissonance caused by a desire to help and placing awareness of labeling impacts in the back of their

thoughts. The cognitive dissonance resolution process, in essence, serves as a method for self-preservation. When considering the thoughts, feelings, and process perspectives of the evaluation procedures to determine disability labeling, externalized and internalized salient factors enact very real pressure upon school psychologists, resulting in the development of cognitive dissonance, illustrated in Figure 2.

Figure 2. Relationship Between Hypotheses Findings

Dynamic Between Internal Cognitions and External Factors, Resulting in Cognitive Dissonance



Contribution to the Field

The present investigative, grounded study accomplished several goals. The researcher's qualitative analysis confirmed the findings discussed within the literature review, specifically the documented influencing factors which impact disability labeling. When determining a disability identification, school psychologist participants endorsed consideration of how labels are perceived (by the student, parents, teachers, and administrators; Barnard-Brak et al., 2013). They also consider the nature of a label and the associated stigma (Lauchlan et al., 2007). Consistent with the synthesis provided by

Hammer (2012), student variables influence diagnostic decision-making, and implementation of previous interventions were referenced as a salient factor influencing label application during both the pre-referral and referral process resulting in student identification. Further validating Hammer (2012), as well as and Castillo and colleagues (2016), the present study asserts that school psychologists are cognizant of the potential negative impact a disability label may have upon the student's identity development and resulting changed expectations (from others and the child) due to the application of a disability label.

In 2012, Hammer provided a brief to the West Virginia Department of Education, summarizing the impact of classification and identification. From the first-hand reports gained from practicing school psychologists, the current research affirms Hammer's key findings, including: labels have mixed influence dependent upon the mitigating variables present to each unique child's situation; labels have a negative impact by altering and lowering teacher and parent expectations; labels can have a positive impact, such as providing a perceived description for parents to account for their child's functioning or provide validation for their child's behavior; labels yield access to specialized programming and services; certain labels are preferable to other labels, school psychologists assert that RTI/MTSS possesses the potential to accomplish the same results of a disability label assignment; and, school culture impacts label perceptions.

Embarking upon a new plane of inquiry to purposefully examine current practices, the researcher extended the understanding of the school psychologist's psyche when resolving the presence of cognitive dissonance resulting from the application of

disability labeling and a simultaneous awareness of the potential harm that could develop from the label. The present findings indicate school psychologists do experience cognitive dissonance as a result of their awareness of the potential implications when assigning a disability label whilst securing special education for children in need of specialized services and support, otherwise unavailable without a label.

The current status of the school psychologist psyche is a balancing act of juggling stakeholder demands with student needs. On one hand, the school psychologist maintains the knowledge of the impact of a disability label upon student identity development, but s/he is also compelled to identify the student with a label to open the pathway to special education. Whilst the findings describe the experiences of the included participants, the researcher would contend that the illustrated experiences are not singular to the small sample of participants within the current study.

When taken in totality, school psychologists feel a very real pressure to take on the puzzle of navigating the myriad of internal experiences and external influencing factors to ultimately provide students and vested stakeholders with a pathway to increased student success. This drives school psychologists to identify students for special education under a disability label, as there are limited alternatives that yield the acquisition and implementation of effective student intervention.

Limitations

Several limitations are noted within the current study. The current researcher is a practicing school psychologist. As a current scientist-practitioner within the field of education, positionality inherently inserts the potential for bias or influence within the

nature of the research. Awareness of this potential for influence was key to ensuring that the structure and delivery of the semi-structured interview questions by the researcher were framed in a manner to intentionally not influence participant responses. Reducing personal influence, through self-awareness and reflexive thinking during data analysis, were essential during coding to increase credibility of the results gained and reported.

Another limitation to the current study is the lack of triangulation available between the current semi-structured data collection tool and to quantitative data analysis, as no quantitative data exists specific to the current research study. The semi-structured interview questions were developed by the researcher and based upon the literature base available to date. This lack of triangulation when formulating the interview questions resulted in no theme validity comparative analysis across studies. However, this was one of the quintessential reasons motivating the researcher to examine the current topic through a grounded theory, phenomenological approach to inquiry.

The essence of qualitative inquiry is to gain rich knowledge to inform and understand the practice of an identified group or culture. A limitation of the current research is the nature of the sample gained and the limited sample size. The sample was narrowly drawn from one county within Pennsylvania. The sample is also limited in comparison to the total population of school psychologists working with the state of Pennsylvania. Important to note, sample demographics, including gender, education, national certification, and years of experience were all consistent with national school psychologist demographic averages (NASP, 2020c). The findings from the current study

cannot be generalized to the total population of practicing school psychologists due to the limited geographical demographic and small pool of participants selected within Pennsylvania. However, the researcher asserts that the current study provides a baseline for a line of inquiry that is presently left unstudied.

The research aimed to begin an examination into the first-hand accounts of school psychologists who are in the trenches and experiencing duality during high-stakes decision-making and disability labeling. Although the results may not generalize beyond a limited sub-sample within the larger population of school psychologists, the research certainly sets a foundation for framing future research specific to this niche line of inquiry. The research results will hopefully lead to continued examination of influences present within the broader context: the field of school psychologist practice during student disability labeling and person-first perceptions of the practice.

Future Research

Factors beyond cut-off criteria and federal disability definitions play a major role in a school psychologists' diagnostic decision-making process, and the impact of the label upon a child's development cannot be ignored. School psychologists' firsthand accounts of their internalized cognitive processes and experiences need to be further examined. A better understanding of their perceived role in the process of identification will inform best practice and relevant student outcomes. The research gained has provided increased understanding of current practices and supports self-reflection of influences during the evaluation process. Additionally, the knowledge gained can assist school psychologists when advocating for student intervention pre-evaluation to ensure

identification is absolutely necessary to provide individualized student services and supports.

The salient factors influencing recommendations for labeling, and school psychologists' internal resolutions of potential cognitive dissonance as a result of labeling, is not yet fully understood. There is a pressing need to continue experimental examination of school psychologists' thoughts, feelings, and perspectives when assigning a disability label to a child, the processes used to resolve the presentation of cognitive dissonance, and the interplay between the two aforementioned facets relative to the application of disability labels to secure special education services and supports.

Specifically, research should be broadened to include school psychologists across a larger sample of the total population of school psychologists practicing within the United States. Stratification demographics should be extended to include an analysis of differences in labeling experiences across school psychologists from differing university training programs. School psychologists retired from the field should also be included in future research, pulling upon the wisdom gained from decades of servitude.

Although inherently increasing the complexity of analysis, research utilizing a mixed method model of experimentation, employing both quantitative and qualitative analyses, should be developed and researched to further triangulate findings, lending increased validity and reliability to the results posited to the field of education. Future research should also include examination of special education efficacy, comparing long-term student outcomes and efficacy of program impact between non-categorical systems of service provision (i.e., MTSS) versus the categorical model described within the present research. This level of analysis has the potential to provide an added element of

understanding to the broader educational system goal of a free and appropriate education for all students.

Concluding Statements

When taken in totality, school psychologists feel the very real pressure to take on the puzzle of navigating the myriad of internal experiences and external influencing factors to ultimately provide students and vested stakeholders with a pathway to increased student success. This drives school psychologists to identify students for special education under a disability label, as there are limited alternatives that yield the acquisition and implementation of effective student intervention.

Weighing the obscure benefits of service provision from a disability label assignment against the potential negative implication, while removing label responsibility and applying it to the broader system of education, school psychologists are able to continue to help students while not caving to an unbearable reality: school psychologist labeling may result in more harm than good. Although this assertion is impossible to experimentally study without a comprehensive, longitudinal study, the need is certainly clear.

As the findings show, school psychologists are not entirely sold on the current process of student evaluation resulting in disability identification and student labeling to open the proverbial doors to student support and specialized service provision. There is a necessity in the field of special education to examine the requirement to apply a disability label to secure services to meet student needs. It is an area of examination that beckons, if not mandates, further analysis. It is a school psychologists' duty to *first, do no harm*. Without honest self-reflection, and a persistent challenge to the systems-

level status quo, the current categorical system will continue without critical examination of efficacy. Armed with the expertise, knowledge, and skill-set necessary to design best practice programming for all students, school psychologists are educational specialists perfectly positioned and equipped to advocate for educational reform across a system designed to help children and adolescents.

Challenging Assertion

The researcher posits the following to fellow colleagues and scholars to reflect upon: If school psychologists considered the potential negative impact of a disability label during every single special education evaluation (which is a core component of the present zeitgeist of school psychologist practice), how would school psychologists effectively cope with the daily thoughts and feelings surrounding disability labeling (i.e., the constant awareness of the valid potential to impart harm to the student)?

Furthermore, if school psychologists considered the potential negative impact of a disability label during every single special education evaluation, how would they resolve the governing ethical duty to *first, do no harm* (APA, 2017)? This complicated paradox is rarely questioned due to the inherent challenges posed within the basic structure of school psychologist evaluations: disability labels ultimately result in special education funding allocation to school districts.

The implication of the presented findings is the fact that student labeling is directly tied to special education funding divided out to schools across Pennsylvania. Nationally, special education classification and identification is directly reported to each state's respective Department of Education to garner federal funding. The necessity of categorization to allocate and direct funds hinges upon student classification within

special education. Thus, a school psychologists' recommendation for disability labeling is inherently tied to the funding needed by school districts to operate special education budgets (IDEA, 2004).

Do we, as educational specialists, equipped with the knowledge and influence to effect meaningful change for students, allow this system to continue unchecked?

Or, do we build upon the current research to grow evidentiary support of systems-level reform that has the power to truly help students through strengths and needs-based programming without imparting harm to a child's sense of self and identity?

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Appendix A: Slippery Rock University - Informed Consent Letter

CONSENT TO PARTICIPATE IN RESEARCH**SCHOOL PSYCHOLOGISTS' PERSPECTIVES: A QUALITATIVE ANALYSIS
OF DISABILITY LABELING AND IMPLICATIONS**

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Invitation to be Part of a Research Study

You are invited to participate in a research study. In order to participate, you must be a School Psychologist certified by the PA Department of Education and have actively worked within public education for a minimum of 3 years.

Important Information about the Research Study

Things you should know:

- The purpose of the study is to examine school psychologists' thoughts, feelings, and perspectives on student identification to *open the door* for the provision of Special Education services while assigning a disability label. If you choose to participate, you will be asked to discuss your personal and professional thoughts regarding influencing factors when recommending student disability identification, and any resulting associated feelings about labeling a child with a disability. Participation includes a semi-structured interview between the researcher and participant. This will take approximately no more than 1 hour of your time.
- Risks and discomfort from this research are minimal. Minimal risk can be linked to the potential for electron data breaches within the email server.. Minimal discomfort from this research may include your time invested, as well as the discussion of dissonant thoughts or feelings within your role as a school

psychologist when recommending student eligibility for Special Education and the identification of a disability label.

- The study will directly inform school psychologists' practice, the process of recommendation for disability identification, and increased awareness of identification influences.
- Taking part in this research project is voluntary. You do not have to participate, and you can stop at any time.

Please take time to read this entire form and ask questions before deciding whether to take part in this research project.

What is the Study About and Why are We Doing it?

The purpose of the study is to gather qualitative input through semi-structured interviews to collect and analyze firsthand accounts of school psychology practice of disability recommendations for Special Education identification. Understanding *what* a school psychologist is thinking, *how* they are influenced during decision making, and *why* they make the recommended identifications will inform self-reflection and internal growth within school psychology practice, and has the potential to influence Special Education processes at large. The current research will also bring a salience to the potential influence imparted on the student by the recommendation of a disability label, yielding much needed conversation about the impact of disability labeling from the perspective of school psychologists.

What Will Happen if You Take Part in This Study?

If you agree to take part in this study, you will be asked to participate in a semi-structured interview with the researcher. I expect this will take approximately no more than 1 hour of your time. In the event that follow-up is needed to clarify or expand upon your input, a follow-up interview will be conducted with the researcher. I expect this will take approximately no more than a half hour of your time.

The semi-structured interview would be held in-person at your convenience, during a time and at a location of ease and confidentiality (e.g., my office, your office, a library conference room, etc.). In-person interviews are preferred, but tele-conferencing (e.g., phone-conference, Zoom virtual meeting, etc.) can be scheduled if this is more accommodating for the participant.

Examples of the type of questions that you will be asked include:

- Describe the thoughts or perspectives you experience when recommending a child's eligibility for a disability label.
- Tell me a bit about salient factors or influences, beyond federal and state qualifying/eligibility criteria, when determining eligibility under a disability label.
- Describe your personal feelings about short-term or long-term benefits or negative implications of the assigned label.

Your name will be substituted with a pseudonym to ensure confidentiality, and the district in which you work will not be identified. Emergent themes and patterns gained from the aggregated participant interviews will be reported within the completed research, available for your review upon university publication of my dissertation.

How Could You Benefit From This Study?

Your personal benefit when participating could be the opportunity to self-reflect upon your own practices within Special Education and student evaluation to determine eligibility for services and supports. Additionally, you'll be given the opportunity to provide feedback on a narrow niche within school psychologist practice not yet researched in the field of school psychology. Additionally, the semi-structured interview is an opportunity for you to provide first-hand feedback about your thoughts and feelings about the short-term and long-term application of the disability label to a child.

The broader goal of my research is to identify emergent themes and patterns regarding school psychologists' thoughts, feelings, and perspectives during diagnostic eligibility making specifically related to factors and influences beyond regulated eligibility criteria when assigning a disability label.

What Risks Might Result From Being in This Study?

The current research design can be considered falling within a level of incurring minimal risk and discomfort. Per SRU's IRB level of review, the current investigation falls under Expedited Review, as qualitative analyses of emergent themes and patterns will be gained via audio recordings of your semi-structured interview.

Risks: When conducting research with technology, there is always a potential for breach of confidentiality. This can occur if servers are hacked, emails sent mistakenly to wrong email addresses other than the intended recipient, or by leaving laptops or papers unattended by the researcher, allowing for wandering eyes to gain access to confidential information.

When conducting the research, you will not be directly identified when reporting data, as pseudonyms will be used to present all identified themes and patterns. School districts in which you work will also not be named to ensure you cannot be identified when direct quotes are cited in the findings to support the presentation of emergent themes and patterns.

Prior to scheduling our interview, the nature of the interview will be disclosed to you, allowing you to consider continuation within the study. Also, prior to interviewing, informed consent will be provided and reviewed with you. To ensure confidentiality and minimization of risk, I will take appropriate steps to protect your collected data and to minimize psychological discomfort.

Risks Mitigation: I will always guard confidentiality by directly monitoring security of the emails gained, and the audio recorder used. I will be using a secure email server when communicating with you. Upon recruitment, all original email correspondence will be permanently deleted from the email server. Email correspondence will be password protected. When conducting our semi-structured interviews, audio recordings will be password protected.

The typed transcription of our audio recording will be saved solely on an external hard-drive, which will also be password protected. When presenting qualitative analyses, your name will be substituted with a pseudonym when I report themes and patterns or direct quotes. School districts in which you work will not be named to ensure you cannot be identified when direct quotes are cited in the findings to support the presentation of emergent themes and patterns.

Discomfort Mitigation: Prior to our interview, I will prep you by explaining the intent of the study and the expected time investment. Additionally, I will prioritize scheduling of interviews, both time and location, to best suite and prioritize your scheduling needs.

I am also aware of the potential for minimal psychological discomfort which may be experienced by you when reflecting upon your own practices within education and student evaluations to determine Special Education eligibility. This will be mitigated by allowing for debriefing with you post-interview, providing you with time to ask your own questions or discuss impressions.

Although believed unlikely to occur when discussing your everyday professional practices: If I notice any signs of psychological discomfort during our interview, I will stop the interview to "check-in" with you to ensure you are 1) comfortable with the semi-structured interview questions and 2) are comfortable continuing the semi-structured interview. If either of the two aforementioned scenarios are **not** endorsed, I will offer to discontinue the interview at your discretion.

How Will We Protect Your Information?

I plan to publish the results of this study within my dissertation. To protect your privacy, I will not include any information that could directly identify you. Interviews will be audio recorded and securely stored on an external hard-drive with password protection. Pseudonyms will assigned to protect your confidentiality and anonymity. No identifiable information will be published within the dissertation to safe-guard and ensure your confidentiality.

What Will Happen to the Information We Collect About You After the Study is Over?

I will not keep your audio recorded interview until successful defense and publication of my dissertation. Your name and other information that can directly identify you will be

kept secure and stored separately from the audio recordings collected as part of the project. Email correspondence will be permanently deleted from the secure email serve. Interviews will be audio recorded, coded for themes and patterns, and then all audio files, will be deleted upon completion of the qualitative analysis and completion of my study.

How Will We Compensate You for Being Part of the Study?

Participation is completely voluntary, and there is no compensation for elective participation.

What are the Costs to You to be Part of the Study?

There are no costs to you for your participation in the study.

What Other Choices do I Have if I Don't Take Part in this Study?

If you choose not to participate, there are no alternatives.

Your Participation in this Research is Voluntary

It is totally up to you to decide to be in this research study. Participating in this study is voluntary. Even if you decide to be part of the study now, you may change your mind and stop at any time. You do not have to answer any questions you do not want to answer. If you decide to withdraw before this study is completed, all audio files will be recorded immediately.

Contact Information for the Study Team and Questions about the

Research

If you have questions about this research, you may contact:

Danielle Smyre, M.Ed., Ed.S., NCSP	Dr. Ashlea Rineer-Hershey, Ph.D.
Nationally Certified School Psychologist	Associate Professor
Ed.D. Doctoral Candidate	Spec. Ed. Doctoral Coordinator
Slippery Rock University	Slippery Rock University
570-850-1212	724-738-2460
drs1032@sru.edu	a-rinner.hershey@sru.edu

Contact Information for Questions about Your Rights as a Research

Participant

If you have questions about your rights as a research participant, or wish to obtain information, ask questions, or discuss any concerns about this study with someone other than the researcher(s), please contact the following:

Institutional Review Board
Slippery Rock University
104 Maltby, Suite 008
Slippery Rock, PA 16057
Phone: (724)738-4846
Email: irb@srp.edu

Your Consent

Before agreeing to be part of the research, please be sure that you understand what the study is about. We will give you a copy of this document for your records [or you can print a copy of the document for your records]. If you have any questions about the study later, you can contact the study team using the information provided above.

I understand what the study is about and my questions so far have been answered. I agree to take part in this study. I understand that I can withdraw at any time. You indicate your voluntary agreement to participate by emailing me directly at drs1032@sruc.edu or calling 570-85-1212, or the Primary Investigator, Dr. Rineer-Hershey at a.rineer-hershey@sruc.edu.

 Printed Participant Name

 Signature of Participant

 Date

By signing below, I indicate that the participant has read and to the best of my knowledge understands the details contained in this document and have been given a copy.

 Printed Name of Investigator

 Signature of Investigator

 Date

Audiotape Transcription Release Form:

We request the use of audiotape material of you as part of our study. Your voice recording will be transcribed, and we specifically ask your consent to use this transcribed material, as we deem proper, specifically for research qualitative analyses, professional publications, and professional presentations.

We also emphasize that the appearance of quotes, taken from your transcribed audio recorded interview, will be published in the final dissertation research, and potentially within future professional publications and professional presentations. This means that other individuals may use your quote. Regarding the use of your likeness in audiotape, please check one of the following boxes below:

☐

I do...

☐

I do not...

☐ Give unconditional permission for the investigators to utilize photographs/audiotapes/videotapes (specify which is used) of me.

 Printed Participant Name

 Signature of Participant

 Date

Appendix B: Informational Email Sent to Berks County School Psychologist Association



School Psychologist Perspectives on Disability Labeling



Your Participation is Needed!

Introduction:

- I am currently completing my dissertation to obtain Ed.D. in Special Education from Slippery Rock University, and working with Dr. Ashlea Rineer-Hershey, SRU's Special Education Doctoral Program Coordinator.

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What is the study about?

- The study examines School Psychologists' thoughts, feelings, and perspectives on student identification to *open the door* for the provision of Special Education services while assigning a disability label.
- This is an opportunity for you to voice your personal and professional thoughts regarding influencing factors when recommending student disability identification, and any resulting associated feelings about labeling a child with a disability.

Who can participate?

- I am seeking Berks County School Psychologists, certified by the PA Department of Education, who have actively worked within public education for a minimum of 3 years.

When and Where would we meet?

- Participation includes a semi-structured interview between the researcher and participant, lasting no longer than 1 hour.
- Tele-conferencing (i.e., zoom) interviews are a great option!
- The interview could be held in-person at the participant's convenience, at a location of ease and confidentiality (e.g., my office, your office, a library, coffee shop, etc.).

What about risks? Will anyone know I participated?

- Risks are considered minimal.

- All participant information will be kept confidential using password protected files. Names will be altered to pseudonyms to ensure anonymity. No identifying information will be reported in the dissertation that would lead to your identification. Interviews will be recorded and then deleted upon completion of the study. Participation is completely voluntary, and you may choose to discontinue the interview at any time.
- There is no compensation for elective participation.

How do I get involved?

- Call – Email – Text me any time!
 - (c)570-850-1212
 - drs1032@sruc.edu
 - dansmy@berksiu.org

Danielle Smyre, M.Ed., Ed.S., NCSP

Nationally Certified School Psychologist

SRU Doctoral Candidate

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Appendix C: Semi-Structured Interview

First Interview Script:

The following script will be read prior to beginning the first semi-structured interview with each participant:

“The goal of this interview is to reflect and report on your role as a school psychologist during eligibility decision-making, and to provide feedback not yet researched in the field of school psychology. The broader goal of my research is to identify emergent themes and patterns regarding school psychologists’ thoughts, feelings, and perspectives during diagnostic eligibility making specifically related to factors and influences beyond regulated eligibility criteria when assigning a disability label. Additionally, the semi-structured interview is an opportunity for you to provide first-hand feedback about your thoughts and feelings about the short-term and long-term application of the disability label to a child.”

Semi-structured Interview Questions:

- 1) Demographics:
 - a. Gender Identification or Prefer not to say:
 - b. Highest Conferred Degree:
 - c. Years of Experience:
 - d. SES Demographic of Employment (Rural, Suburban, Urban, Mix):
 - e. Primary student population served (Elementary, Middle, High):
- 2) Describe your role in a student’s Special Education evaluation.
 - a. Please explain a bit more about (follow-up to above).

- b. Tell me more about ... (follow-up to above).
- 3) Describe your experiences when evaluating students across all 13 disability categories.
 - a. (Follow-up) Do you have involvement with all disability category evaluations or just specific disability categories?
- 4) Describe the thoughts and/or feelings you experience when conducting an evaluation to determine a child's eligibility for a disability label.
 - a. Please explain a bit more about (follow-up to above).
 - b. Tell me more about ... (follow-up to above).
- 5) Describe the thoughts or perspectives you experience when recommending a child's eligibility for a disability label.
 - a. Please explain a bit more about (follow-up to above).
 - b. Tell me more about ... (follow-up to above).
- 6) Describe your experiences when recommending a child's disability label.
 - a. Please explain a bit more about (follow-up to above).
 - b. Tell me more about ... (follow-up to above).
- 7) Tell me a bit about salient factors or influences, beyond federal and state qualifying/eligibility criteria, when determining eligibility under a disability label.
 - a. Please explain a bit more about (follow-up to above).
 - b. Tell me more about ... (follow-up to above).
- 8) Please describe your thoughts about assigning a disability label to a child.
 - a. Please explain a bit more about (follow-up to above).

- b. Tell me more about ... (follow-up to above).
- 9) Do you view the disability label as necessary to open access to specialized services that would otherwise not be provided?
 - a. Please explain a bit more about (follow-up to above).
 - b. Tell me more about ... (follow-up to above).
- 10) Please describe your thoughts and feelings about the potential short-term or long-term impact of assigning a disability label.
 - a. Please explain a bit more about (follow-up to above).
 - b. Tell me more about ... (follow-up to above).
- 11) Please describe a time when you may have struggled with the decision to qualify and assign a disability label.
 - a. Please explain a bit more about (follow-up to above).
 - b. Tell me more about ... (follow-up to above).
- 12) Describe your personal feelings about short-term or long-term benefits or negative implications of the assigned label.
 - a. Please explain a bit more about (follow-up to above).
 - b. Tell me more about ... (follow-up to above).

Script Closing Statement to Semi-Structured Interview:

After completion of the interview, the following will be read to close the interview and set the preface for the potential to follow-up, as determined by analysis post-interview:

“Thank you for taking the time to speak with me today and sharing your personal thoughts, feelings, and perspectives. After reviewing our conversation today, I may potentially reach out to you. Some participants will be asked to provide a

brief follow-up interview at a later date to further elucidate intended meaning of interview answers. I encourage you to take some time to reflect upon what was discussed today, and if asked to meet again, report out any pertinent follow-up comments.”

Appendix D: Semi-Structured Interview – Follow-Up

Follow-Up Interview Script:

The following script will be read prior to beginning the follow-up semi-structured interviews with each participant:

“Thank you for meeting again with me today. I would like to follow-up on your specific responses to a few items during our prior interview. Based upon your prior reports, I wanted to touch base with you to add detail or clarification to [insert participant response].”

Semi-structured Interview Questions:

The following prompt will be used based to discuss specific responses gained from participants during the first interview:

“Please describe or explain a bit further what you meant or intended when you reported [...].”

Script Closing Statement to Semi-Structured Interview:

After completion of the interview, the following will be read to close the interview.

“Thank you for your time and openly discussing your thoughts in today’s follow-up. From the research conducted, the following has been identified as patterns and themes consistent across respondents. Do you agree or disagree with the emerging patterns and themes? If *yes*, please explain. If *no*, please explain.”

After conducting a qualitative analysis of interview content, emergent themes and patterns will be shared with each participant to allow for the opportunity to discuss, endorse, and/or deny themes and patterns identified by the researcher.

Appendix E: Hypotheses x Interview Questions Matrices

Table E.1.

Alignment of Interviewing Questions to the Targeted Hypotheses: Hypothesis 1

Hypothesis 1	Interview Questions
What are school psychologists' thoughts, feelings, and perspectives of assigning a disability label to a child?	<p>2) Describe your role in a student's Special Education evaluation.</p> <p>3) Describe your experiences when evaluating students across all 13 disability categories.</p> <p>4) Describe the thoughts and/or feelings you experience when conducting an evaluation to determine a child's eligibility for a disability label.</p> <p>5) Describe the thoughts or perspectives you experience when recommending a child's eligibility for a disability label.</p> <p>6) Describe your experiences when recommending a child's disability label.</p>

Table E.2.

Alignment of Interviewing Questions to the Targeted Hypotheses: Hypothesis 2

Hypothesis 2	Interview Questions
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What salient factors influence school psychologist disability identification beyond federal and state eligibility definitions/criteria?	<p>7) Tell me a bit about salient factors or influences, beyond federal and state qualifying/eligibility criteria, when determining eligibility under a disability label.</p> <p>8) Please describe your thoughts about assigning a disability label to a child.</p> <p>9) Do you view the disability label as necessary to open access to specialized services that would otherwise not be provided?</p> <p>11) Please describe a time when you may have struggled with the decision to qualify and assign a disability label.</p>
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Table E.3.

Alignment of Interviewing Questions to the Targeted Hypotheses: Hypothesis 3

Hypothesis 3	Interview Questions
If school psychologists experience cognitive dissonance when assigning disability labels, how is this cognitive process resolved?	<p>2) Describe your role in a student's Special Education evaluation.</p> <p>8) Please describe your thoughts about assigning a disability label to a child.</p>

	<p>9) Do you view the disability label as necessary to open access to specialized services that would otherwise not be provided?</p> <p>10) Please describe your thoughts and feelings about the potential short-term or long-term impact of assigning a disability label.</p> <p>11) Please describe a time when you may have struggled with the decision to qualify and assign a disability label.</p> <p>12) Describe your personal feelings about short-term or long-term benefits or negative implications of the assigned label.</p>
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Appendix F: Terms and Definitions

A Blueprint for Training and Practice III, '*Blueprints*' (NASP, 2006) - Coherent framework of school psychologist training, encompassing knowledge and skill application across ten domains of foundational and functional competency, which work, "in concert to achieve the broader aims of school psychology practice: improving student competence and building systems capacity."

Altruistic intent - the drive to help students gain whatever supports necessary to remediate skill deficits and make educational gains; internalized desire to "do good"

American Psychological Association (APA) – the governing body of all psychologists in the United States

Americans with Disabilities Act (ADA, 1990) - Federal civil rights law protecting the rights of students with disabilities who may not qualify for special education services or supports

Classical content analysis – text analysis of participant reports adding a count to emergent themes

Cognitive dissonance - internal divergence of co-occurring thoughts or "aversive affective states"

Cognitive dissonance resolution - internalized difference or dissonance in thoughts yielding psychological discomfort which must be resolved by the individual experiencing the psychological state

Constant comparison coding - text analysis of participant reports yielding themes

- Cost-benefit analysis – school psychologists’ constant consideration of what services, supports, and interventions will be provided with a disability label versus what will or will not be provided without a disability while simultaneously weighing that consideration against the long-term impact of a disability label upon a child’s development and education
- Deductive coding - Deductive analysis framed participant interviews within the context of the available research and the cited theories within the researcher’s literature review
- Diagnostic decision-making - school psychologists’ review of the available data when making a determination to qualify a child for special education services and supports
- Disability labeling/identification – school psychologists’ data based decision-making leading to a recommendation to the MDT to either qualify or not qualify a child under a disability category
- Disconnect from responsibility – internalized cognitive process of shifting responsibility from that of “self” to “system” level responsibility for potential negative outcomes experienced by students when given a disability label is recommended
- Domain analysis coding – coding of participant reports framed within cultural experience (e.g., school psychologist field of work)
- Emotional Disturbance (ED) – one of 13 disability categories under IDEA (2004)
- Ethical Principles of Psychologists and Code of Conduct (APA; 2017) – American Psychological Association professional ethics and codes of conduct governing the training and practice of all psychologists

Evaluation (ER)/ Reevaluation (RR) – IDEA defined process of evaluating/reevaluating a student to make eligibility recommendations for the intent of special education service provision

Every Student Succeeds Act (ESSA; 2015) - formerly titled No Child Left Behind; ESSA is the federal regulation which ensures student growth and increased transparency of educational performance at the state level, for all students

Free and Appropriate Education (FAPE) – legal right to special education programming, ensuring all students with identified disabilities receive a free and appropriate education to meet identified individual student needs (IDEA, 2004)

Gatekeeper feeling – school psychologists’ perception that special education service provision is reliant upon their recommendation to qualify a child for specialized programming

Grounded Theory – qualitative analysis approach that seeks to capture understanding of an identified group’s processes, experiences, and behavior, both adding and extending the knowledge base of a particular field of research

Individuals with Disabilities Education Act (IDEA; 2004) - The federal regulatory guidance delineating identification categories and qualifying criteria outlined in the federal education code

Inductive coding – using participant reports, a bottom-up coding process to extrapolate person-centered codes and themes

Intellectual Disability (ID) – one of 13 disability categories under IDEA (2004)

Mixed modality coding – process of qualitative analysis which blends inductive and deductive coding methods to formulate themes and cross-validates findings both within the findings and to the research literature base

Multi-disciplinary team (MDT) – the team of stakeholders vested in the educational welfare of a student and tasked with developing special education programming to meet a child's needs; common MDT members can include a mixture of the following: student, parent, general education teacher, special education teacher, school counselor, school nurse, building administrator, special education director, related service providers (e.g., speech/language clinician, occupational therapist, physical therapist), and school psychologist

Multi-Tiered Systems of Support (MTSS) – school-wide, systematic approach to assessing student levels, across academic and social/emotional/behavioral development, to measure student needs, gather benchmarking data, and target remediation of skills through research-based, tiered intervention

National Association of School Psychologists (NASP) – national professional organization which defines training standards, code of conduct, and professional guidance of all school psychologists

Other Health Impairment (OHI) - one of 13 disability categories under IDEA (2004)

Outside clinical evaluations – psychological or mental health evaluations conducted in the private sector, often provided to MDTs for consideration during the ER/RR process

Pennsylvania (PA) Chapter 22, Title 14 – Pennsylvania special education code, implemented under IDEA (2004); the code governing school psychologists in Pennsylvania, reflecting the 13 school-age disability categories under IDEA.

Performance gap – difference in student performance versus expected grade-level standards

Phenomenological Framework – framework guiding qualitative inquiry seeking to understand the first-hand accounts of individuals within an identified sub-group of a population (e.g., school psychologist perspective)

Predicted-difference discrepancy analysis model – one model of methodology used by school psychologists to determine student eligibility for special education solely under the identification category of SLD

Primum non nocere - “first, do no harm”; the APA standard of ethics school psychologists subscribe to, founded upon this conceptual basis (APA, 2017)

Process perspectives - School psychologist participant reports; viewpoint perspectives of the process of assigning disability labels to students

Professional Standards of the National Association of School Psychologists (2020b) – Professional ethics and codes of conduct developed by NASP

Purposeful sampling – Process for gaining a targeted sample using group demographic characteristics

Rationalization – Cognitive process school psychologists employ to resolve the immediacy of the presenting problem; school psychologists rationalize special education disability recommendations by emphasizing the potential immediate

benefit of the application of a label and detaching from the potential negative impacts imparted by a disability label

Related service provider – specialists in the field of special education who contribute to evaluating student strengths and needs to inform special education

programming; common examples can include a speech/language clinician, occupational therapist, physical therapist, orientation and mobility specialist, audiologist, teacher of the visually impaired, teacher of the deaf/hard of hearing

Response to Instruction/Intervention (RTI) – Similar to MTSS, school-wide, systematic approach to assessing student academic levels, to measure student needs, gather benchmarking data, and target remediation of skills through research-based intervention

Salient factors – pieces of information and data considered by the school psychologist during eligibility decision-making, and can include: student background information (i.e., medical history, vision and hearing screenings, absences/truancy, school attendance), personal demographics (i.e., culture, native language), trauma history, mental health, classroom performance, profile of achievement across grade levels, pre-post Covid performance, and stakeholder input (i.e., student perceptions, teacher feedback, parent insight).

School psychologists' internalized experiences - an awareness of their own personal perceptions and feelings during an evaluation, paired with the purposeful intent to act in an unbiased manner when conducting student evaluations to determine disability identification

Secondary Interview – follow-up interview with participants

Social Labeling Theory - drawn from the field of sociology and examines the broad impacts of “labeling” through societal processes of categorization of differentiation between groups (Fairbanks, 1992; Sack-Min, 2007; Thompson, 2012)

Social psychological phenomena - The impact of specific social psychology phenomena upon school psychologist general decision-making

Specific Learning Disability (SLD) /Learning Disability (LD) - one of 13 disability categories under IDEA (2004)

Stakeholders – vested participants involved in the MDT ER/RR process, tasked with determining, developing, and implementing special education programming

Standardized assessment scores – statistical scores gained from nationally normed assessments