

A disrupted life: A study of young people who experience Traumatic Brain Injury in higher education in the republic of Ireland.

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ABSTRACT:

The United National Convention on the Rights of Persons with Disabilities (UNCRPD) emphasizes the need for those with disabilities to be guaranteed full access to participation in society (United Nations, 2008). This rights-based approach in higher education foregrounds the importance of removing practical and attitudinal barriers within how institutions, or staff, interact with students with Traumatic Brain injury (TBI hereafter) that facilitate their access. This chapter summarizes the key findings of my PhD thesis where I use my unique positioning as a TBI survivor and status as a PhD student to gain deeper understanding of the experience of access for neurodiverse students in higher education. I contend that we can be marginalized in these settings. In this chapter, I argue for the importance of student voice in decision and policy making processes in higher education, aligning with 'nothing about us, without us' (Charlton, 2000). A blended methodology of autoethnography and phenomenology was used in my scholarship, which meant listening to the perspectives of students with TBI who often navigate the educational environment differently. Loss, change of identity and care are significant factors in shaping experiences. This research has much to offer as it uses the researcher's and participant's voices to transform rather than maintain the status quo regarding access for students with TBI. Inclusive education must place flexibility and diversity at its core and consider the person, when putting academic programmes and supports in place.

KEYWORDS:

Traumatic Brain Injury, Student Voice, Transformative theory and learning, Attitudes and disclosure, Care, Trauma informed practices

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1. Context

This chapter provides insight into the key findings of a PhD research project in which I provided an account of the lived experience of Traumatic Brain injury (TBI) and ensuing challenges regarding access to higher education in Ireland. TBI is defined as an insult to the head that “disrupts the normal function of the brain” (brainline, 2017a). It is not congenital in origin, and the consequences are dependent on the severity of impact and on the area of the brain affected (Sherry, 2006). People who experience neurological trauma encounter a unique blend of physical, cognitive, and affective impairments (Cloute, Mitchell, and Yates, 2008), with a range of diverse impacts that affect each person differently. It encompasses changes to one’s personhood, relations with others (family, friends, and professionals) and impacts their life trajectory.

Autoethnographic research will be discussed here. It does not claim generalizability, but rather considers the implications of lived experience for the broader environment of higher education. While studies have been conducted with post-secondary students with TBI in America (Kennedy, Krause, and Turkstra, 2008; Todis and Glang, 2008), there is a paucity of research with Irish students with TBI. While, currently, higher education policies advocate for inclusion, they are remarkably silent pertaining to students with TBI. This chapter illustrates an area and form of research that is rarely considered in educational settings. As far as I am aware, it is the first of its kind in an Irish context advocating for agency, empowerment, and inclusive education for TBI survivors, from the perspective of a lived participant. Pedagogy of hope, transformative theory and learning, data sources, findings, Implications for future inclusion research will be discussed in the following sections. Furthermore, the use of creative methodologies to access voices of individuals/groups that are often not heard will also be considered alongside authentic collaboration with people from marginalised communities.

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Pedagogy of Hope

Freire (2004) posits that “hope is an ontological need; it demands an anchoring in practice... One of the tasks of the progressive educator, through a serious, correct political analysis is to unveil opportunities for hope, no matter what the obstacles may be” (pp. 2-3). A pedagogy of hope is one of democracy and liberation that underscores the importance of listening to voices of the oppressed. Hooks (2003) further developed Freire’s ideas advocating for the development of hope through building inclusive and anti-oppressive communities, for example in third level environments whereby the relationship between teacher and student is one of mutual respect and dialogue. Relationships that prompt conversations that facilitate reflexivity, and dialogue are essential for a student with TBI to flourish. It is achieved through the recognition of one’s own and other’s personhood where all become active participants in generating action and hope. In effect, this means that inclusion is a matter for all involved in the educational endeavour in which a climate of inclusion is characterised by hope, possibility, and agency.

Transformative theory and learning

Transformation theory is built on humanistic and constructivist assumptions that focus on the individual (Cranton & Taylor, 2012) and on assumptions from critical theory that focus on the social environment. Transformative learning if facilitated via deep and critical reflection, both students with TBI and the educators they encounter have the possibility to transform their perspectives of how we work in higher education. Mezirow (1991) suggests that transformative learning develops out of cognitive disequilibrium or disorientating dilemma. Acquiring TBI causes an imbalance and change to a person’s functioning and experience of the environment around them. Persons who survive TBI can experience an identity crisis and such a disorientating dilemma can create many obstacles when learning in higher education, such as navigating past trauma, trying to manage the outcomes of TBI,

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negative interactions and their changed experience of themselves. These often pose obstacles for both student and teacher. A transformative learning educator recognizes the person, their TBI outcomes and considers learning from a neurobiological perspective. Through this lens, learning is seen as “volitional, curiosity based, discovery driven, and mentor assisted” (Janik, 2005, p.144). This approach resonated with my own experience where I experienced significant discomfort before understanding why and discovering transformative learning experiences in partnership with experienced and transformational supervisors. This aligned with the social emancipatory approach (Dirkx 1998), that considers the role of context and social change in transformative experience. This promotes a theory of existence that values one’s subjectivity and values the art of the possible in transforming our world so that it can become a more equitable place for all.

2. Research question

The research was based upon my lived experience and that of other third level students with TBI. My research investigated the challenges faced by us and the supports which facilitated our access in higher education. This chapter draws together insights gained from autoethnographic, empirical research and the extant literature with the aim to inform students, staff, educators, service providers and policymakers. I advocate that third-level education institutions need to incorporate more holistic experiences for students with TBI into the curriculum where teaching, and learning methods reflect meaningful inclusion.

3. Methods

This research was conducted within a phenomenological and constructivist framework. It was a transformative research methodology meaning that the voices of students with TBI were brought into the research planning and implementation. It comprised an autoethnographic approach and semi-structured interviews which was essentially transmethodological in design (Shiels, et al., 2021). It was

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“driven by the complex relations between the field, as well as complex methods, and theoretical approach” (Khawaja and Kouscholt, 2021, p. 4). The data were collected from a variety of sources such as medical records, self-reflective journal, interviews with my family, doctoral supervisors, and other students with TBI. The range of data sources and transmethodological design provided for different perspectives which developed deeper insight. This research was characterized by deep introspection and reflections on the experience of a person living with TBI. It was well suited to research this complex field and conceptualized access through constant reflection, as an embodied experience of living with TBI in higher education.

3. Findings of the research

Attitudes create hidden barriers for the inclusion of students with TBI, sometimes referring to stereotypes or beliefs that affect a person’s actions in a discriminatory way. Positive attitudes were associated with greater contact and the feeling of not being alone which served as great support in helping participants adjust. Things looked more positive through support, and this has potential for enhanced well-being for students. This suggests that support groups in third level could potentially enhance the well-being of students with TBI. However, the invisibility of brain injury meant that misperceptions were common, with one participant being perceived as drunk because of manifestations of fatigue and speech. Lack of awareness about TBI is a major obstacle to participation within society. A person often grapples with public assumptions and questioning of disability because it is not visible unlike for those who use a wheelchair. More awareness on the hidden aspects of disability is needed and particularly in the case of brain injury.

It is not easy for the participants acquiring TBI and living their day-to-day lives with less visible obstacles to well-being and participation. They require significant resilience to live with their brain injury. Deeper respect and understanding needs to underpin strategies on how best to support access and success for those with TBI and neurodiverse students in higher education.

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4. What did we as researchers/educators learn from engaging in this process?

Access for neurodiverse students is multi-layered, complex and concerned with physical, attitudinal, cognitive and curricular factors among others. Normative discourse and expectations within academia, allied with stringent accepted forms for quality scholarship, narrow paths for participation for divergent learners in higher education. Such inflexible expectations marginalise neurodivergent learners or those with different learning needs". Recognition of differences in brains as an element of diversity within societies' (Baker, 2011, p.3), and adoption of neurodiversity as the leading principle that informs institutional policy in higher education, would ensure fair opportunities to access this educational space.

My journey, along with those of the students who participated in my research evidence clearly that growth is possible after brain injury with the right supports, and that learning as a collaborative process was key to success. My experience illustrates the rehabilitative potential of higher education. Contrary to common opinion, growth does occur after brain injury. This growth is stimulated particularly when changes happen regarding one's sense of meaning, purpose, greater spirituality, and enhanced relationships (Kinsella, et al., 2015). Care is an important dynamic in their growth. As outlined by Noddings (1995), a type of teaching and learning that recognizes the affective nature of participation in education, one which supports collaboration can yield dividends. Loss because of TBI can serve as a catalyst for new forms of mastery. Education can provide rehabilitative opportunities for development of new skills through cognitive retraining and socialization that allow an individual with a brain injury to reconnect with the environment around them, and in some cases discover and adjust to changed abilities. However, current dominant ideologies in higher education are neoliberalism and performativity (Hodgins, and Mannix-McNamara, 2021), which counteract efforts spent on managing a condition like TBI and its effects, and often eclipse opportunities for success for TBI students by occluding potential contributions as future colleagues as they are precluded from success in the first instance. Higher education is the lesser because of it. Several

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dominant performative metrics constrain those with TBI such as the necessity to demonstrate productivity in the form of quantifiable outputs such as publications (in limited time frames), citations, and student evaluations (Brown and Ramlackhan, 2021).

The function of an education system that does not tailor to student needs effectively, means that those with neurodiversity who access it require strong resilience reserves. For instance, disability disclosure involves a delicate balance, and crosses personal boundary and yet must be endured in order to gain effective support. Students employ resilience to exercise their personal agency to navigate systems of support to meet their needs (Ungar, 2011, p.10). However, resilience reserves fluctuate, and the realisation of supports is not always guaranteed. Shevlin et al. (2004) identified the most significant barrier to progress for students with impairments to be attitudinal. Positive staff attitudes were demonstrated because of a personal interest in disability issues, instead of being the result of organisational culture, staff training or policies. Awareness differs between departments and mirrors lack of embedding of institutional support for students with disabilities, which may prevent them disclosing (Shevlin et al., 2004) or at the very least is an additional stress and at times an invasion of privacy in having to disclose. Denial of one's identity and trying to camouflage the outcomes of TBI can be a challenge as one may be tempted to think it will hinder career progression in academia making it difficult to be open because many people do not associate those who have sustained TBI with successful future academic careers illustrated in Shiels et al., (2021).

The social model of disability provides a model through which to reconceptualize the experience of students with TBI in higher education from a holistic perspective. The emergence of this model was a departure from the medical model of disability with its emphasis on impairment so as to place scrutiny "onto the role of disabling barriers in excluding disabled people from participation in mainstream society and denying their citizenship rights" (Barnes and Mercer, 2010, p. 1). Disability theorists Hughes and Paterson, (1997), suggest that with a social model, a more nuanced understanding of identity is required. The continued dominance of body/mind dichotomy within the

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social model ignores the subjective nature of personal experiences. Students with TBI often feel trapped in their personal experience, thus. their experience somewhat becomes disembodied. Hooks (1994) recognizes spirituality and emotion in teaching and fundamentally resonated with my position as a student with TBI. Influenced by the work of Greene (2005), a student like me can engage in imaginative and creative learning through arts-based pedagogy, such as poetry, storytelling, illustration, imagery. So too can it influence how we research with (not on) people with neurodiversity, through story, and expression of the human condition in all its guises. My research journey emphasises recognition of embodiment and emotion in teaching and supervision. This type of Holistic education is a broad approach to teaching where educators “must acknowledge the multiple dimensions of the human personality- physical, intellectual, aesthetic, emotional and spiritual- thus moving towards the perennial dream of an integrated individual living on a harmonious planet” (Singh, 1996, p. 227).

For truly inclusive education, educators should be concerned about the suitability of assessments for students with TBI and be more aware of the adversarial positioning and performativity that underpins much of academia. Graduate schools, head of departments and supervisors should be mindful of connections between individuals because supervision is inherently based on the supervisory relationship with a focus on the functional and personal support aspects of supervision. Neurodiverse students (especially those with TBI) may experience cognitive delay, therefore oral progression examinations can feel confrontational, argumentative and do not create an inclusive environment that facilitate student success. These types of examinations require presentation skills, multi-tasking, for instance power point, and question and on the spot answers in the moment. These can be problematic for those who have challenges with mobility, balance, speech, and speed of information processing. Trying to think about the questions being asked, while maintaining one’s balance is not always possible. Panel examinations can trigger deep levels of anxiety. A student’s level of self-awareness

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caused by the injury and feelings of anxiety make it difficult to flexibly apply some of the coping strategies developed to deal with examinations.

5. Implications for future research in Inclusion.

The data suggest the following areas for future research to make contributions to knowledge in inclusion. Drawing on the work of Mannix McNamara (2010), educative relationships that were characterised by care and respect proved empowering. These relationships can enhance the self-esteem and self-efficacy of a student with TBI through solidarity and collaboration with peers, lecturers, and supervisors, so that they can become “recognized as a person whose capabilities are of constitutive value to a concrete community” (Honneth and Farrell, 1997, p. 30). People with high self-esteem will reciprocate mutual acknowledgement of other’s influence and input to the community (Honneth, 1996), and this has great consequences for the higher education community, and access for diverse students such as those with TBI. This is congruent with the concept of the learning alliance, which shifts the focus from the individual student or supervisor and places focus on relationships of multiple actors across the university community involved in education and doctoral supervision (Halse and Bansel, 2012). Essentially, this outcome is premised on relational ethics of mutual responsibility of all those engaged in the organisation.

Trauma informed approaches require a paradigm shift at both the staff and organizational level and requires a restructuring of the college’s culture, practices, and policies (Krasnoff, 2015). A trauma informed higher education institution provides a safe, supportive, respectful environment where students are empowered and share leadership (Hoch et al., 2015). Students with TBI may feel connected, empowered and supported, thereby enhancing academic success. Trauma informed positive education (TIPE) model is advocated in this chapter as an approach to be adopted by educators and supervisors that could best address complexities of negotiating TBI, and the higher education environment successfully (Brunzell et al., 2016). The TIPE model aims to build regulation

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and relationship capabilities by increasing one's strengths to be better able to marshal cognitions and psychological resources (Brunzell et al., 2016). For example, repairing the regulatory abilities of a doctorate student with TBI is needed as part of participation in educational programs. It requires a level of emotional learning, and this necessitates cognitive flexibility that students with TBI cannot easily access.

A trauma informed approach supports universal design for learning (UDL). It is an approach to teaching that stresses being actively inclusive, instead of having to make adjustments in response to a student disclosing their needs because of a diagnosis to disability services (Burgstahler and Cory, 2008). Thus, a UDL informed approach, informs teaching, supervision practice and policies that recognise and support access for learners with TBI from the very beginning of the access journey. The social model of disability would suggest that people should not have their access limited because of their lived experiences of trauma. Institutional responses must be person-centered, flexible, appropriate, and inclusive towards those who have previously experienced trauma.

6. Use of creative methodologies to access voices of individuals/groups that are often not heard?

Giving voice to the lived experience of participant cohorts and adopting a pluralist lens is commensurate with approaches that acknowledge that no single truth exists or is valid (Rescher, 1993) and is particularly suited to situations where researchers engage with populations whose realities are ignored (Fayette and Bond, 2018).

A transformative paradigm underscores "that the agency for change rests in the community working side by side with the researcher toward the goal of social transformation" (Mertens, 2010, p. 8). Researchers who locate themselves within this paradigm contend that there are areas that require action and reform. Autoethnography is defined as "an autobiographical genre of writing and research that displays multiple layers of consciousness, connecting the personal to the cultural" (Ellis and Bochner, 2000, p. 739). It allows a person to write in a highly personalized style using his or her

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personal experience to extend understanding about a societal phenomenon (Wall, 2008). It is a way of writing through the lens of culture (Reed-Dahaney, 1997). This methodology is not only ways of writing “thick description” (Taylor, 2014, p. 15) of lived experience in the form, of arts-based expressions, dialectical, dialogical and metaphorical terms regarding the self within a specific context but it enables layers of analysis and deeper understanding for the researcher. In the same way as it facilitated my theorizing of my story, autoethnography could also be used to provide a more comprehensive account of the lived experience of other marginalized communities and in so doing offer the researcher deeper and transformational understanding.

7. Authentic collaboration with people from marginalised communities?

It appears logical for training for educators in trauma informed practices that involve core values of safety (physical and emotional), trustworthiness, choice and control, collaboration, and empowerment (Harris and Fallot, 2001). This understanding has also been expanded to recognize peer support, cultural, historical, and gender factors. Such practices include providing choices, being sensitive to family structures, recognition or at the very least awareness of significant anniversaries of traumatic events and providing relationship coaching (Krasnoff, 2015). Following this approach requires effort to move away from performative expectations of students to attend to understanding a student’s life and needs. Consequently, this cultural shift would allow faculty members, administrators, and staff to engage in teamwork, collaboration, flexibility, and creativity that lead to a deep understanding of the impact of trauma on the affective domain of learning. Awareness of trauma, understanding and empathy are some markers of authentic collaboration and are not beyond the bounds of good education.

Reflecting on my journey, a mentoring and coaching approach to my doctoral supervision facilitated a more person centred, and flexible approach to doctoral supervision. This approach provided a

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holistic style in understanding my participation. My supervision consisted of a combination of doctoral supervisors and an education support. This process of supervision was aided by my education support worker who had awareness of the complex and heterogenous nature of brain injury provided me with a more inclusive experience. They helped me navigate the relational and hidden aspects of the curriculum that previously I had experienced as barriers to my engagement within the social settings in the classroom. Similarly, the use of the personal assistant scheme can facilitate choice, control and empowerment for students with TBI in learning activities. Using this scheme is extremely beneficial for disabled people by supporting them to take control of their own support arrangements (Guldvik et al. 2014). Instead of being dependent on family, friends, or agencies, disabled people would be given financial support to employ PA's to facilitate their independence and support with nonacademic tasks in higher education. Aligning with an inclusive perspective, the development of care and empathy for and about diverse learners is urgently needed by providing opportunities to engage with others. Such interactions inspire the development of a positive belief system among them and affirmative attitudes towards inclusion (Scorgie, 2010).

8. Conclusion

This chapter draws together the insights from my research. Due to the subjective nature of this study, the insights and findings are not generalizable. Furthermore, a move beyond conventional methods of teaching and learning is argued for which includes trauma informed model education that embraces the subjective experiences of the participants and has the potential to enable students with TBI to navigate the terrain of higher education, so that educators and service providers are more aware of their needs. This chapter encourages educators and supervisors to consider the voices of these students in determining best practice in facilitating their participation and access.

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Supporting students with TBI to participate fully in these settings is an important structural feature that has received less than optimal attention within the Irish higher education community, except for some salient studies (Shevlin, and Banks, 2021; McCoy, Shevlin, & Rose, 2020; Young, Mannix-McNamara, and Coughlan, 2017). It is timely to continue to advocate for inclusion as there remains many of us whose journeys in higher education could be made more inclusive and empowering.

References:

- Baker, D. L. (2011). *The politics of neurodiversity: Why public policy matters*. Boulder, Co USA: Lynne Rienner Publishers
- Barnes, C., & Mercer, G. (2010). *Exploring disability* (2nd ed.). Cambridge: Polity Press.
- Brainline (2017-a). Facts About Traumatic Brain Injury. Retrieved from <https://www.brainline.org/article/facts-about-traumatic-brain-injury>.
- Brunzell, T., Stokes, H., & Waters, L. (2016). Trauma-informed positive education: Using positive psychology to strengthen vulnerable students. *Contemporary School Psychology*, 20(1), 63-83.
- Burgstahler, S. E., & Cory, R. C. (2008). *Universal design in higher education: From principles to practice*. Cambridge, Massachusetts: Harvard Education Press.
- Charlton, J. I. (2000). *Nothing about us without us: Disability oppression and empowerment*. Univ of California Press. USA.

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- Cloute, K., Mitchell, A., & Yates, P. (2008). Traumatic brain injury and the construction of identity: A discursive approach. *Neuropsychological rehabilitation*, 18(5-6), 651-670.
<https://doi.org/10.1080/09602010701306989>
- Cranton, P., & Taylor, E.W. (2012). Transformative learning theory: Seeking a more unified theory. In E. W. Taylor, P. Cranton, and Associates. *The Handbook of Transformative Learning* (pp. 3-20). San Francisco: Jossey-Bass.
- Dirkx, J. M. (1998). Transformative learning theory in the practice of adult education: An overview. *PAACE journal of lifelong learning*, 7, 1-14.
- Ellis, C., & Bochner, A. P. (2000). Autoethnography, personal narrative, reflexivity: Researcher as subject. In N. K. Denzin & Y. S. Lincoln (Eds.), *Handbook of qualitative research* (2nd ed., pp. 733-768). Thousand Oaks, CA: Sage.
- Fayette, R., & Bond, C. (2018). A systematic literature review of qualitative research methods for eliciting the views of young people with ASD about their educational experiences. *European Journal of Special Needs Education*, 33(3), 349-365.
- Freire, P. (2004). *Pedagogy of hope*. London: Continuum.
- Greene, M. (2005). Teaching in a moment of crisis: The spaces of imagination. *The New Educator*, 1(2), 77-80. <https://doi.org/10.1080/15476880590934326>
- Guldvik, I., Christensen, K. and Larsson, M. (2014). Towards Solidarity: working relations in personal assistance, *Scandinavian Journal of Disability Research*, 16(sup1), 48-61.
- Janik, M. D., & Daniel, S. (2005). *Unlock the genius within: Neurobiological trauma, teaching, and transformative learning*. Toronto: Row & Littlefield Education.

A disrupted life: A study of young people who experience Traumatic Brain Injury in higher education in the republic of Ireland.

- Kennedy, M. R., Krause, M. O., & Turkstra, L. S. (2008). An electronic survey about college experiences after traumatic brain injury. *NeuroRehabilitation*, 23(6), 511-520. Doi: 10.3233/NRE-2008-23607
- Khawaja, I., & Kousholt, D. (2021). Transmethodology: Creating spaces for transgressive and transformative inquiry. *Outlines. Critical Practice Studies*, 22(1), 1–21. Retrieved from <https://tidsskrift.dk/outlines/article/view/126190>.
- Krasnoff, B. (2015). A practitioner's guide to educating traumatized children. *Education Northwest*.
- Halse, C., & Bansel, P. (2012). The learning alliance: ethics in doctoral supervision. *Oxford Review of Education*, 38(4), 377-392. <https://doi.org/10.1080/03054985.2012.706219>
- Hoch, A., Stewart, D., Webb, K., Wyandt-Hiebert, M. A. (2015). Trauma-informed care on a college campus. Presentation at the annual meeting of the American College Health Association, Orlando, FL.
- Hodgins, M., & Mannix-McNamara, P. (2021). The Neoliberal University in Ireland: Institutional Bullying by Another Name? *Societies*, 11(2), 52. <https://doi.org/10.3390/soc11020052>.
- Hooks, B. (1994). *Teaching to transgress. Education as a freedom of practice*. New York: Routledge.
- Hooks, B. (2003). *Teaching community: A pedagogy of hope*. New York: Routledge.
- Honneth, A. (1996). *The struggle for recognition: The moral grammar of social conflicts*. MIT Press.
- Honneth, A., & Farrell, J. (1997). Recognition and moral obligation. *Social research*, 16-35. USA: The Johns Hopkins University Press.
- Hughes, B., & Paterson, K. (1997). The social model of disability and the disappearing body: Towards a sociology of impairment. *Disability & society*, 12(3), 325-340, <https://doi.org/10.1080/09687599727209>

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Mannix-McNamara, P. (2010). *Exploring the nature of teaching and learning: An explicit examination of the contribution of educative relationships to effective higher education pedagogy and the role of self- study in the development of teacher professional identity* [Doctoral dissertation, University of Limerick]. <https://hdl.handle.net/10344/2536>

McCoy, S., Shevlin, M., & Rose, R. (2020). Secondary school transition for students with special educational needs in Ireland. *European Journal of Special Needs Education*, 35(2), 154-170.

Noddings, N. (2015). A richer, broader view of education. *Society*, 52(3), 232-236. DOI 10.1007/s12115-015-9892-4

Reed-Dahaney, D. (1997). *Auto/ethnography: Rewriting the self and the social*. New York: Oxford University Press.

Rescher, N. (1993). *Pluralism: Against the Demand for Consensus*. Oxford: Oxford University Press.

Scorgie, K. (2010). Fostering empathy and understanding: A longitudinal case study pedagogy. In C. Forlin (Ed.), *Teacher education for inclusion: Changing paradigms and innovative approaches* (pp. 84–92). London: Routledge.

Sherry, M. (2006). *If I only had a brain: Deconstructing brain injury*. New York: Routledge.

Shevlin, M., & Banks, J. (2021). Inclusion at a Crossroads: Dismantling Ireland's System of Special Education. *Education Sciences*.11(4), 161-172.

Shevlin, M., Kenny, M., & McNeela, E. (2004). Participation in higher education for students with disabilities: an Irish perspective. *Disability & Society*.19(1), 15-30.
<https://doi.org/10.1080/0968759032000155604>

A disrupted life: A study of young people who experience Traumatic Brain Injury in higher education in the republic of Ireland.

- Shiels, T., Kenny, N., Shiels, R., & Mannix-McNamara, P. (2021). Incivility in Higher Education: Challenges of Inclusion for Neurodiverse Students with Traumatic Brain Injury in Ireland. *Societies*, 11(2), 60. <https://doi.org/10.3390/soc11020060>
- Shiels, T., Kenny, N., Shiels, R., & Mannix-McNamara, P. (2021). Transmethodology: an innovative research approach for inclusion studies for those with Traumatic Brain Injury. *Outlines. Critical Practice Studies*, 22, 304-340. <https://doi.org/10.7146/ocps.v22i.133195>
- Singh, K. (1996). *Education for the Global Society, in Learning: The Treasure Within, The Report to UNESCO of the International Commission on Education for the Twenty First Century*, pp. 225–22, Paris: UNESCO.
- Taylor, P. C. (2014). Contemporary qualitative research: Toward an integral research perspective. In *Handbook of Research on Science Education, Volume II* (pp. 52-68). New York: Routledge.
- Todis, B., & Glang, A. (2008). Redefining success: Results of a qualitative study of postsecondary transition outcomes for youth with traumatic brain injury. *The Journal of Head Trauma Rehabilitation*, 23(4),
- United Nations (2008). UN Convention on the Rights of Persons with Disabilities, United Nations
- Ungar, M. (2011). The social ecology of resilience: addressing contextual and cultural ambiguity of a nascent construct. *American journal of orthopsychiatry*, 81(1).1.1–17. <https://doi.org/10.1111/j.1939-0025.2010.01067.x>
- Wall, S. (2008). Easier said than done: Writing an autoethnography. *International Journal of Qualitative Methods*. 7(1), 38-53. <https://doi.org/10.1177%2F160940690800700103>
- Young, K., McNamara, P. M., & Coughlan, B. (2017). Authentic inclusion-utopian thinking? –Irish post-primary teachers' perspectives of inclusive education. *Teaching and Teacher Education*, 68, 1-11. <https://doi.org/10.1016/j.tate.2017.07.017>

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