(DE)HUMANIZATION AND (RE)EDUCATION: A CRITICAL CAREGIVERS NARRATIVE OF RESISTANCE TO IPRC POLICY AND PRACTICE

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A Research Paper submitted to the Graduate Program in Disability Studies in partial fulfillment of the requirements for the degree of

Master of Arts

Graduate Program in Critical Disability Studies

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Acknowledgements

Dr. G.P – Thank you for being so patient while answering the same questions repeatedly. Thank you for tempering me, making my experiences translatable, ethical and focused. This paper would simply not exist without your supervision. THANK YOU!

Dr. R.D.G—Thank you for encouraging me to stay true to my voice. Having you as an advisor has been the perfect compliment.

Dr. G.R—Thank you for writing the history that sparked my interest in Disability Studies. Thank you for your detailed and timely feedback, your openness in conversation, your complete lack of ego, despite all your successes. It has been a true privilege to be your student.

Dr. T.R, Dr. H.R, Dr. A.N, Dr. N.N—Thank you for always supporting me on my academic journey. You have always kept the lines of communication open. I appreciate you all, more than you know.

R.M & E.M – You are my heart, the loves of my life. I love you more than anything. Mamas always got you.

K.M —Thank you for our beautiful family. Thank you for building my confidence, making me louder. Maybe too loud. You held it down, so I could do this. I love you.

Mom & Dad – You've taught me unconditional love exists. You've always held us, even when we haven't been the best version of ourselves. Your relationship with my children is beautiful to witness. Thank you for being the world's most amazing parents and gramama and grampapa.

Uncle –Thank you for encouraging me and loving me, always.

R.F.J.M – through life, the birth of my children, illness, hospitalizations, weddings and LETTUCE, don't forget the lettuce! Thank you for accepting and even welcoming my chaos

M.H.E – Thank you for always holding me together. What would I do without your calmness and stability? You are the most thoughtful person; it does not go unnoticed. Please know how grateful I am to have you in my corner.

B.M – Thank you for literally packing my bag when I fell into a puddle of tears…twice. You've had my back and I'm so thankful we were able to move through this together. We did it!

G.M – Thank you for believing in my writing. You have given me the confidence to pursue this degree. You have always been the most supportive, even in the difficult moments. You are a treasure, and we are so lucky to have you.

S.R – Thank you for your constant support and making this happen.

M. I – You know the wildest versions of me and somehow, you're still here. We are two peas in a pod. You are one of the strongest women I know. Thank you for being my constant.

J. A – My loving, thoughtful and brilliant friend, we have a unique friendship—one built on reciprocity and understanding. Our bond just flows. The space we hold for one another is never taken for granted.

N. H – Thank you for picking up the phone the phone that day, and many after. I am thankful for you in ways I could never fully articulate. The community is so lucky to have you, my dear friend.

JL & VV – Thank you for giving me access to my son's beautiful mind. Thank you for willingness to share Deaf culture and ASL. We have found yet another incredible community.

D. T—Thank you for caring for my son in my absence, restoring some of my faith in public education. Thank you for building his skills, confidence and holding him accountable (I know it's hard!). You see the value in his presence, not only the impact on him but on his peers. Thank you for demonstrating true inclusion, in praxis. We will be forever indebted.

N.H, H.W, R.A—Thank you for pulling me out of my head, the patios and fires. Thank you for your friendship, support and encouragement. Thank you for loving my children so deeply. I will always have you and yours. Still considering my J.D, because without a doubt, we will need it at some point.

Abstract

Based on my observations, Identification Placement and Review Committee processes can be inconsistent, dehumanizing and inaccessible to caregivers and students. Using autoethnography, I analyzed my personal experiences navigating a large board in Southern Ontario on behalf of my son, to illustrate the human implications of current IPRC policies and procedures. In addition, a Critical Discourse Analysis (CDA) was conducted of *The Education Act* as compliment to my narrative experiences. More specifically, textual analysis examined power relations and ideological text. My primary research questions explored the role of the IPRC in the organization of resources and the impact on the education experience of children with disabilities. My secondary research questions examined how current IPRC policies and procedures perpetuate eugenic/colonial ideologies, how organizing children by perceived ability results in harm and the immediate and long-term impacts of ability-grouping, segregation and limited resources for students with disabilities. My theoretical frameworks included Critical Race Theory (CRT), Disability Studies in Education (DSE) and Reform Framework. First, CRT guided my analysis of streaming practices and methodologically, by way of source selection. Second, DSE, incorporating Critical Disability Theory, applied a social justice lens and is specific to the educational context. A reform framework assisted in the construction of a bottom-up approach to reforming (or dismantling) the IPRC process and special education. Results identified four major themes in relation to IPRC policies and procedures, which are as follows: (1) institutional dominance; (2) inconsistent application (3) non-compliance and discrimination and (4) lack of accountability.

Introduction

From the moment my son entered the public education system, his safety, humanity, dignity and access to education has been threatened. This has required persistent activism, as I continue to run interference in attempts to mitigate institutional harms. All this while parenting, working, pursuing further education and managing my own chronic illness. But this is not new. In my experience, institutions, such as education and healthcare, have been insidious, negligent and relentless in their execution of destruction and extermination, particularly in their response to my son and his diagnosis of Down syndrome (DS). Though not all experiences have been negative, due to some very compassionate and dedicated professionals, the overarching laws and policies have at times, been devastating. Predicated on eugenic and colonial ideologies, healthcare systems were designed to not only selectively sustain life but eradicate non-conformity. For example, the selective termination of pregnancies testing positive for Down syndrome persists to this day (PSO, 2026). The attempted eradication of my son and his community, affects all institutions, in the form of their absence. Selective termination, predicated on eugenic ideologies, render their lives not worth living, which has resulted in a significant reduction of the DS population (de Graaf et al., 2025). In the education context and in my experience, this lack of interaction, has exacerbated the harms perpetrated against my son. For example, discriminatory attitudes have resulted in repeated attempts to stream him into self-contained classrooms.

Structural exclusion *denies* access, rights, humanity and life; its injury distilled through institutions, such as healthcare, education, among others (Mollow, 2006; Federal/Provincial/Territorial Ministers Responsible for Social Services, 1998; Stienstra, 2020). The execution of which, almost cost us our son. A rectifiable heart “defect,” persisted under the

conditions of our healthcare system, leaving him in heart failure for the first couple years of his life, until another severe illness almost took him from us. Only after persistent advocacy on our son's behalf, were we able to exit those hospital doors 97 days later, with gratitude but holding on to agonizing trauma and in a state of perpetual fear. What will happen when we're no longer here? Our beautiful boy, loved not only by his family, but friends and community members, his impact almost completely extinguished. E's heart condition, unrepaired surgically, despite an excellent prognosis, lead to severe heart failure, symptoms of which were at times, attributed to his genetic condition, left unaddressed to become life threatening. A deep injustice, that extends, bleeds and spills onto all those that love him. This is all to say, the fight has been long, in his short time on this earth. However, he is not the only one and disability, or constructions thereof, is not the only reason the value of some human lives are diminished. Race, sexuality, class, etcetera, establish intersections of oppression, which not only initiate but can compound and perpetuate systemic inequities, but not passively, or without subjectivity, as we learn from civil rights movements and activist groups, such as the Black Panther Party (Schalk, 2022), Self-Advocates Becoming Empowered (SABE) (SABE, n.d.) and parent advocates (Carey et al., 2020), to name only a few. In borrowing from the activists that came before us, we can see that institutions, such as healthcare, law enforcement and education, can be detrimental to human life and require immediate restructuring.

Navigating the board on behalf of my son has been constant and all consuming. Though activism has evolved into a passion, my engagement with education has negatively impacted many aspects of my life, most notably my health and relationships. I fear I have become unrelatable and after this year, I'm not quite sure who I am outside of this world. The privilege, or rather illusion, of comfort and security, no longer exists. I live in a space of anticipation,

preparing for the inevitable consequences of ableism in education (Parekh, 2022). For example, the current conditions of our public education system, particularly the extreme resource deficit, has led to the denial of essential resources, impeding not only my son's access to education but his safety as well. In addition, discriminatory attitudes toward children with disabilities has resulted in repeated attempts to segregate my son. One of the most difficult experiences has been navigating the Identification Placement and Review Committee process.

As such, through autoethnography, this paper will incorporate my personal experiences navigating a large board in Southern Ontario, on behalf of my son, to illustrate the human implications of current Identification Review Placement and Review Committee (IPRC) policies and procedures. In addition, a Critical Discourse Analysis (CDA) will be conducted of *The Education Act* as compliment to my narrative experiences. More specifically, textual analysis will examine power relations and ideological text, particularly how this unequal power dynamic positions parents/students. My primary research questions will explore the role of the IPRC in the organization of resources and the impact on the education experience of children with disabilities. My secondary research questions will examine how current IPRC policies and procedures perpetuate eugenic/colonial ideologies, how organizing children by perceived ability results in harm and the immediate and long-term impacts of ability-grouping, segregation and limited resources for students with disabilities. My theoretical frameworks include Critical Race Theory (CRT), Disability Studies in Education (DSE) and Reform Framework. First, CRT will guide my analysis of streaming practices and methodologically, by way of source selection. Second, DSE, incorporating Critical Disability Theory, will apply a social justice lens throughout my analysis and is specific to the educational context. A reform framework will be used to construct a bottom-up approach to reforming (or dismantling) the IPRC process and special

education. This work is situated in my experience as an activist navigating the board on behalf of my son.

Methods

Research Questions

Primary Research Questions:

1. What role does the IPRC process play in the organization of resources?
2. What potential impact does the IPRC have on the education experience of children with disabilities?

Secondary Research Questions:

1. How are colonial/eugenic ideologies presented and/or executed in IPRC policies and procedures? My research will examine a large board in Southern Ontario as an example.
2. How might the practice of organizing students by perceived abilities result in harm for children with disabilities?
3. What are the immediate and long-term impacts of ability-grouping, segregation and limited resources for students with disabilities?

Autoethnography

What is Autoethnography?

According to Cooper and Lilyea (2021), autoethnography is “a unique qualitative methodology that draws upon several qualitative traditions, including narrative research,

autobiography, ethnography, and arts-based research" (p. 197). Autoethnographers systemically analyze their personal experiences, connecting their stories to the broader cultural context (Cooper & Lilyea, 2021). Ellis et al. (2011) argue, it "is one of the approaches that acknowledges and accommodates subjectivity, emotionality, and the researcher's influence on research, rather than hiding from these matters or assuming they don't exist" (p. 274). As such, this method counters the myth of positivism, which often functions to reproduce and represent the colonial "white, masculine, heterosexual, middle/upper-classed, Christian, able-bodied perspective" as *the* one truth (Ellis et al., 2011, p. 275). This position invalidates "other ways of knowing" and adheres to hegemonic discourses, reinforcing existing hierarchies through the perpetuation of epistemic injustice (Ellis et al., 2011, p. 275).

Similarly, Tullis Owen et al, (2009) argue, "truth is *not* an appropriate criterion for evaluating life texts" (p. 181). But *what* is truth? Memory, they claim, is correlated with autoethnographic authenticity but "it is partial, fleeting, subject to our positioning," leaving authors to fill-in-the-blanks for the sake of cohesivity, as Poulos notes (Tullis Owen, 2009, p. 190). Further, Devika Chawla argues, "you can't really recreate because when you recreate or when you think you are recovering a memory, you are really reexperiencing" (as cited in Tullis Owen, 2009, p. 190). Bruner sees this as opportunity for flexibility in our storytelling. Denzin says truth is impossible due to "temporal contagion," which is the "possibility of using current circumstances to understand past experiences" (Tullis Owen et al., 2009, p. 186). Tullis Owen et al. (2009) use Denzin's example of trying to reconstruct a scene from 1958/1959 through the "lens of a kid" (p. 185), which relies more on artistic expression than accuracy. In conclusion, the authors argue, "telling the truth is not always the ethical thing to do because choices of the truth

affect writers, readers and communities. With life writing, truth telling is a messy, risky endeavor" (Tullis Owen et al, 2009, p. 194).

Carolyn Ellis' (2007) work recounts issues of relational ethics by re-examining past projects. She references her student's discomfort having read her story about her experience as a caregiver to her elderly mother. Though she describes *Maternal Connections* as a "loving tribute," she explains her "reluctan[ce] to show [this] piece to her Mom before [she] published it" due to the elaborate descriptions of her mother's body (Ellis, 2007, p.18). Ellis (2007) defines relational ethics as "recogniz[ing] and valu[ing] mutual respect, dignity and connectedness between researcher and researched, and between researchers and the communities in which they live and work" (p. 4). Though carefully differentiated, I would argue the lines between researcher and researched are quite blurred, particularly when telling our own story. As many autoethnographers have noted in the past, our stories can't be isolated, they are deeply *intertwined* with, and *affected* by, the stories of others, in some cases, those we love. This prompts Ellis to ask, "what are our ethical responsibilities toward intimate others who are implicated in the stories we write about ourselves?" (p. 5). In response to Ellis' crucial question, my ethical responsibilities remain wholly accountable to my intimate others, which in praxis resembles deference, where possible, and/or the elimination of details I perceive to be sensitive or consequential. With that said, it is important to note that this analysis is limited to my own *perception*, which is particularly relevant when I narrate my experiences with my son.

Why Autoethnography?

There is an abundance of research that critically interrogates educational policies and procedures, using a variety of analytical methods, that critique current practices and reveal significant systemic inadequacies. However, nothing quite matches the intensity of my

experience navigating public education on behalf of my son. Therefore, this paper will attempt to reveal the human ramifications of the significant and irreversible harms inflicted upon our children and the internalization of *feelings* that wreak physiological havoc on our bodies—the kind you hold. The resulting resentment and hostility can overflow and when mismanaged, the consequences of a violent colonial system can extend to personal interactions—sometimes perpetrated against those you love the most. Above all, I hope to reveal the exhaustion of a mother, continually running interference, in attempts to reduce/mitigate these harms, fuelled by an unremitting love for her son.

Therefore, I call upon narration and poetry as a method to *reexperience my* truth*(s),* prioritizing artistic expression over accuracy (Tulis Owen et al., 2009). I proceed with an understanding of *temporal contagion* as way to understand my story differently than I did before, create new meanings (Tulis Owen et al., 2009). With that said, I am committed to *conceal* certain *truths* for the sake of the actors implicated in my story. Not just redacting personal details as promised to the Delegated Ethics Committee, but a form of *relational ethics* situated in a moral grounding that prioritizes personal relationships and carefully considers future implications (Ellis, 2007). As such, this r*eexperience* may require the elimination of relevant details or complete repression. A recognition and practice of Mom first, researcher second. I promise to disentangle the dichotomy of protect and defer, acknowledging the fluidity of process. I accept that my *reconstructions* are not representative of my sons' experiences. Thus, I commit to retracting, deferring and *retelling*, should that ever be his wish.

Critical Discourse Analysis (CDA)

Critical Discourse Analysis (CDA) will allow me to examine power relations embedded in legal and procedural text, which will complement and further contextualize my experiences

navigating the board on behalf of my son. “Texts as elements of social events have causal effects—i.e. they bring about changes,” however, Fairclough (2003) specifies that the effects are not necessarily direct, but interpretive and of multiple meanings (p. 8). One of the most prominent concerns of CDA are ideologies, which are defined as “representations of aspects of the world which can be shown to contribute to establishing, maintaining and changing social relations of power, domination and exportation” (Fairclough, 2003, p. 9). Essentially, ideologies are active representations or “modalities” of “power relations” that can extend through discourse (Fairclough, 2003, p. 9). An ideological text is determined by its impacts on people’s beliefs and their contributions to power relations. CDA can reveal the explicit and implicit meanings via critical questions. It is of note that no textual analysis is objective, bias begins at the selection of the text and therefore, no matter how comprehensive, textual analysis is never complete (Fairclough, 2003).

A CDA will be conducted of The Education Act and Ministry of Education’s categories of exceptionalities as it pertains to the IPRC process. The following questions will assist in identifying themes and guiding my analysis:

1. Who is/are the author(s)?
2. What is the context?
    a. For example, in the case of the Education Act, do other documents have legal primacy over the Education Act?
        i. If so, does the Education Act fulfill their legal obligation to presiding laws/codes? Is the text assumptive, in what way and how?
3. Who does the text benefit?
4. What kind of language does it use?

   a. Does it use active/passive verbs (Fairclough. 2003)?
   b. Does it affirm/deny disability identity?
      i. What are the potential impacts?
   c. Is it rooted in historical processes of colonialism and eugenics?
   d. Does it operate within a specific Disability Studies framework (i.e. Social, Medical, Human Rights Model, Eugenical Model, etc.)
5. What are the implicit/explicit meanings?
6. What information is included/absent in the text
7. Does the text affect power relations?

In answering these questions, I hope to further my understanding of the laws, policies and procedures that govern the IPRC process, which will not only compliment the results of my autoethnography but also strengthen my parental engagement with the IPRC process. Textual analysis of *The Education Act* will maintain the focus on the systemic inadequacies prevalent in public education. In addition, understanding very generally, *how* laws and policies are established and by *who*, will allow me to locate potential power differentials, particularly in relation to whose interests these texts (pre)serve. I can interrogate potential connections between the abovementioned text and historical/current practices of eugenics more cohesively, as well as the impacts on disability self-identity and the organization and distribution of disabled bodies in public education, more broadly.

Theoretical Frameworks

Critical Race Theory (CRT)

Delgado & Stefanic (2023) refer to CRT as a "movement" consisting of "activists and scholars engaged in studying and transforming the relationship among race, racism, and power" (p. 3). Described as similar to "civil rights and ethnic studies discourses," the reach of CRT is "broader," extending to "economics, history, setting, group, and emotions and the unconscious" (Delgado & Stefanic, 2023, p. 3). The origins of which are attributed to early writings by "Derrick Bell, Alan Freeman, and Richard Delgado," borrowing from philosophical theories, "critical legal studies and radical feminism" (Delgado & Stefanic, 2023, p. 4-5). It recognizes "injustice," (Leavy, 2023, p. 145) racism as implicit/concealed, hierarchization privileging white bodies and race/races as socially constructed (Delgado & Stefanic, 2023).

This theory will be particularly useful in my analysis of streaming practices, as previous research has consistently demonstrated that "Black, Indigenous, and Latinx students" are overrepresented in special education classrooms (Parekh, 2022, p. 46; James & Parekh, 2021). According to Parekh, academic streaming is a "prominent ability based strateg[y] public schools use to organize student learning" and is usually "discussed as a consequence for poor performance, work ethic, or competency toward academics, in general" (2022, p. 7). CRT will assist in the deconstruction of IPRC text to identify potential discrimination in discourse, practice and educational outcomes. Methodologically, it will be employed during the selection of scholarly sources, in attempts to circumvent the overreliance on white scholarship (Delgado & Stefanic, 2023; Leavy, 2023; Bell, 2006). In borrowing from this theory, I hope to prevent the "whitewash[ing] [of] disability history, ontology and phenomenology" and thus, the reproduction of "White Disability Studies" (Bell, 2006, p. 275).

Disability Studies in Education (DSE)

DSE is a "field of study that uses critical disability theory to examine education-related practices, structures and student outcomes. Critical disability theory explores how disability is constructed and understood in relation to political, economic, social, historical and environmental factors" (Parekh, 2022, p. 11). An interdisciplinary social justice framework combined with "educational practice" provides the foundation for DSE, allowing us to examine how the conditions of public education construct/shape the experiences, outcomes, identities, and overall well-being of disabled students (Parekh, 2022, p. 11). In addition, this framework highlights the intersections of multiple oppressions and identifies ableism as having "the potential to harm all students, not just disabled students" (Parekh, 2022, p. 11). In combination with CRT, DSE will act as a practical guide to examine IPRC policies and procedures through an educational lens. DSE will aid in identifying potential institutionalized ableist discourse and assist in "reenvisioning education and schooling" (Parekh, 2022, p. 11).

Educational Reform Framework

Aldridge and McClure (2023) differentiate between "educational reform, educational change and school improvement" (p. 487). Educational reform is defined as a "system-wide improvement effort (which included across a district or state) initiated by policymakers to overcome an issue or challenge" (Aldridge & McClure, 2023, p. 487). The authors indicate most reform directives are "top-down" (Aldridge & McClure, 2023, p. 487). Educational change is the tangible and often measurable result of reform efforts, or evidence of a structural response. School improvement refers to "school-level factors and processes that promote school success" (Aldridge & McClure, 2023, p. 487). The term "school improvement" is rather vague but tends to be reduced to academic rigour and achievement (Aldridge & McClure, 2023). It is important

to note that I repudiate this definition of school improvement due to its consequential, ableist foundations and functionalities. Reform frameworks remain variegated in their objectives, though I would argue this may be attributed to Aldridge and McClure's (2023) claim that many studies fail to explicitly define the concept.

The authors note that "implementation [of educational reform] is not linear" and identify themes/subthemes that "facilitate or hinder reform efforts" (Aldridge & McClure, 2023, p. 494). First, the "school climate" should have a "shared vision" amongst teachers, leaders and staff, high expectations related to the execution of reforms, "positive, trusting relationships" amongst staff and a "collaborative environment" with a "commitment to co-teaching practice" (Aldridge & McClure, 2023, p 496-497). Second, the plan must include a "comprehensive school plan" with realistic implementation timelines allowing for thoughtful "analysis and reflection" (Aldridge & McClure, 2023, p. 498). Third, "planning for change" involves supporting implementation processes at the school-level and "clear communication of the goals" (Aldridge & McClure, 2023, p. 499). Lastly, "building capacity" requires "ensuring understanding," as well as "model practice and mentor[ing] teachers" (Aldridge & McClure, 2023, p. 499).

I plan to envision an IPRC reform framework that operates from the bottom-up via co-construction, relationship building and community consultation (i.e. students, school administration, teachers and parents), beginning with those most affected—students accessing special education. For example, how do we work to dismantle a system that categorizes and streams according to ability, preserving existing racial, gender, sanist, ableist hierarchies? How do we de-center and de-stabilize the role of special education 'experts' in categorizing and distributing our children according to perceived educability? How do we implement a children's rights framework that recognizes *all* children as capable active agents? Incorporating CRT and

DSE, I will imagine ways we might consider the construction of a more comprehensive, representative and student-centred definition that measures overall wellbeing. Though my study is specific to IPRC processes and procedures, "school improvement" provides the overarching framework that determines the success of all school practices. As such, all community members must consider re-defining our goals.

Literature Review

This literature review will open with a brief explanation of eugenics and current practices of prenatal screening and the attempted eradication of DS, as distinct. In my opinion, this is necessary to understand the DS community's absence and thus, the impact on current accommodation procedures in public education. This structure, I hope, will provide the reader with the foundation to examine the formation of the board and initial streaming practices, which previous scholars have connected to the institutionalization of people with intellectual disabilities. I will then proceed with a description of the IPRC process and more recent literature analyzing IPRC policies and procedures.

Eugenics

Withers (2024) describes eugenics as "the belief that human evolution can be directed by increasing the breeding of the people who are considered the most desirable – the "fit" –and decreasing the breeding of those who are considered the least desirable – the "unfit" (p. 29). Developed by Sir Francis Galton in the late 1800's, this practice was predicated on the theory of biological determinism, attributing inferiority to inadequate genetics (Withers 2024; Parekh, 2022). Constructs of the "undesirable," deviant, "unfit" body were informed by the historical

context, which included “those who are considered disabled today, along with indigenous people, racialized people (which includes but isn’t limited to BIPOC people), 2SGLBTQI+ people, poor and working-class people” (Withers, 2024, p. 29-30). It was believed that the sterilization and eradication of these bodies would result in a ‘superior’ race, unencumbered by the ‘inherency’ of social problems. Eugenics, indoctrinated with the hegemonic dogmatisms of settler colonialism, would go on to unrepentantly advance the erasure of cultures and human beings through imperial methods of hierarchization, assimilation, forced sterilization, land seizure, harm, violence and genocide (Withers, 2024; Ineese-Nash, 2020).

After the “marginalization of eugenics,” current practices are often executed through the medical model, which positions disability as an “individual tragedy and as based within the body” (Withers, 2024, p. 16). For example, Enhanced first trimester screening (eTFS) is publicly funded in Ontario. Involving a combination of a blood test and ultrasound, it detects the *likelihood* of Trisomy 21 (Down syndrome) and Trisomy 18 (Edward’s syndrome) between approximately 11 to 13 weeks of pregnancy (PSO, 2026). Alternatively, Panorama Non-Invasive Screening Testing (NIPT) is of higher accuracy and has expanded detection to include Trisomy 13 (Patau syndrome). NIPT is publicly funded *if* specific eligibility criteria are met (PSO, 2026). According to Prenatal Screening Ontario (PSO), the NIPT detects 99% of “pregnancies with Trisomy 21,” compared to 94% for Trisomy 18 and 74% for Trisomy 13 (PSO, 2026, para. 7). It is important to note that *diagnostic* testing (i.e. amniocentesis, etc.) has been available for longer, but these methods are considered invasive and carry more risk. Some families may decide to pursue diagnostic testing after prenatal screening results indicate a higher likelihood of a genetic condition.

The PSO has made attempts to provide more balanced information regarding DS by including a statement from the Canadian Down Syndrome Society (CDSS) and providing links to local DS networks. However, some information remains tainted by negative sentimentality, such as the quote provided under the “limitations to prenatal testing” below.

> “Some health concerns can be seen through ultrasound before the baby is born. However, it is *not possible to know all the health challenges and abilities* a child with trisomy 21 will have. *In the same way, we cannot predict how a family will cope with raising a child with this condition* [emphasis added]." (PSO, 2026, para 10).

How a family copes with raising *any* child is unknown. This statement, though seemingly neutral, implies that raising a child with DS is inherently difficult; that ability to cope can be negatively impacted by a diagnosis disparaged by the hierarchy of health and ability. The content and delivery of diagnostic information is incredibly influential and can impact decisions related to selective termination. The exact number of selective terminations due a “positive” (eFTS) or “high risk” (NIPT) result for DS is unknown, however, de Graaf et al. (2025) found that the “percentage of live births of babies with Down syndrome reduced as a result of screening and terminations has risen in Canada over the past 40 years to 54% in 2020” (p. 2). In other words, “there were 54% fewer babies with Down syndrome than could have been born in Canada, if not for elective termination” (de Graaf, et al., 2025, p. 2).

How does this impact education?

The purpose of this section is not to discuss my personal views on prenatal testing or selective termination, rather I want to bring your attention to its impact on DS, specifically. As previously mentioned, prenatal testing is most accurate in screening for DS. We also know that

selective termination has reduced the number of live births of babies with DS and consequently, the overall DS population in Canada. Offering selective termination, implies that certain lives are not worth living. This position is extended to families; constructions of disability as contamination—reducing the life quality of all members. This is particularly evident with the PSO quote regarding "coping." These eugenic ideologies permeate our institutions, *all* institutions—purposed to remove, reduce and eradicate bodies—like my son.

If our children are constructed as not worthy of life, simply due to a diagnosis, how does this impact views of *educability*? Current practices of eugenics (i.e. selective termination) have eradicated approximately half of my son's potential community members. Their absence serves as justification for decreasing support and accommodation. In other words, due to prenatal testing and selective termination, Down syndrome can be eradicated—their births obstructed and prevented—therefore alleviating the institutional responsibility to respond to educational accommodation and support needs. This differing from the way public education provides for more common diagnoses, such as Autism, albeit still problematically. For example, Autism is listed as a subcategory under "Communication" in the categories of exceptionality. The IPRC is the process by which students are identified (or not) under a category of exceptionality and/or placed within public education. More specifically, the IPRC employs these categories to organize students in accordance with existing supports and placements. Though I do not adhere to the practice of categorizing and assigning children, without recognition under a category of exceptionality my son's safety, rights and education are further compromised, details of which will be discussed later in this paper. The eugenic ideologies that infiltrate and govern our public education system impact all children, but as Withers (2024) indicates, has been exceptionally harmful to those that do not conform to constructs of the ideal colonized body.

Brief History of the Board

The Board of Education (TBE)– Structural Formation

In the early 1800's, colonization saw that Canada's public education system mimicked its British empire (Parekh et al., 2016). Schools were optional and reflective of the privilege associated with social class and geographic location—reserved for the "male offspring of elites" with the familial resources to finance tuition and therefore considered 'deserving' of residual subsidies (Parekh et al., 2016, p. 68). Instruction would often take place in the home of educators strategically localized to increase access for these populations. The "anti-colonial rebellions of the late 1830's" would establish a "compulsory, centrally controlled, state schooling system…necessary to instill 'proper' social relations among the future citizens of the colony" (Parekh et al., 2016, p. 68). Heavily funded, "locally elected 'school boards'" were recruited to participate in the development and operationalization of the new public education system but were significantly confined through measures of surveillance and provincial legislation regulating curriculum, hiring processes and school procedures (Parekh et al., 2016, p. 68). The administrative structure quickly progressed forming "a provincial Superintendent of Education…and a provincial Department of Education," eventually prompting "officials...to establish a city-wide schooling administrative structure – a 'Board of Education' consisting…of a Director of Education and an administrative staff, responsible to a group of [municipally elected] local 'school trustees' (essentially elite males)" (Parekh et al., 2016, p. 68). According to Parekh et al. (2016), though far more extensive, this structural model persists.

The Partnership—Education and Institutionalization

Running parallel to the rapid expansion of public education, was the increased reliance on custodial institutions to regulate disabled bodies. 1839 produced the asylum for "insane and lunatic persons" exposing people labelled with intellectual disabilities [ID] to the atrocious and irreversible harms of institutional life (Rossiter & Clarkson, 2013, p. 8). The "Convalescent Lunatic Asylum" (CLA) would follow in 1857 (Rossiter & Clarkson, 2013, p. 8). These facilities would eventually be placed under provincial management as a result of Canadian Confederation in 1867 (Rossiter & Clarkson, 2013; Rossiter & Rinaldi, 2019). Due to "a gross loss of revenue" CLA shuddered its doors, shuffling the remaining inmates to "London Ontario's 'Idiot Branch'" and then "Orillia Asylum for Idiots" (later renamed Huronia Regional Centre) to address overflow in 1876 (Rossiter & Clarkson, 2013, p. 8). Dr. Wallace was tasked with overseeing the facility, operating under the view that "care for 'idiots' (people with ID) demanded more space, seclusion and social removal than 'lunatics' (people with mental illness)" (Rossiter & Clarkson, 2013, p. 8). In 1931, institutional surveillance was transferred to Department of Health and Public Works, which aligned with the medicalization of disability and thus, "science and medicine" began to "diagnos[e], classif[y]" and organize according to the principals of biological determinism (Rossiter & Rinaldi, 2019, p. 5). The early 20th century saw the shift from the "social, legal' and "religious" informed management of ID to "medicine" and "education," while still heavily relying on institutionalization, promoted by eugenicists, like Dr. Helen MacMurchy (Rossiter & Clarkson, 2013, p. 10).

The Partnership– Inter-institutionalization— Present Day

Lincoln (2021) exposes the neoliberal, racist, sexist, classist and ableist discourses in our accommodation policies in public and post-secondary education using Critical Policy Analysis. She reveals the human impacts through a compelling comparative case study analyzing her experiences navigating a large board in Southern Ontario on behalf of her son, Vincent, whom has Cerebral Palsy, alongside her post-secondary journey as a single mother, immigrant and caregiver with a disability. Most movingly, she stories how colonial violence, maintained through insidious laws, policies and procedures, "nearly cost [her] the most precious thing [she] ever had"—her son (Lincoln, 2021, p. 45). Amidst the throes of unsupported caregiving and divorce, exacerbated by "intersectional disenfranchisement," she confided in staff at her son's school (Lincoln, 2021, p. 40). Her conveyance was spun into a narrative of danger, requiring surveillance, regulation and removal, by the Children's Aid Society (CAS). Consequently, operating under a veil of deceit, she explains how she *almost* relinquished her parental rights to Vincent, placing him in the care of the state, until her mother intervened (Lincoln 2021). Lincoln, a critical caregiver and activist, *re-stories* (Douglas et al., 2021) experiences of harm and violence into narratives of resistance, using the post-secondary education system to contribute to knowledge production and distribution and ultimately, obtaining her MA in Critical Disability Studies. In sharing her work, we see an example of present day inter institutionalization, concealed under the auspices of care.

The Origins of Auxiliary Classes— Expanding Classifications of 'Deviance'—ID

Dr. MacMurchy, one of the earliest advocates for auxiliary classes, used public education as a filtration system; "weeding out the 'feebleminded' and 'moral deviants' from schools" (Rossiter & Clarkson, 2013, p. 11). Feeblemindedness was constructed as the source of most social problems, including but not limited to crime, "sexual deviancy" and "illegitimacy" (Rossiter & Clarkson, 2013, p. 11; Carey et al., 2020). The complicated history of Dr. MacMurchy reveals itself in Ellis' (2019) statement, "historians have debated her as a historical figure because of her conflicted legacy as a pioneer female physician, accomplished civil servant, and respected maternal feminist – but also ardent eugenicist" (p. 16). Beginning as an educator, she went on to graduate with honours from the University of Toronto in surgery and medicine. As a result of public interest, the TBE appointed MacMurchy to identify the number of 'feebleminded' students in schools. Her survey consisted of interviews with teachers and principals, observation and conducting "fifteen- to thirty-minute" clinical assessments, resulting in a formal diagnosis and revealing approximately "one hundred cases" (Ellis, 2019, p. 21). The results of her study established Canada's "first auxiliary classes for mentally defective children" in 1910 and by 1911 "provincial sanction" had followed (Ellis, 2019. p. 21). MacMurchy used classrooms to identify and stream students into custodial institutions once they had aged out of school (Ellis, 2019). This was especially significant because the feebleminded (also sometimes referred to as 'moral imbeciles' or 'mental defectives') were inconspicuous; not visually detectable (Ellis, 2019). Education was imperative for identification, confinement and refinement, since the feebleminded/moral imbeciles/mental defectives teetered between development and degeneration. 'Morons' were also viewed as educable but not expected to

exceed adolescent development (Ellis, 2019). Institutionalization was believed to be required due to the hereditary nature of these conditions and to prevent reproduction and contamination (Carey et al., 2020).

Alternatively, auxiliary classes for "backward" children would address the population of students that had diverted from the "natural" progression of education due to external factors, such as parenting or according to Dr. W.E. Struthers, "'defective vision, defective hearing, adenoids, which may also cause deafness, enlarged tonsils, enlarged glands, or general malnutrition and physical weakness'" (Ellis, 2013; as cited in Ellis, 2019, p. 26). Leonard P. Ayres "listed contributing factors such as 'the constant influx of non-English speaking children, the enrolling of children in first grade at a comparatively advanced age, slow progress of children on account of physical defects or weaknesses, inefficient teaching, unsuitable courses of study, and the shifting of children from families'" (as cited in Ellis, 2019, p. 27). As such, placement was considered temporary, intervention would address the "barriers to school progress that made normal children into backward pupils" ultimately, returning them to mainstream instruction (Ellis, 2013). In 1909, Ayres would expand the classification of backwardness to include "mental retardation," which more broadly referred to grade repeaters (Ayres, 1909; Ellis, 2019). He stated,

> In the current discussion of what has been termed the feminization of our schools much has been made of alleged bad effects of too exclusively feminine instruction on the moral fiber and character of the boys, but little evidence has been brought forward to substantiate these claims. Here we have indisputable evidence that there is more retardation among our boys than among our girls in the elementary schools" (Ayres, 1909, p. 157).

The outcome, he claimed, was educational inefficiency or discontinuation, which lead to his proposal of centering curriculum pedagogy around the child (Ellis, 2019). This would lead to the "standardi[zation] [of] educational practices" and "adapt[ing] the academic program to varied individual need" (Ellis, 2019, p. 28). Over the next ten to fifteen years, auxiliary classes would expand to include forest school and open-air classes (TB, health and nutrition centred), foreign classes (assimilatory), vision saving classes, speech saving classes (targeted deaf and hard of hearing children), and orthopedic classes (physical disabilities) (Ellis, 2019; Ellis, 2013). Unfortunately, eugenicists continued to heavily influence educational policy, establishing instructional classes for teachers that disseminated information regarding "learning problems" and "mental deficiency," (Ellis, 2019, p. 25). In addition, eugenicists furthered classifications of 'deviance' based on race, class, gender and perceived ability, expanded special classes and perpetuated attributions of heredity, all of which would determine the value, worth and educability of children with disabilities (Ellis, 2019, p. 25).

Intelligence Testing – A Tool for Eugenics

Alfred Binet, building upon Séguin's taxonomy and predicated on Galton's theories of biological determinism, developed psychological testing to further classify and categorize 'mentally backward' children into feebleminded or "ill-balanced," assisting in streaming people with ID to institutions (Rossiter & Clarkson, 2013, p. 7; Parekh, 2022). However, as clarified by Cherry (2026), Binet did not subscribe to psychometric testing as an exclusive representation of intelligence, rather he described IQ as complex and multi-faceted. Consequently, intelligence testing, which evolved into Terman's Intelligent Quotient (IQ), expanded "specialized institutions" and according to Williston, "caused three damaging institutional tendencies that remained throughout their existence: isolation, overcrowding, and perpetual cost containment"

(Parekh, 2022, Rossiter & Clarkson, 2013, p. 7-8). Intelligence testing penetrated the TBE, providing ‘evidence’ of deficiency and assigning value to bodies in accordance with hegemonic colonial constructions. According to Kendi, the 1960’s saw the discreditation of intelligence testing and attributions of heredity, however, horrific violence had already transpired. As Parekh (2022) astutely states, “the history of disabled people reveals the devastating consequences of tying notions of capacity to human value – some which led to a denial of rights, forced sterilization, and systematic murder of those deemed disabled or to have ‘low’ intelligence, as through the Nazi euthanasia program” (Parekh, 2022, p. 24-25). Despite this recognition, she elaborates, “schools continue to use versions of these tests to inform special education decisions,” such as categorization and placement, executed through the IPRC process (Parekh, 2022, p. 26).

Identification Placement and Review Committee

Purpose

According to the *Special Education Plan 2025-2026*, the purpose of an IPRC meeting is to determine: (1) if the student is to be identified under the categories of exceptionality, defined by the Ministry of Education, and (2) placement based on a student’s documented needs (TDSB, 2025). Placement should prioritize a regular class with special education supports, where possible, as opposed to a self-contained classroom. Regarding placement, “parental preferences” should be “taken into account” (TDSB, 2025, p. 75). IPRC meetings should be revisited annually (TDSB, 2025).

The Origins of the IPRC process

Fast forward to 1978, in anticipation of the upcoming *Education Amendment Act,* the Ministry of Education prioritized an "early identification program" (Reid et al., 2020, p. 52). As a result, *Regulation 704/78* established a Special Education Identification, Placement and Review Committee (SEPRC) to replace informal "admissions committees" (Reid et al., 2020, p. 52). Their executory functions were similar—determine the educability of children with disabilities and potential admission to the special education program—but the structure was professionalized. Not surprisingly, inadequacies persisted; terminology was heavily medicalized and parent input was limited, with no appeal process (Reid et al., 2020).

In 1980, Ontario's Bill 82, *The Education Amendment Act*, legally mandated boards to provide special education to "all exceptional pupils under their jurisdiction," (Reid et al., 2020; Ellis & Axelrod, 2016, p. 17), which potentialized education for children with Down syndrome. According to Ellis & Axelrod (2016), "Bill 82 instigated a round of policy making that increasingly centralized special education authority in the hands of the Ontario Ministry of Education" (p. 17). This resulted in the establishment of the TBE's gifted classes, as well as "education provisions for 'hard-to serve' children" (p. 17). Legislation included provisions related to IQ testing—boards could no longer deny children due to IQ results. However, amendments allowed them to exclude 'hard-to-serve pupils, so long as they assisted in locating "alternative educational placements" (Ellis & Axelrod, 2016, p. 18). Notably, *Regulation 554/81* tasked IPRC's with "identify[ing] students with special needs, plac[ing] them, and review[ing] the placements" and included an appeal process for parents who disagreed with the outcome (Ellis & Axelrod, 2016, p. 18; Reid et al., 2020). This process remains largely intact to this day (Reid et al., 2020).

During their discussion of the ir/relevance of the IPRC process, Reid et al. (2020) bring our attention to the 1981 *Human Rights Code* which established disability as "a ground" (p. 56). Being newly enacted, protections were limited, requiring students to proceed with the IPRC process to be identified as exceptional and in turn, eligible for special education services (Reid et al., 2020). More recent research indicates that accommodation is being practiced at the local level prior to formal identification. Further, "in the TDSB, close to half of all students accessing special education services have not gone through the IPRC process" (Reid et al., 2020, p. 54).

Bill 82 moved forward with the categories of exceptionality, despite reviewers noting they were not rooted in empirical evidence, nor did they inform educators pedagogically in praxis (Reid et al., 2020; Parekh, 2022). Reid et al. (2022) cite Mitchell's 2010; 2015 works as empirical evidence to the contrary and rather, determine relationality as best practice for curriculum development, particularly between educators and students. In addition, "IPRC decisions are not often adequately reported or justified" (Reid et al., 2020, p. 56). In response to these deficiencies, the Auditor General "made several recommendations," one of which was to improve the comprehensiveness of IPRC documentation (Reid et al., 2020, p. 56). It is unknown whether these changes have been implemented. It is important to note that although *The Education Act* has primacy over school board policies regarding special education, enactment is inconsistent, specifically in relation to IPRC referral processes (Parekh & Brown, 2019). According to Reid et al. (2020), "at its very root, the IPRC is a body that is designed to categorize students and fit them into the existing structures of the education system rather than a mechanism that is designed to provide individualized support for the student" (p. 53). When considering existing research on the history of special education, IPRC process and streaming, it leads us to question "what…does the formal IPRC process offer students and educators?" (Reid

et al, 2020 p. 56). I would argue that previous research supports the dismantling of the IPRC process, citing significant deviations from initial purpose as well as detrimental impacts on students with disabilities.

The Implications of Categorization and Streaming

As many scholars have indicated (Reid et al., 2020; Parekh, 2022, Parekh & Brown, 2019) all encompassing, medicalized, professionalized (requiring "expert evaluation" for gatekeeping and surveillance) (Baglieri, 2020, p. 43), deficit-based categories can have devastating consequences for students, particularly when streamed into "self-contained special education classes" (Barron et al., 2024, p. 48). Barron et al. (2024) define self-contained classrooms as "50% or more of the student's time spent exclusively with other disabled children, separate from the mainstream classroom with the rest of the grade cohort" (p. 43). Segregating students with disabilities is a form of exclusion that reinforces existing colonial hierarchies perpetuating social stratification and inequities (Parekh et al, 2016), particularly impacting racialized, male students of lower economic status (Parekh & Brown, 2019; Parekh, 2022). Research has demonstrated that "Black, Indigenous, and Latinx students" are overrepresented in special education classrooms (Parekh, 2022, p. 46; James & Parekh, 2021). Parekh (2022) argues, the board's special education system operates under the assumption "that identification of ability and normalcy can be objectively determined, devoid of context," as informed by "Western and Eurocentric middle-class notion[s] of the norm" (p. 8). Similarly, Karmiris (2022) uses Slee's quote, "schooling was never meant for everyone" to bring our attention to the current "labelling and placement practices" (p. 321) that persist, completely undeterred by their predication on eugenics.

Labelling and Self-Concept

Savaria et al. (2011) studied the impacts of categorical labels on the self-concept of students with disabilities, as well as their level of participation in the process. Employing Foucault's theories, they show categories are reflective of existing power relations, with established hierarchies definitionally embedded. Research has indicated that through the internalization of labels, resistance could produce counternarratives, establishing a positive self-concept, in time. However, many participants did not identify with their label, which followed them into adulthood (Savaria et al., 2011). Curtis, Dooley & Philips' 2002 study also determined that children's participation was further compromised by the prioritization of parental input, which often did not align with the child's perceived needs (as cited in Savaria et al., 2011). In response, it was proposed that children participate in negotiating label constructs, proven effective in counteracting existing ideologies positioning children as incapable, inactive agents (Savaria et al., 2011). Barron et al.'s (2024) systematic literature review found that self-contained classrooms resulted in bullying, stigmatization, lowered expectations and restricted access to curriculum. Most importantly, it negatively impacted students' sense of self particularly around "social belonging and engagement in schools" (Barron et al., 2024, p. 60). However, it is important to note that "three studies pertaining specifically to social belonging and engagement note that the majority of students had more favourable experiences in self-contained special education programs in comparison to general education classes" (Barron et al., 2024, p. 60). In their analysis of these studies, Barron et al (2024) query whether these findings might be attributed to the "conflati[on] of inclusion and integration in research" as well as the ableism students with disabilities encounter in regular classrooms (p. 61).

Confronting Colonial Myths of Inclusion and Independence

The "unidirectional flow of power/knowledge from the Global North to Global South," Karmiris argues, must be interrupted to counter oppressions, dismantle "biases of whiteness" and acknowledge our interdependencies (Karmiris, 2021, p. 2). Current conceptualizations and practices of inclusion, promote the "myth of independence," perpetuating ableism through educational policies entrenched in neoliberal, capitalist ideologies of production. Further, narratives of disabled children 'overcoming,' "depend on simultaneously sustaining and overcoming barriers of exclusion," distributed disproportionately along disability, racial, gendered, classist and heteronormative lines (Kamiris, 2021, p. 2-5). The myth of independence, measured through educational assessments, sustain colonial hierarchies, preserve Eurocentric ideals, and result in the maintenance of deep injustices (Karmiris, 2020). Baglieri (2020) states that in the presence of segregation, discussions of inclusion lose merit, as "equal quality and outcomes for students labeled disabled are unlikely to be attained and, second, that the most vulnerable to racism and colonization—Black and Brown youth—and the most vulnerable to ableism—youth labelled multiply and intellectually disabled—will be segregated more often" (p. 45). Inclusion has been promoted as access; however, educational practice has tempered, pacified and inactivated its meaning and validity. Further, some scholars argue inclusion is designed to "assimilate disabled youth into normative performances of compliance and student achievement" therefore, requiring "radical reconstruction to disrupt intersecting systems of domination and supremacy that collude in schools to mark bodyminds as deviant and undesirable, which rationalizes disavowal or violence in relation to values laden conceptions of production and compliance" (Baglieri, 2020, p. 45-46). Under these pretenses, Baglieri (2020) expresses their

conflictions as a professor educating our future teachers and expresses concern that those most committed and oriented towards justice will not continue to practice.

Parekh and Underwood offer some principles to operationalize the concept of inclusion, which include: (1) shared feelings of "belonging and social citizenship" amongst *all* students; (2) modifications to the environment, not the student; (3) celebrating "all identities and cultures"; (4) emphasis on participation, a supportive classroom culture and the facilitation of relationships; (5) rejection of "deficit" orientations, organization, segregation and ability hierarchies (p. 108-109). Further, they clarify, inclusion repudiates: (1) assimilation; (2) restrictive access to "opportunit[y] and space"; and (3) fixation and uniformity (as cited in Parekh, 2022, p. 109-110). These practical suggestions address many of the systemic harms I have experienced through my son, such as repeated efforts to segregate, while also providing proactive recommendations to promote and advance supportive connections amongst peers.

Narratives

Reflexivity in Parenting – Letters to my Children

Buddy,

I wonder if I am doing a good enough job reminding you that you are one half of my heart. I love you so much it's hard to express, in ways that help you and maybe sometimes hurt you. It's not on purpose, but that doesn't make it OK either.

Equity can be hard for anyone to understand, particularly for a child, and my practices are imperfect. I'm trying to show you that I don't underestimate you, but I know you still need me. Maybe sometimes this feels like less. You've contributed from a very young age, shared a

little more, time being the most notable. I think you understand. It's also fine if you don't. Mommy doesn't always either.

The world steals our time. It can make things hard. But there is value in this, too. Look at all our people. We wouldn't have found them on the easy path. You have become quite the little advocate yourself. I want to remind you that there is still a lot of privilege in our fight.

I know I'm faulted. I'm not always patient in the ways I think you need. Sometimes I don't listen. Some of my 'rules' may not give you the space to be yourself. I am constantly trying to figure out how much to let you go, retreat into the background, while still making sure you are cared for. This is one of the hardest parts of parenting. It can also be so incredibly rewarding, as cheesy as that sounds. You can make fun of me later.

Mommy is not sad. This is not for you to hold, either. I want you to always let me know what you're feeling, even if you are worried it might hurt. Mommies need to be accountable, too. I am the MOST proud. R, the world needs more of you.

I love you more than anything.

Mama

Ellie bellie,

You are the other half of my heart. You rocked me in ways I wasn't always sure how to handle. I like this version so much better. Thank you for being so forgiving, particularly in your first few months of life.

You made me freer. I love this new feeling, though I am not always sure where I am going. There aren't any charts or guide s that tell me what's coming next. Letting go of comfort can be difficult, even if it's based on untruths.

I hope I am supporting your wants and needs. Mommy can't always figure out what you're communicating. I am trying, but my understanding of language is still limited.

I want to make things better for you. I know that sometimes I make it worse. I'm sorry. I am catching many of my assumptions but sometimes the ableism slips through. I'm not sure this will ever end.

There might be a day when you want to take over this fight. I promise to back down and support, intervene only when asked. I have a feeling there might be some missteps, so I will apologize ahead of time ;). For now, I will lead but you let me know if/when you're ready. If that day never comes, that's fine, too. Mama will never stop.

I hope you know how much I love you. All of you. Your bright green almond shaped eyes sprinkled with white confetti, like the party you are. The space in between your big and index toe, that allows you to bypass the sandal adjustment at the beginning of summer. Your upturned pinky finger that makes drinking anything with you fancy. Features that at one time, I wouldn't have wished for. But E, it was the most wrong I've ever been in my life. You've enriched my existence more than you will ever know.

I love you more than anything.

Mama

Experiences Navigating Education

The following narratives will address my experiences navigating public education on behalf of my son over his first year. Inclusion criteria was limited to significant events and their relevance to IPRC processes and procedures. It is important to note that some details have been redacted to adhere to institutional ethical standards and to maintain my own relational ethics.

E's First Year

May, 2024

My wrist starts vibrating, I look down at my watch. Incoming call from "Unknown." The luxuries of screening ended abruptly with our diagnoses. The most informative calls are often from "No Caller ID."

It's someone from the board wanting to discuss E's Junior Kindergarten (JK) placement. She opens the conversation by praising the board's Diagnostic Kindergarten Program. The program was not available at his designated school, but transportation could be organized.

It felt hasty but was expected. They were already trying to stream him based on his reported diagnosis – "Syndrome—Downs" under "Student Medical Condition" on the kindergarten registration form (TDSB, 2024, p. 2).

I conveyed our position calmly and directly, "he will start in September, remain in his community and attend school with his sister. E will provide the direction, and we will adjust accordingly, when/if necessary. We look forward to meeting you next week."

She confirmed the date and time and wished me a nice day.

***

Click

***

"Beautiful boy,

They will not always understand

Because magic is contentious

Even in its most sincere forms,

Tell them you're sorry"

(Millar, 2025b, p. 3)

***

August 30th, 2024

During my tour of the kindergarten classroom, I was informed there would be no additional support for E.

After lunch, he would be outside for approximately one hour. This was not the first time I had seen the space; my daughter had attended the same program. However, it was the first time I evaluated the space with E in mind. I've learned to be selective with my capacities.

There were two enclosed outdoor areas designated for the kindergarten classes; one side of the gated area had a play structure. Panic. Would he fall off? Approximately, how many feet is the drop? Would he be trampled by the other kids? They know he's not walking, right?

After a lack of response from the school, I went home and emailed higher level administration immediately, citing words like, "inhumane, unsafe, human rights, universal education and equity."

With three days left until school start, I slumped back in my chair and hoped for the best.

***

Practice self-care

Distance yourself

From the realities

Burning holes through your heart.

(Millar, 2025a, p. 3-4)

***

September 3rd, 2024

It's the first day of school, E's first day ever. I place their lunchboxes in their bags meticulously, so they don't leak. I run though the list of items in my head for the final time, hopefully.

Extra clothes √

Indoor shoes √

Lunch bags √

Water bottles √

Medications √

"Crap! Labels! I forgot labels! Oh, well."

On our walk, E holds our hands. He still refuses to use the walker, and I don't push too hard.

It's such a different experience this time around. I'm terrified, not in the usual nostalgic motherhood type of way, but in a corporal type of way. I've lived in a constant state of fight or flight, mostly the former, for what feels like a very long time. The impacts of systemic exclusion live in my body, alongside an overactive immune system.

The doors open; he waves, blows a kiss and runs inside. I hand over his backpack, stand there for a moment in case he runs back, but he doesn't.

On the way home, I remind myself, "this is what you wanted. Him to have a life outside of you and his family. Community."

***

September 4th, 2024

Someone dressed in a suit is standing by his cubby, she extends her hand while introducing herself. Apparently, they were there to establish a plan that ensures his safety. By the next day, a Special Needs Assistant (SNA) was assigned to the classroom.

September, 2024

His temporary support was withdrawn after two weeks, but nothing about E's needs had changed.

I draft another email to higher level administration, citing all the same words as before.

Click

***

"You look tired."

I am…

Of a lot of things.

(Millar, 2025a, p. 5)

***

October 2024

Ding

It's an "invitation" to his Identification Placement Review Committee (IPRC) meeting.

I look at my watch to see if my heart literally skipped a beat.

No. "Must be broken," I thought.

I sent an email confirming my attendance. It would be a hard date to forget, it was scheduled for E's birthday.

I initiated the process, but I wondered what the consequences would be for my son.

That night I read everything about the IPRC. The tears started and I couldn't stop them. I collected myself, stood up, ready to start our bedtime routine. I was startled to find my daughter sitting on the stairs, watching me.

After bath, I placed E in his sleep sack and sang him a song. It wasn't that long ago I was hooking him up to oxygen and regularly responding to desaturation alarms. He is in school now. A moment of gratitude passes through me.

"Buddy, come talk to me for a second," I call out to my daughter.

She walks toward me, springy gait, curls rollicking, disordered, in all the best ways. It's interesting how a feature that once made you so insecure can become a source of infatuation on another. She looks at me, her lips parted slightly—also mine.

I'm conflicted about the upcoming conversation. I remind myself that protection comes in many forms, sometimes in transparency and honesty. Preparation for the world she will one day have to navigate without me. I look down, her clothing reveals the evidence of a good play. I feel another sharp pang in my chest; she's only six years old. Breathe. Not all parenting comes naturally and that's OK.

I go on to explain that we celebrate E in our home because we know he is magic. We know his life is valuable. We know he is an asset to our community. We know inclusion and equity are essential. I pause for a moment, take the win, because my daughter understands these concepts.

I push past the discomfort and include the "but" and it all starts to flow. I explain why lately mommy's had so many tears, the hard kind. I tell her that even though we know E belongs that unfortunately, not everyone does. I explain that other kids might say mean things because

they don't understand. I explain that mommy must fight *really, really* hard for him to go to her school. A special kind of fight, called advocacy. Sometimes this makes her sad. I tell her all the "because's," the most important being that I wish people viewed him and his communities, the way we do.

I end with another "but."

But mommy will *never* give up. Never, ever, ever, in all her time on this earth and beyond. Her and her brother are my whole heart, and I will always do anything I can for them. I remind her we are not alone. There will be people that know his value and worth. They will become part of our community. They will advocate alongside, when they can.

We talk about all the ways we engage in advocacy. I describe importance of allyship; because we know that all children belong. I explain that sometimes, even though we have good intentions, we will be wrong and that it's ok as long as we are thoughtful with our actions and remain accountable to ourselves, each other and our communities. I answer questions as they arise.

The conversation concludes with, "Mommy is *so, so, soooooo* proud of you. I ask myself every day how I got so lucky."

We spend the rest of the night cuddling. "I love you more than *anything.* Thank you for making me a momma," I say.

***

October 29th, 2024

E is four years old today.

His last stay in the hospital lingers, it resurfaces on special occasions. I have been given time, which at one point, I thought had run out. "Another year, here." (Millar, 2025c, p. 2).

***

These structures aren't built

To sustain his life

But take your time

Resisting

(Millar, 2025a, p. 2-3)

***

I sit on a child-size chair outside of the room; the door is closed.

***

I imagine him playing with the mini water table he hasn't opened yet. Water is everywhere. He is shirtless and soaking wet, so this the floor, my cabinets and the ceiling, somehow. "Why the kitchen?" I ask myself. With every splash, his grin grows wider. Whatever, worth the mess.

He gestures -

***

My vision is interrupted by my name being called.

The door opens, "Kristen?"

I smile faintly, as acknowledgment.

I am led into a classroom, littered with signage displaying the classroom rules, upper- and lower-case letters and smiling animal cartoons, reconnecting me to humanity of childhood—the subjects of our IPRC discussions.

The window is open, slightly. The contrast of the fall breeze brushing against my flushed cheeks causes me to let out a shiver. I can no longer hear droplets, the rain invades the divots in

the grass, establishing multiple tiny ecosystems, soon to be unsettled by hundreds of tiny rubber boots, beckoned by the bell.

Each representative of the board introduces themselves; they smile warmly. We discuss the purpose of the IPRC meeting and the targeted category of exceptionality—physical.

Though I don't like the language used to describe my son's disabilities, we disagree on what constitutes a "severe impairment.".

I explain that he is four years old and not yet walking. I tell them that low muscle tone is one of the physical manifestations of Down syndrome. He requires thickener to reduce potential of aspiration. My descriptions are contaminated with medical discourse. I've become very good at contextually altering my language. I see it as a form of access but that doesn't make it better.

Based on comparisons of how "severe impairment" manifests in other children, they challenge my categorization of E as meeting the criteria for physically disabled under the categories of exceptionality,

Board representatives explain that they have an allotment of Special Needs Assistants (SNA's) to be distributed across schools, according to need. If a principal asks for more support, they must remove support from another school, establishing another service gap. Another consequence of the significant underfunding of special education.

The word "equity" is tossed around frequently during the meeting.

I interject and ask that we refrain from using that word. I tell them the board should strip it from all documentation because "equity" would mean my son is receiving the necessary support to access public education. This is not the case for E and many of his peers.

I am redirected to my son, individually.

I am informed that a category of exceptionality will not result in more support for E. A specialized classroom is the only environment that will provide this due to its smaller child to teacher ratio. However, the IPRC representatives agree that he should remain in a 'regular classroom.' I am told that based on observation, he appeared well adjusted and was running around with his peers.

I interject, again. I explain that he is resourceful, but *not* walking. I start nervously listing off potential categories. I stop. I wonder if I just pushed him out of 'mainstream' with my recommendations.

I am told that categories are not based on diagnosis. Down syndrome is not recognized.

I wonder why Autism is listed under the communication category.

I try empathizing because I know it must be hard denying children necessary supports. We go back and forth for a while. I use all the board speak but I realize the decision is not mine. It's the board's construction of these categories and the IPRC representatives' interpretation that will determine his outcome. The decision is finalized; E will not be recognized under a category of exceptionality and will remain in a 'regular' classroom with indirect support.

I start to cry. I tell them our story. How it's his birthday. How the last virus almost took him from us, forever. How we lived in a hospital for three months, separated from his sister. How he filled four entire necklaces with Bravery Beads. I tell them how hard I had to *fight* for his heart repair. I tell them he hasn't been hospitalized since and no longer requires oxygen. But my attempts to humanize my son are unsuccessful, instead they look at me with pity.

My love for my son and advocacy is acknowledged. I am encouraged me to keep going, like there is alternative.

I look over at the person beside me, they mouth "I'm sorry."

***

"To them, she is pitiful

Sad, overwhelmed,

Burdened by her disabled child.

She requires their reassurance

Their words dancing between the borders

Of humanity and labour

But to her,

the parameters never existed

Her intense connection

to this little life

Wild, unruly emotion,

Are what sustain the fire.

Happy Birthday, Ellis."

(Millar, 2025c, p. 11)

***

Critical Discourse Analysis – Results

Context - Layers of Conventions/Laws/Policies

Convention on the Rights of Persons with Disabilities

For context, Canada ratified the *Convention on the Rights of Persons with Disabilities* [CRPD] in 2010, which is "an international treaty designed to 'promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity.'" (OHRC, 2024, para. 22). Article 24 of the CPRD pertains to Education, Section 1 states the following:

> 1. States Parties recognize the right of persons with disabilities to education. With a view to realizing this right without discrimination and on the basis of equal opportunity, States Parties shall ensure an inclusive education system at all levels and lifelong learning directed to:
>
> a. The full development of human potential and sense of dignity and self-worth, and the strengthening of respect for human rights, fundamental freedoms and human diversity;
>
> b. The development by persons with disabilities of their personality, talents and creativity, as well as their mental and physical abilities, to their fullest potential;
>
> c. Enabling persons with disabilities to participate effectively in a free society (United Nations, 2006, Article 24)

Article 24 also asserts that persons with disabilities: (1) must "*not be excluded* [emphasis added] from the *general education system* [emphasis added] on the basis of disability"(section 2(a)); (2) "can access an *inclusive, quality and free* [emphasis added]

primary education and secondary education on an *equal basis* [emphasis added] with others *in the communities in which they live* [emphasis added]" (section 2(b)) with accommodation and supports to facilitate access and (3) have the opportunity to "learn life and social development skills to *facilitate their full and equal participation in education as members of the community* [emphasis added]" (section 3) (United Nations, 2024). Section 4 proclaims that "in realization of this right," the CPRD recommends that institutions employ educators with disabilities, "qualified in sign language and/or braille" and shall provide training on "disability awareness" and methods of access (United Nations, 2024).

However, it is important to note that the CPRD is *not Canadian law* (Reznick, G. & Lausic, J., 2026), rather it is an international commitment intended to inform Canadian Law (OHRC, 2024). In other words, there is no enforcement mechanism for its ratification. Furthermore, though it provides some suggestions for the operationalization of these "rights," such as in Article 24 section 4, the language remains largely indeterminate and ambiguous, which is consistent with existing research detailing the implications of concepts lacking actualization (Barron et al., 2024). In addition to inconsistencies in study outcomes (Barron et al., 2024), subjectivities defer power to structures, allowing them to further institutionalize, laws, policies and processes to serve their own capitalist interests.

Ontario Human Rights Code

The *Ontario Human Rights Code* [OHRC] (1990) section 1 states, "every person has a right to equal treatment with respect to services, goods and facilities, without discrimination because of race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, marital status, family status or disability." As

mentioned previously, disability was added as a ground for discrimination in 1981 (Reid et al., 2020). The Human Rights Code requires service providers to adhere to the duty to accommodate, enabling students to access education without discrimination and through accommodations (Reznick & Lausic, 2026). Further, case law has indicated that "students must be provided *meaningful* [emphasis added] access to education" (Reznick & Lausic, 2026, 9:50).

The OHRC takes precedence over The Education Act, so the latter must adhere to the former. In the circumstance human rights are violated, one may file a complaint with the Human Rights Tribunal of Ontario [HRTO], however, there are procedural requisites. For example, there is a requirement to report to the HRTO within one year of the incident of discrimination (Reznick & Lausic, 2026). This process is reactive, inaccessible and has lengthy timelines for outcomes with no guarantee for remedy or resolve. Thus, the harms perpetrated against children with disabilities must first *occur*, then persist in "due process" and depending on the outcome, indefinitely.

Authors of Federal and Provincial Laws and Regulations

Policies are established by the Government, to be reviewed by Cabinet, and written into a bill (GOC, 2021). According to GOC (2021), bills are defined as "text of legislative initiative that the Government submits to Parliament to be approved, and possibly amended before becoming law" (GOC, 2021, para. 7). The Department of Justice will then "draft" the bill to go to first reading in "either the House of Commons or the Senate" (GOC, 2021, para 8-9). Second reading provides an opportunity for "parliamentarians" to debate and vote (GOC, 2021, para. 10). If passed, public hearings, conducted by a Parliamentary Committee, *could* result in changes but ultimately, the Committee will conduct the final assessment and provide results to the chamber, where more discussions follow, resulting in potential amendments (GOC, 2021). If the

bill passes the third and final reading, "it goes to the Governor General for Royal Assent and then becomes Canadian law" (GOC, 2021, para. 15). Once the bill is established as Canadian law, it then proceeds to a regulatory process, which "provide[s] support to the new laws" (GOC, 2021, para. 16). Regulations are legally enforceable and are determined by "persons or bodies that *Parliament has given the authority* [emphasis added] to make them in an Act" (GOC, 2021, para. 16). This process involves more input from "stakeholders," (GOC, 2021, para. 18), however, by this point, the bill is *already law*, regulations merely support *enforcement*.

Regarding the development of Ontario law, the process differs only slightly, mostly in the reporting structure. For example, readings will take place in the Legislative Assembly of Ontario and Royal Assent is authorized by the Lieutenant Governor (LAO, n.d). In borrowing from Karmiris (2021), this process is consistent with the "unidirectional flow of power and knowledge" governing all colonial bureaucratic structures, as laws are established from the top down, with little to no input from community members (p. 2). In addition, meaningful participation would require information to be readily available, in accessible formats, and delivered with transparency, features of which are not typically associated with legal processes and procedures.

The Education Act

Section 170.1.7, "special education programs and services," requires boards to "provide or enter into an agreement with another board to provide in accordance with the regulations special education programs and special education services for its exceptional pupils" (Education Act, 1990). According to section 1.1, an "exceptional pupil" is defined as follows:

> 'exceptional pupil' means a pupil whose behavioural, communicational, intellectual, physical or multiple exceptionalities are such that he or she is

> considered to need placement in a special education program by a committee, established under subparagraph iii of paragraph 5 of subsection 11 (1), of the board.
>
> (Education Act, 1990).

Categories of exceptionality are not explicitly identified in the Education Act, however, Section 8.3, under "Powers of the Minister," grants the Minister of Education the right to determine "appropriate special education programs and special education services" as well as the procedures for "early and ongoing identification of learning abilities and needs of pupils, and …prescribe standards" (Education Act, 1990). Section 8.3.(b) states, "the Minister shall…in respect of special education programs and services, define exceptionalities of pupils, and prescribe classes, groups or categories of exceptional pupils, and require boards to employ such definitions or use such prescriptions as established under this clause."

In other words, under *The Education Act*, boards are only required to provide special education programs and services to students officially identified *by the board*, as 'exceptional.' Denying students recognition under the categories of exceptionality, though also incredibly problematic, is a strategy to perceivably legally absolve educational institutions of providing the appropriate resources to students with disabilities, which is exacerbated by the current conditions of education, operating under supervision and at an austere resource deficit. ARCH has found no evidence to determine that the IPRC process increases access to education for students with disabilities (Reznick, G. & Lausic, J., 2026), however, an Individualized Education Plan [IEP] "*must* [emphasis added] be developed for every student who has been identified as an 'exceptional pupil' by an Identification, Placement, and Review Committee (IPRC)" but "*may* [emphasis added] be developed for a student who has not been identified by an IPRC" (GO,

2024, para. 4-5). An IEP is described as "a written plan that describes special education programs, accommodations and services that a school board provide for a student" (GO, 2024, para. 3). As mentioned previously, *The Ontario Human Rights Code* holds primacy, however, bureaucratic processes often lack access, efficiency and resolve. In addition, the Ministry, overseen by the Minister of Education (MoE), holds the power to construct exceptionalities, despite the potential of having no educational experience, such as in the case of our current MoE, Paul Calandra (Office of Paul Calandra, 2026). The MoE, possess the power to define, label and essentially, organize our children according to ability (Parekh, 2022), or as I would argue, capitalist productivity potential. Subparagraph iii of paragraph 5 of subsection 11 (1) requires "committees to identify exceptional pupils and to make and review placements of exceptional pupils," which is governed by *Regulation 181/98* (Education Act, 1990).

Regulation 181/98

Section 5.1 states that a student, along with their parent, is "entitled" to "a) to be present at and participate in all committee discussions *about* [emphasis added] the pupil; and b) to be present when the committee's identification and placement decisions are made," so long as they are "16 years of age or older" (IPEP, 1998). Section 5. 2 allows for those identified under section 5.1 to be "present and participate" during "discussions *about* [emphasis added] the pupil" with the "special education appeal board" (IPEP, 1998). Language, such as "entitlement" conveys privilege, not an inherent right, by way of a legal document. However, as we know, rights are stratified, hierarchized and institutionally assigned, according to colonial logic. In addition, discussions "about" pupils as opposed to "with" contradict claims of participation, which are already compromised by a student's age and the emphasis on parental participation, which as

previous research has indicated, is not always reflective of the child's perceived needs (Savaria et al., 2011).

Those recognized as having "right[s]" under section 5.1 are entitled to representation and shall receive notice, in writing, 10 days in advance of formal "committee or special education appeal board meetings" (IPEP, 1998, section 5.3-5.4). In other words, under the Education Act, children 15 years old and younger are *not* recognized as having the right to attend and/or participate in their IPRC. This notice will be provided to the parent *and* student, if 16 years of age or older. Section 10 tasks the board with establishing a committee for the "identification and placement of exceptional pupils," which "shall" consist of a principal, supervisory officer and a supervisory officer "whose services are used by the board" (IPEP, 1998, section 11.2). As noted by Savaria et al. (2011), parental participation could prove problematic if the parent and students do not align in relation to perceived accommodation needs, as parental input is often prioritized.

It is essential to note that those recognized as having the *right* to presence at the IPRC are determined by legislators responsible for writing legal documents, which as discussed prior, are processes that lack community feedback and integration. Further, children under the age of 16 years old are unable to attend the IPRC meeting to participate in discussions "about" themselves, which is inconsistent with the UN Convention on the Rights of the Child [UNCRC] recognizing a child's right to participation, shifting them from *object* to *subjec*t of the law (Noël, 2022). Though ratified in 1991, like the CPRD, the enforcement has been complicated, with noted concerns surrounding particular articles (Noël, 2022). Regardless of enforcement limitations, we can learn from certain articles, particularly regarding upholding a child's voice and not *allowing* but e*ncouraging* their participation in matters that affect them directly.

Section 14.1 allows the principal or parent to request an IPRC to determine identification, if determined relevant, and placement of the student (IPEP, 1998). As a result of this request, the principal "shall provide the parent with a "guide," an estimated meeting timeline and "acknowledgement of the request," in writing (IPEP, 1998, Section 14.6). In other words, the parent does not have to consent, if the meeting is requested by the principal. Most importantly, the child is not recognized as having a right to consent, in any capacity. Once the referral is received, the committee will "obtain and consider an educational assessment of the pupil" (IPEP, 1998, section 15.1) and "shall [also] *consider* [emphasis added] a health assessment of the pupil by a qualified medical practitioner *if* [emphasis added] the committee determines that the assessment is required to enable it to make a *correct* [emphasis added] identification or placement decision" (IPEP, 1998, section 15.2). Section 15.3 extends this to a psychological assessment (IPEP, 1998). This section grants the committee the right to override documentation from medical professionals, while simultaneously implying the professional qualifications of the IPRC committee enable them to determine identification and placement objectively and thus, enabling the reinforcement of "Western and Eurocentric middle-class notion[s] of the norm" (Parekh, 2022, p. 8).

Section 15.4 states "where the *committee determines it would be useful* [emphasis added] to do so and the pupil is less than 16 years of age, the committee shall, with the consent of a parent, interview the pupil" with the parent present, if desired (IPEP, 1998). By employing words like "where the committee determines it would be useful" it assumes both parent and student require the board to determine thresholds of reason and acceptability *for* them (IPEP, 1998). The committee "shall consider *any* [emphasis added] information submitted to it that *it considers relevant* [emphasis added]" (IPEP, 1998, section 15.3). This information must be provided to the

parent and student "as soon as possible" according to Section 15.8 but section 15.9 releases them from having to disclose "oral information submitted at *a* [emphasis added] meeting that the committee holds in respect of the pupil in accordance with this regulation" (IPEP, 1998). It is unclear whether this meeting includes the parent or pupil, aged 16 or older, however, section 5.1 states they are entitled to be present at *any* meeting about the student. The committee is granted the power to act as the gatekeeper of the provided documentation, determining its usage, albeit selectivity, with little, if any, understanding of the student and in accordance with the interests of the institutions they represent.

Section 16.2 allows for the committee to "make recommendations" about "special education programs or special education services" but may not make "decisions" due to subsection 26 which allows for appeal (IPEP, 1998). Section 17.1 requires the committee to consider a "regular class" prior to a "special education class" if it "meet[s] the pupils needs" and "is consistent with parental preferences" (IPEP, 1998). If all prior requirements are agreed upon, the "committee shall decide in favour of placement in a regular class" (IPEP, 1998, section 17.2). Upon completion, "after making its *decisions* [emphasis added] on a referral," written confirmation must be provided to parent, child (if over 16), principal and "designated representative of the board" (IPEP, 1998, section 18.1). Section 20.1 states that a "board shall implement a placement decision," with parental consent or in the circumstance of a time lapse for appeal and in this circumstance, must provide written notice to the parent (IPEP, 1998). The language is inconsistent with practice, *Regulation 181/98* explicitly states committees can make recommendations but not decisions, however, notices provided to parents, post IPRC, are titled "Decision of the Identification, Placement and Review Committee (IPRC)" (TDSB, n.d) Parents and students aged 18 or older, can indicate their agreement/disagreement with identification and

placement, however, this document does not include detailed information regarding the appeal process (TDSB, n.d.).

Section 21 highlights the process for committee reviews, which is for the most part consistent the initial IPRC request, with some noted exceptions to follow. Reviews requested by the parent are capped at "once in every three-month period," with the period commencing at the time "placement has been in effect" (IPEP, 1998, section 21.2). A "designated representative" can make this request "when in his or her opinion it is necessary…at least once each school year" (IPEP, 1998, section 21.3). During IPRC review, "progress with reference to the special education plan may be considered," however, this is only with written permission of the parent (IPEP, 1998, section 23.2).

Section 26.1 indicates that "a *parent* [emphasis added] of the pupil" may file "a notice of appeal" requesting a "hearing by a special education appeal board in respect of," a committee's "decision" in relation to identification, non-identification and/or placement (IPEP, 1998). It is important to note that this section does not reference the student. The appeal must indicate "which of the *decisions*" are being challenged and the reasons for the challenge (IPEP, 1998, section 26.4). Appeal boards are unable to "reject or refuse" proceeding due to "any actual or alleged *deficiency* [emphasis added]" in documentation "or by reason of the *failure* [emphasis added] of the parent, in the opinion of the special education appeal board, to *accurately* [emphasis added]" provide documentation of reasoning (IPEP, 1998, section 26.5). Deficit-based language, such as "deficiency" and "failure," employed in reference to parents, undermines decision-making authority, by way of portraying them as incompetent due to an inability to adhere to appeal guidelines.

The meeting shall consist of "one member selected by the board in which the pupil is placed," "one member selected by a parent of the pupil" and "a chair" agreed upon by both parties but may not include anyone with "any prior involvement" (IPEP, 1998, section 27.1 and 27.5). If parties are unable to agree, the "appropriate regional manager of the industry" shall decide (IPEP, 1998, section 27.3(b)). The appeal meeting is "informal" and must "take place at a convenient place and at a time that is not more than 30 days after the day on which the chair is selected" (IPEP, 1998, section 28.2). The chair is able to determine "any person" who "may be able to contribute information with respect to matters *under appeal* [emphasis added]" (IPEP, 1998, section 28.2). The special education appeal board will provide, in writing, their recommendations, within three days of the meetings conclusion.

The board can then agree or disagree with the decision made by the special education advisory board. They are required to respond, in writing, within 30 days of receipt, detailing their action and decision, however, they are not legally required to oblige with recommendations (IPEP, 1998). This information is included in the *Parent Guide to Special Education* (TDSB, 2026), which is provided to parents with the principal's notification/acknowledgment of the IPRC request and can function to deter and disempower parents from pursuing appeal, even prior to the initial IPRC meeting. Thus, in conclusion, the board holds the power to make the final decision, despite oppositional recommendations from the special education advisory board and/or parents/caregivers, rendering the IPRC appeal process performative and tokenistic and perpetuating existing power relations, in favour of the institution of education.

Ministry of Education - Categories of Exceptionality

Identification, or more specifically, the categories of exceptionality include the following: (1) Behavioural; (2) Communicational; (3) Intellectual; (4) Physical and (5) Multiple. First, the

professionalization of identification denies the student the right to self-determination and instead contribute to the medicalization and institutionalization of bodies, exacerbating dehumanization and ultimately, strengthening the divide between labour and humanity (Smith, 2022). Categories are littered with deficit-based language such as "*learning disorder* [emphasis added]", "*inability* [emphasis added]," "*severe* learning *disorder* [emphasis added]" and "*impairment* [emphasis added]" (OME, 2026, p. A14-A16). This is consistent with the Medical Model of Disability and Eugenic Model of Disability, in the assumption that disability is to be remedied and is inherently subordinate to the ideal colonized body. Categories are subjective, providing no measurable assessment strategy (also problematic, but will be addressed in the discussion), ultimately deferring to the committee to determine what constitutes as a "*severe* physical limitation" (OME, 2026, p. A16). Further, some categories result in being streamed into self-contained classrooms more frequently, such as Mild Intellectual Disability (MID). According to Parekh (2022), "persistent racism" is correlated with the overrepresentation of Black children in MID classrooms. Their research indicated decisions were often made by the IPRC and lacked sufficient documentation and justification (Parekh, 2022). Streaming into self-contained classroom, as research has shown, negatively impacts self-concept and access to future educational opportunities.

Discussion

The results of the CDA of *The Education Act* and *Ministry of Education's categories of exceptionalities*, combined with my personal experiences identified four major themes, which are as follows: (1) institutional dominance; (2) inconsistent application of IPRC policies and

procedures; (3) non-compliance and discrimination and (4) lack of accountability. Due to the significant categorical overlap, some themes were collapsed in the discussion.

Institutional Dominance

First, the development of laws and policies reproduce existing hierarchies through the bureaucratization of process and top-down legislation that systematically reduces or altogether eliminates, community consultation practices, while simultaneously selling an illusion of participation. For example, community input is generally instituted during the second reading of a bill, however, the Parliamentary Committee maintains authority over the final presentation. Stakeholders have more access to the regulatory process, however, by this point, the bill has received Royal Assent and is therefore, already enshrined in Canadian/Ontario law (GOC 2021; LAO, n.d.).

Second, the board's decision-making authority is maintained through the *Regulation 181/98*, which instills the following rights in representatives of the board: (1) IPRC meeting requests; (2) discretion and disclosure of information under the pretense of perceived objectivity; (3) interpretation and determination of categorical relevance; (4) epistemic perquisite and (5) final ruling in the IPRC appeal process. In addition, The MoE, by way of *The Education Act*, holds the power to define the categories of exceptionality, despite the potential of having no background in education. Further, boards are only *required* to write IEP's for children labelled exceptional through the IPRC process. Though other laws hold primacy over the Education Act, the bureaucratization of process, render rectification inaccessible.

In preparation of my son's IPRC meeting, I submitted documentation from medical professionals supporting his eligibility for the physical exceptionality category, providing detailed justifications for additional supports. Despite this, the IPRC committee deemed the

information irrelevant. My son was denied identification due to the committee's construction of the term, "severe physical limitation." Regardless of the pursuance of appeal, the board would make the final ruling.

In addition, processes of dehumanization dictating IPRC policies and procedures manufactured my emotion as tragedy, resulting in responses of pity from committee members. The professionalization of bodies separates and absolves them of their humanity. Fabrications of caregivers as tragic and incompetent is not limited to interaction, but also embedded in the text of *Regulation 181/98*, serving to infantilize and regulate caregivers, requiring systemic intervention in form of full decision-making authority. Power imbalances are perpetuated through epistemic injustices, systematically in favour of 'experts' trained on IPRC policies and procedures, thrusting parents into the position of novice and forcing them to participate in the structural denigration (i.e. the IPRC process) of their own child, in attempts to secure safety and access to education, through convoluted, discriminatory and harmful accommodation processes, simply for their child to occupy space in "universal" education.

Inconsistent Application, Non-compliance and Discrimination

Subjective, inaccurate, deficit-based categories and streaming practices are predicated on eugenic ideologies that were historically engaged to stream students with ID into institutions, introducing them to the significant and irreversible harms of institutional life. In addition, IQ testing was initially purposed to provide evidence of deficiency and justification for the "denial of rights, forced sterilization and systematic murder" (Parekh, 2022, p. 24-25). Despite this, streaming practices and versions of these assessments are used to inform the categorization and distribution of our children to this day (Parekh, 2022). Segregation (i.e. self-contained classrooms) is a form of exclusion that reinforces existing colonial hierarchies, preserving white

middle class values (Parekh, 2022) and distributing disproportional harms along gendered, racialized, sexuality and disability lines, maintaining the systemic inequities of the encroaching capitalist industry evidenced through the overrepresentation of "Black, Brown and Latinx students" in self-contained classrooms (Parekh, 2022, p. 46; James & Parekh, 2021). Research has demonstrated that segregated classrooms can have detrimental effects on the self-concept of students. In addition, current practices of inter-institutionalization heighten surveillance, penetrating and forcibly dividing families, through processes of incarceration, such as in the case of critical caregiver and colleague, Lincoln (2021).

Constructions of disability as contamination validate the eradication of disabled bodies, particularly those labelled with ID, from the public spaces, which is consistent with eugenicist, Dr. Wallace's position—they require "space, seclusion and social removal" (Rossiter & Clarkson, 2013, p. 8). The segregation of disabled children allows our 'center' (Smith, 2022) children to absorb instruction that caters to industry, unaffected and undistracted. The myth of independence and meritocracy guides the allocation of resources, supporting only those most beneficial to capitalist economy. Most recently, this was evidenced in a 6.4 million cut to special education funding (Oatley & Yazdani, 2026). Funding cuts translate to systemic exclusion, particularly affecting children with disabilities. My son's school was allocated 2.5 SNA's for approximately 1000 students, essentially denying access, safety and basic human rights. To manage limited resources, schools passively push children with disabilities out, which manifests in a lack of response to emails and/or the denial of detrimental resources. This also results in non-compliance with existing laws and policy evidenced in the board's attempt to stream my son into a diagnostic classroom immediately due to his diagnosis.

Lack of Accountability

Misrepresentative, domineering and coercive interactions with board representatives are systematically maintained through IPRC policies and procedures lacking appropriate documentation and transparency. *The Performance Audit: Special Education Needs 2026* confirmed that IPRC decisions were lacking complete documentation and revealed that a systematic review of IPRC decisions was not conducted by the Ministry or the three boards studied (OAGO, 2026). All factors of which influence the decision-making process and can have significant implications on a child's academic trajectory (Parekh, 2022), self-concept and overall, wellbeing (Savaria et al., 2011; Barron et al., 2024).

Dismantling the IPRC Process and Reforming Special Education

The IPRC process has been critiqued as resource heavy and though perceived as having an impact on funding and resource allocation, Reid et al. (2020) note that "Ontario's experience with a funding mechanism based on labelling children with exceptionalities highlights them drawbacks associated with this type of approach (i.e. diagnosing for dollars)" and thus, has resulted in a "model that relies more on demographic variables" (p. 59). In addition, this paper has illustrated that IPRC process, predicated on eugenic ideologies, are harmful to *all* children, particularly those with disabilities, and those that love them most. Any process that threatens to deny my son of his community and vice versa, due to disability, should be dismantled.

I envision a school climate that relies on the bottom-up co-construction of a shared vision based on relationship building and community consultation. Practices of communication and "healthy" conflict intended to remedy issues proactively. The re-distribution of power, resulting in equal participation and accountability, amongst all community members; administration, educators and most importantly, students, who have been largely excluded from the development of policies and practices that affect them the most. De-centering and de-stabilizing the

professionalization of special education. The only measurement of success being *true* inclusion, as defined by Parekh (2022) and well-being of *all* children, ensuring that in addition to meeting needs, they receive care and nourishment.

Limitations and Future Directions

This paper recognizes interactions with family, friends, parents, community members, scholars, activists and educators, as part of this creation, a form of radical co-authorship—nothing is ever ours alone. As I write, I continue to counter the internal dialogue urging me to defer, fizzle, smooth, conserve, cower, hide, resisting the instinct to appease or reveal only the most privileged and consumable (Sjunneson, 2020). I remain accountable to my unprepossessing, grievous, untamed rage (Sjunneson, 2020). I navigate my primary role as a mother to two young children amidst the production of scholarship, completely affected, distracted, tenaciously devoted, patience thready at times—the now 'zero' chill parent.

With that said, this study is significantly limited in that it is based on my experiences navigating the IPRC process on *behalf* of my son and thus, relies on my *interpretation* of what he is communicating as a knower. For now, that is my role, until he has a chance to grow and possibly take over. In addition, my analysis of the *The Education Act* and *Ministry defined categories of exceptionality* is selective due to time constraints and paper criteria. In future, I would like to see more critical disability research centering the voices of children, which exists, but remains sparse. Ideally, the research would be conducted *by* students with disabilities, in whatever format, particularly those with ID, who still reside at the margins of academia. Until then, I will continue to support and write, with a willingness to get it wrong.

A Call to Action

"This paper serves as a call to action—I stand with other advocates in their in their demand for the immediate structural reorganization of the public education system and the redistribution of power," releasing all boards from supervision (Millar, 2026, p. 7). I wholeheartedly refute the authoritarian dictatorship mandated by Bill 33, denying us of our democratic rights and exacerbating existing resource deficits, with a particular impact on students with disabilities. I call upon our community members, when they have the capacity, to challenge all systemic oppressions and acknowledge the historical harms cause by our public education system, resist and rebuild.

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