

Article

Incivility in Higher Education: Challenges of Inclusion for Neurodiverse Students with Traumatic Brain Injury in Ireland

Teresa Shiels ^{1,*}, Neil Kenny ², Roy Shiels ³ and Patricia Mannix-McNamara ¹

¹ School of Education, University of Limerick, V94 H58H Limerick, Ireland; patricia.m.mcnamara@ul.ie

² School of Inclusive and Special Education, Dublin City University, 9 Dublin, Ireland; neil.kenny@dcu.ie

³ Student Affairs, University of Limerick, V94 H58H Limerick, Ireland; roy.shiels@ul.ie

* Correspondence: teresa.shiels@ul.ie

Abstract: This paper explores the lived experience of incivility for neurodiverse students with traumatic brain injury (TBI) in Ireland. The higher education (HE) environment can be challenging for students with TBI. Incivility is common in higher education, and students with disabilities such as TBI are often marginalized within academia, making them more vulnerable to incivility. For this paper, data are drawn from the first author's autoethnographic study, and is supplemented with semi-structured interviews from a sample of HE seven students also with TBI. Results revealed that participants' experiences of incivility were common and were linked to the organizational culture of higher education. Our experiences point to a need for better responsiveness when interactions are frequently uncivil, despite there being policies that recognize diversity and equality. This is the first paper of its kind to explore this particular experience in Ireland and the purpose of this paper is to raise awareness of the challenges of neurodiverse students and how they are exacerbated by organizational and interpersonal incivility.

Keywords: incivility; students with traumatic brain injury; higher education; power



Citation: Shiels, T.; Kenny, N.; Shiels, R.; Mannix-McNamara, P. Incivility in Higher Education: Challenges of Inclusion for Neurodiverse Students with Traumatic Brain Injury in Ireland. *Societies* **2021**, *11*, 60. <https://doi.org/10.3390/soc11020060>

Academic Editor: Gregor Wolbring

Received: 17 May 2021

Accepted: 10 June 2021

Published: 13 June 2021

Publisher's Note: MDPI stays neutral with regard to jurisdictional claims in published maps and institutional affiliations.



Copyright: © 2021 by the authors. Licensee MDPI, Basel, Switzerland. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY) license (<https://creativecommons.org/licenses/by/4.0/>).

1. Introduction

Bullying in higher education institutions has been receiving increasing attention in recent years. While debates about definitions of bullying prevail, it is generally understood that it typically constitutes patterns of negative behavior [1,2]. Incivility is described as negative social behavior that stands alongside the repetitive, aggressive or abusive behavior that constitutes bullying [3]. It is low-intensity deviant behavior with ambiguous intent to harm a target in violation of norms and mutual respect. "Uncivil behaviors are characteristically rude and discourteous, displaying lack of regard for others" [4] (p. 457). This type of behavior evidences lack of concern for others and disrupts rules of courtesy, interconnectedness and harmony, which is harder to combat (ibid). It occurs as a result of a collection of negative behaviors that include being rude; making belittling, humiliating or demeaning comments; creating or spreading gossip or rumors [5]. Incivility may also include interrupting/cutting people off while speaking, intentionally misinterpreting a person's instructions and undermining their credibility in front of others. These actions have negative impacts on those who are on the receiving end of uncivil behavior [6]. Incivility is often prompted by thoughtlessness, and those who behave uncivilly often claim that their intentions were misunderstood by a target, stating it was not meant to be hurtful. In other situations, people who claim to have experienced incivility are deemed hypersensitive, which in itself is yet again another form of incivility, a 'doubling down' on the original uncivil behavior.

Having a disability such as traumatic brain injury (which is the experience of the first author) or an impairment, activity limitation or participation restriction that results from a health condition or from personal, societal, or environmental factors in an individual's life [7] (p. 5) renders a person more vulnerable to becoming a target of incivility. No cohort

is safe from the consequences of incivility and individuals with traumatic brain injury (TBI) are particularly vulnerable to the possibility of internalizing language or behavior, aimed at portraying them as 'abnormal' or as 'not as competent' because they are not neurotypical students. Research on this particular lived experience, i.e., disablist incivility is in its infancy and this paper reports on a first of its kind study in Ireland with this cohort.

Incivility in higher education can have far-reaching outcomes for well-being and community solidarity within the organization. Given that it is subtle, and often permeates many social interactions in higher education, this can create a toxic educational space, with potentially adverse consequences for students such as increased stress and worse increased attrition. The first author lives with TBI, which she sustained after a severely debilitating road traffic accident (R.T.A). During rehabilitation, she returned to higher education but found that as a neurodiverse student, she experienced incivility coupled with systemic barriers that, at times, appeared insurmountable. In reality, she found that some of her experiences in third-level education became a further type of trauma and the negative interactions that she contended with, continue even now, to shape her understanding and experience of the higher education setting. In daily interactions, she encountered lack of empathy from the higher education staff (academic and service staff) and this was linked to their misperceptions of her capacity as a student.

Linton [8] notes that the prefix *dis* in the word disability means separation. As such, people may have a misperception that because a person presents with a disability, it follows that they lack ability. Linton also notes that disability does not refer to the biological condition or impairment, but to the act of 'repudiation of ability' by society [ibid] (p. 171). Therefore, 'dis' signifies a social arrangement that denotes an act of exclusion committed by society on the individual. This position takes into account the potential consequences that incivility may have for a neurodiverse student with TBI. From this perspective exclusion is shifted from being the responsibility of the individual with a disability/impairment to something that is enacted by society and its structures—in this case, the higher education environment.

Third-level education is an important site of power that facilitates the dominance of certain groups over others through language and discourse [9]. However, power is more ever-present still and is produced and reproduced in education, often subconsciously but predominantly through assumptions of normalcy, which in themselves also reinforce power and dominance. Studies on inclusion make reference to power but perhaps less explicitly than is warranted on occasion. The following section makes explicit the intersection of power and issues of access and inclusion for students with TBI to higher education.

2. Power

From a critical theory perspective, power can be understood as actively constructed in relationships. It is ubiquitous in society, "power is everywhere; not because it embraces everything but because it comes from everywhere . . . one is never outside it" [10] (p. 141). A key contribution of Foucault's [10] work is in illuminating how institutions exert control and how they reproduce unequal power relations. He conceptualized power as a "complex strategic situation in a given society" that involves both constraint and enablement [ibid] (p. 93). This refers to what is termed "technologies of power", which "determine the conduct of individuals and submit them to certain ends or domination [11] (p. 18). He argued that power manifests relationally and reciprocally in the context of social relationships, not as part of a fixed social structure *per se*. Giddens [12] later challenged this perspective, arguing that structure and agency form a distinct part of the power dynamic. Giddens advocated the complex interrelations of human freedom (or agency) and determination (or structure), where "individual choices are seen as partially constrained, but they remain choices nonetheless" [13] (p. 373). The contribution of both is to foster an understanding of power as relational but also as structural (i.e., vested in given structures) and also culturally reproduced. When one is able bodied, one may not have reason to question assumptions of homogeneity or privilege unless another set of factors collide to prompt a raising of

critical consciousness or conscientization [14]. However, when one is grappling with the constellation of challenges that a disability such as TBI brings, a person is quickly subject to manifestations of power, even from the most unexpected of sources, and conscientization as a result of these challenges is common among those with TBI who access higher education.

Social bodies such as higher education institutions, control individuals through regularity practices that subtly discipline the body according to the discourse of that institution [15]. These practices are eventually internalized, resulting in 'docile bodies' that conform. As such, dividing and classifying people based on 'normal', has resulted in the identification and division of people into categories with a view to making them governable. For example, categories such as 'disabled' or 'others', even 'not the norm', have many implications for practice, political and social policies, most especially for those of us who are neurotypically diverse. With the emphasis in higher education being on performativity and on being driven by new managerialism, ableism has a strong foothold and results in a preference for normative abilities, creating collateral damage for those of us with disabilities. Ableism is defined as a set of beliefs, processes and practices that produce a specific understanding of oneself, one's body and one's relationships with others in a given environment [16]. It reflects the perception that particular social groups and social structures that value and support particular abilities, for example, productivity and competitiveness, take precedence over values such as empathy, compassion and kindness. It is even more insidious as cognition-based ableism deeply influences conceptualizations of disability, which then dominate normative service provision and permeate daily interactions with those who contend with disabilities. Failure to meaningfully address diversity and difference, is driven by and reinforces, such ableist logic.

2.1. Reproduction of Inequality

The reproduction of social and cultural inequalities is fostered through education, as is the maintaining of inequalities through their reproduction of knowledge [17]. Bourdieu asserts that education creates a social order premised on cultural capital associated with dominant elites and these in turn ascribe individuals with negative or positive traits. He further asserts that this process incorporates key dimensions such as cultural capital that is, the discourse, mannerisms and ways of knowing how the system operates. In addition, *habitus* is the learned attitudes, perceptions and behavior toward one's probabilities and possibilities of life trajectories which are often learned from our families and cultural contexts. We argue that systemic cultural capital in third-level education resulted in marginalization for the first author and those she interviewed, vis à vis established ideals and the dominance of a hegemonic group, i.e. 'normal' students. Bourdieu contends that symbolic capital is a crucial source of power that relates to prestige, status and honor [18]. When the holder of symbolic capital uses the power that prestige grants them for their own gain over someone who holds less power, an engagement Bourdieu termed 'symbolic violence' [ibid] has been enacted. In a hegemonic culture, one might assume symbolic power as legitimate, with no physical harm inflicted. Symbolic violence comprises meanings that are embedded in society and are imposed as legitimate by concealing the power relations, which are the basis of its force, and this type of violence can be experienced as emotional, psychological or social. We argue that this is part of the hidden social experience for students with TBI, who are trying to negotiate the educational environment. Disability scholars have been reticent to engage with the psychological ramifications of living in a disabling world. One of the challenges of bridging these two disciplines is that of bringing a social model perspective of disability to understand and explain what is often viewed as an individualized and personal experience of the world. In order to challenge assumptions about incivility and create a more inclusive environment in higher education for students with TBI, the authors look to the work of critical disability scholars, who question, not the disabled but rather, the non-disabled psyche. The first author's positionality as a native ethnographer and PhD researcher has allowed her to recognize and critically analyze

the uncivil and stressful nature of interactions in the higher education environment for neurodiverse students. Unchecked acts of incivility breed a negative culture.

2.2. A Model of Access

The organizational response of higher education institutions to uncivil interactions towards those with disabilities has not yet been extensively explored but is a necessary field of inquiry and this paper intends to add to the limited research on incivility and disability in the higher education setting. The authors engaged deeply in seeking to understand the struggles with incivility that neurodiverse students with TBI experience, and make the case that culture, which, according to Markus and Kitayama [19], is a shared system of norms that shapes beliefs, feelings, and behaviors, plays a central role in fostering incivility. Academic culture is heavily influenced by neoliberal paradigmatic perspectives and this neoliberalist ideology privileges those non-disabled. Considering the range of factors that shape this phenomenon, we advocate that a useful way to challenge assumptions and to better include neurodiverse students with TBI in higher education is to use an integrated model that recognizes that the actions of individuals are dependent on human agency. An insight that became clear during this research is that all those with disability who accessed higher education were deeply dependent on an additional micro-environment which comprised family, peers and influential others such as empathetic educators, and that this micro-environment also depended on a structure which encompassed the rules, resources and social systems [20] (p. 118) that were made available (or were allowed to be made available) to them. The authors have organized these into a conceptual frame as identified in Figure 1.

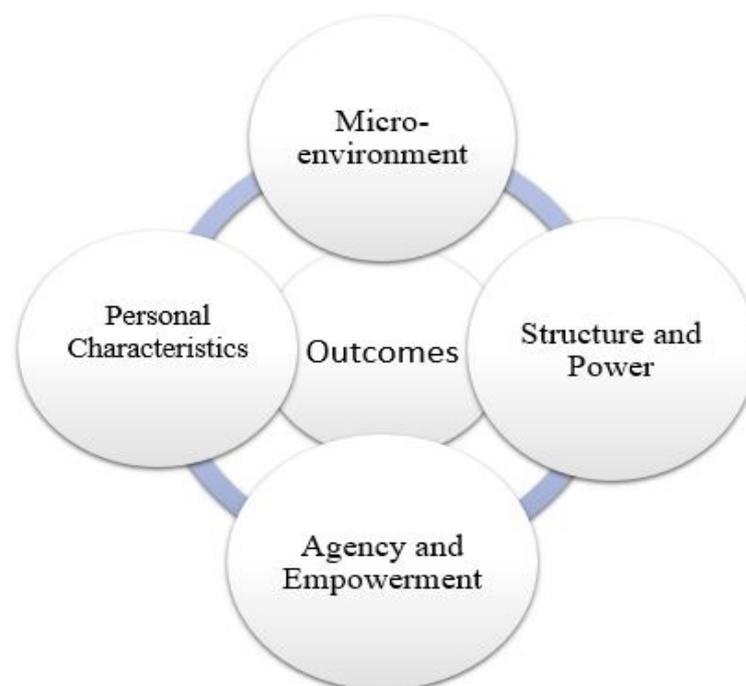


Figure 1. An integrated model of human action and conditions.

The first author has engaged in higher education (from undergraduate degree to doctoral level) after acquiring a traumatic brain injury herself. She experienced the higher education setting as being, at times, inhospitable and uncivil. This prompted the authors to investigate the experiences of students with TBI who accessed higher education. The aim of this study was therefore to critically interrogate the experiences of students with TBI, with particular emphasis on incivility. This was a qualitative exploratory study and as such did not begin with a hypothesis, but rather sought to critically interrogate the experiences of both the first author (via autoethnography) and those of a sample of students with TBI.

3. Data and Methods

An overarching phenomenological approach that incorporated autoethnographic research and semi-structured interviews conducted with seven other students with TBI was adopted for this study. An iterative approach was employed to gain a deeper understanding of personal and cultural experience to elucidate the connectivity between self and others in higher education. Autoethnography is a research method that, when done well, is both personal and scholarly, evocative and analytical, and descriptive and theoretical [21]. Storied lives are tales of cultural engagement whereby culture is understood as meaning construction intertwined in human and material contexts as people live their daily lives [22]. Reflecting on moments of cultural engagement were imbued with tales of success and, at times, of demeaning behavior and resistances. Ellis [23] suggests that the way that autoethnographers employ analytic methods is by thematic analysis of the narrative. Thematic analysis “refers to treating stories as data and using analysis to arrive at themes that illuminate the content of the stories and hold within or across stories” [ibid] (p. 196). In accordance with this point of view, the first author engaged in the use of thematic analysis in consultation with the co-authors, in interpreting and analyzing her personal narrative. The themes identified from the data analysis were crafted into an autoethnography using social critique, which was analytical, creative and performative in style. When engaging with autoethnography, one encounters some ethical issues that would be less likely to arise in research that is more traditional. For some researchers, undertaking this type of research can be potentially re-traumatizing especially when a person remembers (a) the trauma of becoming disabled and (b) the behaviors of others that may be categorized as uncivil that reminded them of their ‘otherness’. Chatham-Carperpenter argues that while a researcher may be accustomed to considering the protection of others from harm, within our research, an autoethnographer also needs to take care about how to protect themselves and to ensure they are supported in the process [24].

Data interpretation, unlike data analysis, requires researchers to delve into their cultural background and into the relationships between the self and others to interpret the meaning of behaviors that took place in the researcher’s life [25]. The development of knowledge through experience held a privileged position in this research. The first author made explicit her life experience and to enhance insights of the research, interviews with others students with TBI were also included. These were analyzed using interpretive phenomenological analysis. This requires an epistemological position whereby, through careful and explicit interpretive methodology, it was possible to access an individual’s inner world or subjective experience. In consideration of the phenomenological and hermeneutic roots of IPA, the hermeneutic perspective of Heidegger [26] is closely aligned with critical realist thinking which provided a scaffold through which the researcher could further capture the multi-dimensional nature of being a student with TBI. Reid et al. argue that IPA is a valuable approach when researching an unexplored area, and this topic has not been previously researched in Ireland and more generally research with (not research *about* or *on*) students with TBI is particularly scarce [27]. Ethical approval was granted by the author’s institution: 2017_12_16_EHS. Fourteen third-level institutions involved in the Disability Access Route to Education (DARE) in Ireland were contacted and asked to circulate the information to students with TBI within their respective institutions. The disability services acted as gatekeepers, and distributed the information and researcher contact details. Students could then contact the researcher directly should they so choose. Seven students made contact from five third-level institutions and all seven interviews were conducted. The first and third author then travelled to a location close to the student to conduct the interview.

Interviews were potentially highly sensitive, and were conducted with an emphasis on ensuring that the participants could talk freely about the experiences that were important to them. Furthermore, they were treated with care and respect. In accordance with the confidentiality and anonymity process, pseudonyms were provided and there were no

identifiable characteristics. The analysis is focused on theory building and the experiences of incivility were framed by the concepts of power, and habitus.

4. Results

Participants recalled encounters of incivility and experiences that were infused by power relations. They reported being treated negatively in comparison with neurotypical students. Two overarching themes were identified during the analysis, which we named ‘unconscious bias’ and ‘institutional power’.

4.1. Unconscious Bias

Power structures in higher education created barriers for the inclusion of neurodiverse students with TBI. The first theme, ‘unconscious bias’, emerged from the analysis and was related to the experience of incivility both explicit and hidden nature. Unconscious biases refer to views and opinions that a person is not aware of, and that influences their behavior and decision making [28], for example stereotypes or beliefs that affect a person’s actions in a discriminatory way. They are impacted by background, culture, context and personal experience. As such, participants reported incidences in which they experienced unconscious bias that was beyond the reach of policy and procedures.

Taken from the first author’s autoethnography, she recalls how on one particular occasion, she asked someone working in the Information Technology Division (ITD) to install software on her laptop which would allow her to participate fully in a module. The ITD colleague proceeded to give instructions over the telephone on how to do it, but they spoke so quickly that she could not process the information and coordinate her hands to input the data onto the computer at the same time. Five minutes later, when he called back to ask her whether the software had been successfully installed, she replied that she did not know. The reality was that due to the restricted movement in her hands, and her affected hand–eye coordination, she had not even begun. He responded with dismissiveness and annoyance, suggesting that a PLC course (NQF level 6) was more appropriate than PhD (NQF level 10) studies for her. Rather than challenge his rudeness in the moment, she turned introspectively. She perceived a power differential and was at his behest in that she needed his help. As members of the dominant cohort (service support staff and able bodied), his dismissiveness constituted an uncivil interaction. A dynamic that Cortina has identified, whereby members of a dominant cohort engage in uncivil interactions with minority group members [29]. Rather than self-advocate and push back, the first author internalized this experience. She ruminated upon the situation she encountered, and she perceived it unwise to report it because of the staff member’s senior position in the institution. She felt that she had no recourse through the university’s policies and procedures because it was a one-off dismissive remark, which could be perceived as the normal *cut and thrust* of academic environments. However, the comment had cut to the heart of the ‘imposter syndrome’ she already grappled with, given how hard it had been as a student with disability to be accepted into the doctoral studies programme in the first place.

This type of experience was not confined to the first author. Jane, one of the interview participants also spoke to the power of hurtful comments based on being a student with TBI.

Somebody made a comment a couple of weeks ago, quite a hurtful comment and it really upset me. It really did upset me, it took me a week to deal with it. But I dealt with it and the way I look at it. it’s his problem not mine. (Jane)

The tendency for teachers to hold powerful, defensive positions was also identified by participants. Sinead explained that she struggles with cognitive processing and understanding in the moment, in class. When she asked a teacher the question ‘why’, in response to a task, she was met with a comment that closed her down: “*There was one teacher who was explaining something, and I asked why. And he replied I’m the teacher. I said I wasn’t trying to challenge you, I just wanted to know. (Sinead)*”. She explained that she was

not trying to be challenging and that she needed to ask questions to understand, but the authoritative closing down nature of his response did not allow for her diverse learning style. The educator was more than likely unaware of Sinead's lack of cognitive flexibility or her challenges with lateral thinking, and she explained during the interview that she could not adapt her thinking quickly enough to take on board his views. She perceived that he thought she was being argumentative, which prompted an authoritative response of, 'I'm the teacher'. During the interview, she explained that asking questions was a strategy she had learned previously to cope with the cognitive outcomes of her TBI, but the teacher assumed this questioning was a challenge to his authority. The pace and size of classroom activity and group settings make arriving at a mutual understanding more challenging. For Sinead, his authoritative response made him unapproachable and it was in fact a public rebuttal for questioning him. This occurrence effectively cut off the space for mutual understanding to flourish. In situations like these, the student is left with a choice of having to meet the teacher on an individual basis, to explain their TBI and their strategies for management of their TBI outcomes for learning. In so doing, they are in effect forced into self-disclosure even if they did not wish to do so.

Pat also made reference to disclosure and that he had to reveal what he saw as a private matter in order to receive supports in the way other students may not have to. Due to the possibility that his behavior might be considered 'out of the norm' and consequently might be misconstrued, David also knew that disclosure of his TBI was necessary to mitigate adverse reaction:

all those things they knew about me, so when in class if I was being particularly intense, they knew not to take it personally and that I wasn't trying to prove them wrong or saying you are wrong. It's just if I asked a specific question, I needed to get the specific answer to that question or else I might as well have not been in the room for the entire class (David).

Disclosure was necessary for acceptance, or at the very least, to be accommodated in class.

4.2. Institutional Oppression

The second theme to emerge from the analysis was 'institutional oppression', which was concerned with written rules, and regulations that facilitate dominant student groups, with assumptions of homogeneity.

Participants reported incidences in which they experienced a type of power that was facilitated by the regulations of the institution. For example, reflecting on her autoethnography, the first author recalls her challenges to have the outcomes of her TBI recognized and the impact for her participation in her doctorate program of study. The introduction of yearly progression examinations for all doctoral candidates is lauded as an excellent initiative in ensuring doctoral completions. These examinations are predicated on a mini viva model, with a panel of examiners who interview the candidate on the progress of their work. Progression examinations are premised on the argument culture of third-level education (rapid questions and answers in defense of one's work), which at times can feel adversarial. The first author experienced these progressions as overwhelmingly confrontational and argumentative and she felt exposed. The panels require presentation skills, and multi-tasking, for instance the use of PowerPoint, and questions and answers in 'real time.' They also require physical navigation of a room in front of a sitting panel. These were all problematic for the first author because of her challenges with mobility, balance, speech, and with speed of information processing as a result of her TBI. Her ability to respond to 'off the cuff' questions was lost at the time of her accident. Her speech and fatigue adversely influenced her ability to participate in the usual examination format. This resulted in panels not recognizing her work as they were unable to look past her physical challenges. The constitution of these regulations and these panels are in effect 'blind' to disability. Failure became predicated on her lack of ability to perform on the day, not on the standard of her written work. Having to ask for accommodations and

exceptions felt like a further humiliation and ‘othering’, with the first author having to rely on the paternalism and good will of others willing to concede on a regulation format, rather than on being in a system that is predicated on recognition of disability as inherent in how regulation is created and instituted in the first place. She internalized this as a personal failure and it had an adverse impact on her well-being and sense of inclusion. Undertaking these progression reviews annually was demoralizing in terms of her work but also these examination processes put the outcomes of her TBI on public display. In effect, the regulation and process constituted for her an institutional incivility.

Concerning routine indignities in higher education, cognitive challenges were the main factors for participants in the classroom causing frustration and emotional distress. One participant, Pat found thought processing in the moment very difficult and therefore he felt that he sometimes failed to get the best out of the learning time in the classroom. A significant challenge for him was the assumption by educators that group work is the ‘right’ pedagogy for everyone, when in his case group work was a stressor:

Being involved in tutorials in education specifically, where lecturer would split the class into groups, make the group study a case study, on the spot, and deliver feedback in a set time. (Pat)

Pat struggled with retaining information and this outcome affected his results. Maintaining his concentration in lectures/labs and tutorials was difficult, because he found ‘in the moment’ thought processing very hard, and therefore felt he sometimes failed to get the best out of classroom time. He provided an example of this challenge.

If we were given fresh information to read over and partake in group activities I would struggle, as in general it would take me 3 or 4 times to read over materials and for me to fully understand or take in the required information. I found this aspect very embarrassing and frustrating. (Pat)

The interplay of having to do different tasks such as reading, and trying to understand information made him “*very self-conscious in labs and tutorials*”. Pat felt public embarrassment and frustration because he could not do things as quickly or as easily as his peers. He felt alienated as a result and he reflected that, at times, his incapacity to process information swiftly, in the group format, appeared to break up his solidarity within the group, creating some tensions for him.

5. Discussion

Access to education is more challenging for those who grapple with traumatic brain injury. To have those challenges further exacerbated by incivility and by ‘disability-unaware’ regulations, systems and processes is to add a further layer of incivility (both interpersonal and institutional) to an already deeply challenging experience. Incivility in most situations was fostered by ableist assumptions. Participants recognized the hierarchical nature of power and understood it as something inevitable and to be endured.

Existing research on TBI is from the perspectives of health care professionals and caregivers and often concentrates on the experience of grief or loss [30]. This tendency of TBI research to concentrate on the perspectives of health care professionals and caregivers limits the scope and focus of the social impact of TBI. It is also perhaps influenced by assumptions of medical practitioners that upon sustaining a severe TBI, education a person’s career aspirations have become limited (or are perhaps even over). Certainly, this was the assumption explicitly stated to the first author, who has consequently dedicated her education and future career to challenging such assumptions and to seeking to broaden TBI research into the social outcomes sphere. TBI is further debilitating in the social context, often because of less apparent outcomes that can be hidden and unseen including cognitive difficulties [31]. People with TBI perform well on cognitive tests that can be performed without much forethought, whereas tasks that require dividing attention between listening and processing skills, and writing ability, need the use of more complex cognitive skills [32]. Therefore, multi-tasking can be challenging for students with TBI. It is worth noting

that TBI is different from other neurological conditions in that it is non-progressive and consequently those with TBI can improve significantly when they have timely access to appropriate services that address their needs [33]. The authors know that there is hope for recovery and societal participation after TBI, but this can all too often be eroded by carelessness and ableist practices.

Oppression is maintained, as Freire emphasizes, through the suppression of critical consciousness and by providing people with messages that perpetuate certain 'norms' or beliefs about groups of people [34]. Words and behaviors significantly affect others. Thus, categorizing students with TBI as being 'slower' often pressures these students into trying to hide the extent of the barriers they experience. This is done to avoid internalizing stigmatizing and negative beliefs. Comments that negatively target a person's differences can cause shame, "an intensely painful feeling or experience of believing we are flawed and therefore unworthy of acceptance and belonging" [35] (p. 45). Even though negative comments hurt, in this study, one participant noted that they perceived this bad behavior from others to be more about the perpetrator and their assumptions rather than about them. It was the participant's way of rationalizing and living with the bad behavior of others. Hegemonic assumptions abounded in our experience—a "process whereby ideas, structures, and actions that benefit a small minority in power are viewed by the majority of people as wholly natural, preordained and for their own good" [36] (p. 17). The authors reflected on the hegemonic assumptions that were embedded in higher education and realized that the assumptions one can make as an educator, that we believe may promote equality, may in reality actually deepen inequality. For example, the introduction of annual progression examinations for doctoral candidates might seem a good idea, and for many they are, but they are predicated on a one-size-fits-all ideology that we are all the same. Indeed, Plato warns of this in his treatise *Laws* when he writes that *when equality is given to unequal things, the result will be unequal* [37] (757a). One size most certainly does not fit all, especially for those of us grappling with disability and access issues. Rather, it actually perpetuates inequality and creates an environment for a culture of incivility to flourish.

Normative labels often ignore difference and segregate individuals into social categories based on their attributes and both the participants and the author had many experiences of this. These normative labels prevent meaningful engagement with neurodiverse students in higher education. The formation and management of social identity is an interpersonal process [38], and it is not uncommon to read personal stories of individuals following a TBI that describe their sense of self as being threatened by the way they feel labels are imposed upon them [30]. The way a person becomes labelled, will influence the way they respond and cope with interactions. One recognizes that disability labels are an attempt to describe differences in functioning and behavior but they depend on assumptions of normalcy. Students with TBI in this study articulated being treated in ways that privileged homogeneity and put pressure on them as they could not conform to the expected norms of teaching, learning and supervision. This type of treatment left some hurt, and left them questioning their abilities. Being expected to conform caused emotional hurt for participants and this also resonated with the first author's story, who had experienced similar hurts, especially when these conforming expectations came from academic staff, lecturers and supervisors or even disability support staff.

Uncivil interactions can serve to maintain the status quo in higher education by making the environment off-putting for neurodiverse students. Members of dominant cohorts may engage in uncivil interactions with minority group members [39], and for the first author, it challenged her sense of belonging. Students often develop imposter syndrome and may have a fear of being discovered as a fraud or discovered as non-deserving, despite having demonstrated their talents and having previously achieved success. Imposter syndrome and academic individualism predisposes one to self-doubt and self-blame [40]. Typically, those with imposter syndrome tend to negate themselves and to attribute their success to non-ability factors [ibid] (p. 148). Consequently, they may try to avoid situations that would expose any perceived incompetency. The assumptions that neurodiverse students

are less cognitively capable and less capable of academic success in higher education or careers are common biases faced by students. Faculties and departments subconsciously may favor neurotypical students, as it may be easier (less call on time and less need for affective support giving) to support these students, resulting in a further burden for TBI students to find empathetic educators which may or may not be present in a given environment. The results of continued incivility within and outside the classroom can range from toxic faculty–student relationships, lowered retention of staff/students and an overall reduction in this environment [41]. Dropping out of education can be a result of the intersection between individual and institutional factors. However, the risk is exacerbated when student relations suffer because those within the academy are not practicing ethics or politeness [42] or indeed where they are so overburdened and exhausted in a performative culture that their capacity to exercise politeness to those who need it most is reduced.

Awareness is key for reduction of incivility for those who grapple with the outcomes of TBI and who are in the education setting. Keeling posits that when a person thinks of higher education institutions, they often think of them as an inanimate object rather than structured communities of people [43]. By doing so, it depersonalizes the process of engagement. The community of people in the university that has responsibility for specific management tasks and decisions is commonly called the administration. By referring to “the administration”, one unintentionally transforms our perceptions, removing human attributes. The use of impersonal terms allows us to make claims about “the administration” neglecting their individuality and humanity. In the same way the generic term “students” is used, leads to a losing of their unique attributes [ibid] (pp. 141–142), paving the way for facilitating unawareness about a particular cohort within the student population. In many cases, unawareness causes relationships between students and institutions to break down. Higher education institutions devolve responsibility for the development of awareness and relationships to individual faculty or staff members. Therefore, awareness is positioned as isolated or localized because it is not seen as a collective responsibility and the workload on the individual faculty member, especially in performative and neoliberalist contexts could become too much.

Research illustrates that more contact and awareness promote more positive attitudes towards people with disabilities [44,45]. Having more positive attitudes towards students with TBI increases their sense of belonging and well-being and this in turn increases their ability to participate. Linden et al. assert that those with brain injuries are judged less favorably and exposed to more discriminatory attitudes because they are believed to be to blame for their own injuries [46]. The way in which one receives an injury influences whether or not they are perceived as being to blame and this has significant implications for educational campaigns, community integration and rehabilitation efforts. Therefore, persons involved in a car accident (such as the first author), a fall or an assault (as many of the participants had experienced) would possibly be subject to various prejudicial treatment depending on whether they are perceived as victim or perpetrator. TBI is more common than one would assume, and can range from head injury through contact sports, to severe TBI from accidents. TBI affects more than we realize and, as such, societal awareness is essential. There is need for close attention to deconstructing unconscious bias and ableist assumptions of teachers/educators, administration employees and fellow students towards students with TBI. A key awareness-raising tool that could be readily available for all is an unconscious bias training workshop. These are now provided online and are mandatory in all universities in Ireland, with particular emphasis on race and gender, but disability still remains less prominent in unconscious bias training. Such training usually comprises “a session, programme or intervention in which participants learn about unconscious bias, typically with a view to reducing the negative impact of bias on organisational practice and individual behaviour” [47] (p. 11). This workshop involves educating people about how unconscious bias operates and promotes strategies to lesson prejudice and unfairness. Educators/teachers who undertake this training become more cognizant of their vulnerability to bias and they display more favorable expectations

towards individual students [ibid]. Recognizing the way that “institutions are ideologically and practically orientated to privilege certain groups and marginalize others, is critical for teachers to understand the experience of being a member of a historically marginalised group” [48] (p. 822). In this way, educators/teachers can potentially create a more socially just educational experience for students with TBI and provide the conditions for them to flourish through their recognition of their uniqueness as a student.

Being present in “stress-soaked” environments adversely effects learning, judgement, adaptive thinking and the health of individuals and organizations [49] (p. 135). Experiencing higher education as a stress-soaked environment does little to advance the challenges that participants experience with inflexibility and lack of lateral thinking (already adverse outcomes for those with TBI). These are further complications that require further investigation. This research illustrated how the institution’s regulations become technologies of power that unwittingly marginalize students with TBI, i.e., the one-size-fits-all model does not fit all and actively disenfranchises some. The current approach appears to be predicated on a presumption of normalcy with accommodations made for ‘inclusion.’ We would argue that this is the wrong starting point and that education systems need to begin with presumptions of diversity, and ‘disability proof’ all regulations and systems from the get go, similar to ‘gender proofing’ that is now commonplace for all policy in higher education.

Burstow makes conceptual links between trauma and oppression [50]. She argues that individuals from oppressed and marginalized groups are violated in ways that they experience lasting psychological effects and writes “The point is the oppressed are routinely worn down by the insidious trauma in living day after day in a sexist, racist, classist, homophobic and ableist society” [ibid] (p. 1296). Additionally, she describes trauma not as a disorder, but rather a reaction to a type of wound with a physicality to trauma that she advocates must be acknowledged. She argues that the trauma of oppression often results in alienation from the body. Being treated as somehow ‘less than’ and being made to feel different to an able-bodied majority creates alienation and prevents genuine inclusion. For someone grappling with the outcomes of TBI, the impact of incivility is far more complex and potentially debilitating. Every negative and rude encounter can potentially trigger negative emotions and negative appraisal of interactions in college. Assumptions of regulative, ‘one way of doing’ do not help or support students with TBI. For example, due to cognitive processing delays and excessive fatigue (outcomes of TBI), it may not be feasible for a student with TBI to complete a PhD in the traditional manner as the data in this study illustrate.

Empowerment through ethics of care, challenges normative assumptions of inclusion for neurodiverse students with TBI in Ireland. Thus, rethinking empowerment to include an ethic of care emphasizes the importance of interdependent relationships and relational autonomy. This understanding of empowerment and care, as advocated by Kittay, is not of paternalism, but comprises encounters that are respectful, attentive and cooperative [51]. This is where Buber’s relational ontology is most helpful to educational theory [52]. One cannot downplay the power dynamics that exist in higher education. Authoritarian methods of teaching and of educating students can leave both the teachers and students feeling like they are under surveillance, disempowered and alienated from each other and that can hinder learning. Buber gives us a humanistic, theoretical frame to challenge the power dynamics that exist in higher education [ibid]. Open and honest dialogue, respect, and mutual participation are essential for authentic inclusion and for ensuring an educative climate where incivility has no room to flourish.

Students with TBI are prepared to engage in third-level education, they exercise their personal agency in very challenging circumstances and, in so doing, open themselves up to the culture of the higher education setting. Exercising such agency provides opportunity for development and growth, because participation in education can improve critical reflection, increase confidence and enhance recovery. However, opportunities for growth can be wiped away by carelessness, marginalization (unwitting or otherwise) and/or adversarial and

demeaning behaviors. In the context of student engagement, an alternative to hierarchical relationships and power *over* is power *with*, which can be considered as a positive use of power as it is about more equal power relationships rather than domination [53]. The authors advocate that agency is important for those with TBI in higher education. While this study did not examine agency *per se*, clearly participants were agentic in accessing a system not tailored to deal with the many challenges they experienced. It was also evident that opportunities for agency were somewhat limited for participants—so much so, that forced disclosure was necessary in order to gain support. This warrants further investigation.

It is important to raise awareness of and to challenge incivility that is manifest towards disabled students in higher education. The development of positive psychology has contributed to a focus on positives rather than negatives, on resources rather than deficits—for instance, a focus on psychological capital. These authors postulate that psychological capital is an individual's positive psychological state of development, and is categorized as having the confidence (self-efficacy) to undertake and to succeed at a task. It also means having optimism about succeeding now and in the future, persisting towards a goal but also having the ability to adjust the path towards the goal (hope); and finally when faced by adversity, a person has the ability to sustain, bouncing back and attaining success (resilience) [54]. Thus, a student's positive psychological state of development enhances their ability to cope with the consequences that incivility posed. The tendency is often to focus on building the resilience of individuals. However, the authors caution that a focus on the individual is not enough and is a potential further marginalisation (an individual problem rather than a systemic/societal one). A systemic approach is essential. The culture and climate of educational institutions need to enable inclusion and to be authentic in inclusivity. To really achieve this would be to radically address normative regulation and policy making and ableist-centric teaching that continue to dominate the higher education environment.

6. Limitations

This study is an exploratory study. Autoethnography is viewed by some as too introspective and the insights from the first author may indeed be viewed in that vein by some; but for others, it provides the quintessential voice of a marginalized woman and her struggles for acceptance and success in the academy, and mirrors the struggles of many others with disabilities in this environment. Autoethnography has been described as educational research by Mendez [54], who cites Bochner and Ellis [55] when she advocates that—"it show(s) people in the process of figuring out what to do, how to live and what their struggles mean [55,56] (p. 111). The use of a gatekeeper to distribute information on this study will have influenced the responses from participants and may have colored their willingness to participate. The authors cannot verify how many were actually invited to participate. Given the design, the small sample and the nature of this study, it is not the intention of the authors to seek to generalize from the data. Rather, the aim is to illuminate the voices of students with TBI and to seek to promote a discourse of inclusion that is grounded in lived experience. This paper is viewed as a first step and it is the authors' hope that it may provide some catalyst for further research.

7. Conclusions

That incivility is unacceptable is a given. That incivility is experienced by students who grapple with disabilities is unfathomable. Positive change will not be a reality until the reporting of such interactions is not frowned upon and until there is collective agency that asserts incivility and negative behavior will not be tolerated within higher education. The best way to bring about better inclusion for students with TBI is to adjust the environment to be more caring, kinder and more aware of the diversity of the needs of students with TBI. This paper is a first step towards raising awareness of the phenomenon. Poor behavior from others creates toxic educational spaces and there should be no room for this type of behavior when students with TBI are already grappling with significant challenges.

Students with TBI who develop capacity for critical consciousness become capable of analyzing the world around them in ways that make assumed and established norms visible for both themselves and others. More emphasis has to be placed during dignity and respect training in the academy about what constitutes authentic inclusion for neurodiverse students with TBI and for disability in general. There is clearly a long way to go before more accountability for one's actions within the academy becomes an expected norm [1,6], but such accountability is essential if neurodiverse students are to be given opportunities to be successful as students, future scholars and colleagues in the academy.

Author Contributions: For research presented in this paper is a result of a collaborative effort. Contributions to the paper were as follows, and were identified by author's initials; Conceptualization, T.S., N.K., P.M.-M., methodology designed by T.S., N.K., R.S., P.M.-M.; formal analysis, P.M.-M., T.S. and R.S., writing—original draft preparation, T.S., P.M.-M., writing—review and editing, T.S., P.M.-M.; visualization, T.S.; supervision, P.M.-M. and N.K.; project administration, T.S. and R.S. All authors have read and agreed to the published version of the manuscript.

Funding: This research received no external funding.

Institutional Review Board Statement: The study was conducted according to the guidelines of the Declaration of Helsinki, and approved by the Institutional Review Board (or Ethics Committee) of the University of Limerick (protocol code 2017_12_16_EHS; on 16 December 2017).

Informed Consent Statement: Informed consent was obtained from all subjects involved in the study.

Data Availability Statement: Data can be accessed on request from the first and last author, bearing in mind confidentiality and sensitivity issues.

Conflicts of Interest: The Authors declare no conflict of interest.

References

- Hodgins, M.; Mannix McNamara, P. Bullying and incivility in higher education workplaces: Micropolitics and the abuse of power. *Qual. Res. Organ. Manag.* **2017**, *12*, 190–206. [\[CrossRef\]](#)
- Hollis, L.P. Bully university? The cost of workplace bullying and employee disengagement in American higher education. *Sage Open* **2015**, *5*. [\[CrossRef\]](#)
- Smith, F.L.; Coel, C.R. Workplace bullying policies, higher education and the First Amendment: Building bridges not walls. *First Amend. Stud.* **2018**, *52*, 96–111. [\[CrossRef\]](#)
- Andersson, L.M.; Pearson, C.M. Tit for tat? The spiraling effect of incivility in the workplace. *Acad. Manag. Rev.* **1999**, *24*, 452–471. [\[CrossRef\]](#)
- Pearson, C.M.; Andersson, L.M.; Porath, C.L. Assessing and attacking workplace incivility. *Organ. Dyn.* **2000**, *29*, 123–137. [\[CrossRef\]](#)
- Hodgins, M.; McNamara, P.M. An enlightened environment? Workplace bullying and incivility in Irish higher education. *Sage Open* **2019**, *9*, 2158244019894278. [\[CrossRef\]](#)
- Falvo, D. *Medical and Psychosocial Aspects of Chronic Illness and Disability*; Jones & Bartlett Learning: Burlington, MA, USA, 2013.
- Linton, S. *Claiming Disability: Knowledge and Identity*; NYU Press: New York, NY, USA, 1998.
- Freire, P. *Pedagogy of the Oppressed*, 30th ed.; Continuum Press: New York, NY, USA, 2000.
- Foucault, M. An Introduction. In *The History of Sexuality*; Pantheon: New York, NY, USA, 1978; Volume 1.
- Foucault, M. *Technologies of the Self: A Seminar with Michel Foucault*; Univ of Massachusetts Press: Amherst, MA, USA, 1988; pp. 16–48.
- Giddens, A. *The Constitution of Society: Outline of the Theory of Structuration*; Univ of California Press: Berkeley, CA, USA, 1984.
- Bratton, J.; Callinan, M.; Forshaw, C.; Sawchuk, P. *Work and Organizational Behaviour*; Palgrave Macmillan: London, UK, 2007.
- Freire, P. *Education for Critical Consciousness*; Continuum: New York, NY, USA, 1973.
- Foucault, M. *Discipline and Punish: The Birth of the Prison*; Penguin: London, UK, 1977.
- Wolbring, G. The politics of ableism. *Development* **2008**, *51*, 252–258. [\[CrossRef\]](#)
- Bourdieu, P.; Passeron, J.-C. *Reproduction in Education, Society and Culture*; Sage: London, UK, 1990.
- Bourdieu, P. Symbolic power. *Crit. Anthropol.* **1979**, *4*, 77–85. [\[CrossRef\]](#)
- Markus, H.R.; Shinobu, K. Culture and the self: Implications for cognition, emotion, and motivation. *Psychol. Rev.* **1991**, *98*, 224. [\[CrossRef\]](#)
- Oppong, S. Between Bandura and Giddens: Structuration theory in social psychological research? *PsychArchives* **2014**, *7*, 113. [\[CrossRef\]](#)
- Burnier, D.L. Encounters with the self in social science research: A political scientist looks at autoethnography. *J. Contemp. Ethnogr.* **2006**, *35*, 410–418. [\[CrossRef\]](#)

22. Ellis, C.; Bochner, A.P. (Eds.) *Composing Ethnography: Alternative Forms of Qualitative Writing*; Rowman Altamira: Lanham, MD, USA, 1996; Volume 1.
23. Ellis, C. *The Ethnographic I: A Methodological Novel about Autoethnography*; Rowman Altamira: Lanham, MD, USA, 2004.
24. Chatham-Carpenter, A. When the personal becomes professional: Surveillances of a professor's eating disorder personae. *Iowa J. Commun.* **2009**, *41*, 125–148.
25. Chang, H. *Autoethnography as Method*; Left Coast Press: Walnut Creek, CA, USA, 2008.
26. Heidegger, M. *Being and Time*; Macquarrie, J.; Robinson, E., Translators; Harper and Row: New York, NY, USA, 1962.
27. Reid, K.; Flowers, P.; Larkin, M. Exploring lived experience. *Psychologist* **2005**, *18*, 20–23.
28. Lai, C.K.; Hoffman, K.M.; Nosek, B.A. Reducing implicit prejudice. *Soc. Personal. Psychol. Compass* **2013**, *7*, 315–330. [CrossRef]
29. Cortina, L.M. Unseen injustice: Incivility as modern discrimination in organizations. *Acad. Manag. Rev.* **2008**, *33*, 55–75. [CrossRef]
30. Nochi, M. Loss of self in the narratives of people with traumatic brain injuries: A qualitative analysis. *Soc. Sci. Med.* **1998**, *46*, 869–878. [CrossRef]
31. Guilmette, T.J.; Paglia, M.F. The public's misconceptions about traumatic brain injury: A follow up survey. *Arch. Clin. Neuropsychol.* **2004**, *19*, 183–189. [CrossRef]
32. Park, N.W.; Moscovitch, M.; Robertson, I.H. Divided attention impairments after traumatic brain injury. *Neuropsychologia* **1999**, *37*, 1119–1133. [CrossRef]
33. Burke, S.; McGettrick, G.; Foley, K.; Manikandan, M.; Barry, S. The 2019 neuro-rehabilitation implementation framework in Ireland: Challenges for implementation and the implications for people with brain injuries. *Health Policy* **2020**, *124*, 225–230. [CrossRef]
34. Freire, P. *Education for Critical Consciousness*; Bloomsbury Publishing: London, UK, 1973; Volume 1.
35. Brown, B. Shame resilience theory: A grounded theory study on women and shame. *Fam. Soc.* **2006**, *87*, 43–52. [CrossRef]
36. Brookfield, S.D. *Becoming a Critically Reflective Teacher*; John Wiley & Sons: New York, NY, USA, 2017.
37. Plato, *Laws*, 6.757a. Available online: <http://www.perseus.tufts.edu/hopper/text?doc=Perseus%3Atext%3A1999.01.0166%3Abook%3D6%3Apage%3D757> (accessed on 10 April 2021).
38. Tajfel, H.; Turner, J.C.; Austin, W.G.; Worchel, S. An integrative theory of intergroup conflict. *Organ. Identity A Read.* **1979**, *56*, 9780203505984-16.
39. Rohrer, J. Compulsory Civility and the Necessity of (Un) Civil Disobedience. *AAUP J. Acad. Freedom* **2010**, *10*, 1–11.
40. Kumar, S.; Jagacinski, C.M. Imposters have goals too: The imposter phenomenon and its relationship to achievement goal theory. *Personal. Individ. Differ.* **2006**, *40*, 147–157. [CrossRef]
41. Marchiondo, K.; Marchiondo, L.A.; Lasiter, S. Faculty incivility: Effects on program satisfaction of BSN students. *J. Nurs. Educ.* **2010**, *49*, 608–614. [CrossRef]
42. Voynova, R.; Weber, J.-M. Conscious and Unconscious Aspects of Teacher-Student Interactions within a High School for Young Adults. *Int. J. Cross Discip. Subj. Educ.* **2017**, *8*, 3140–3150. [CrossRef]
43. Keeling, R. An ethic of care in higher education: Well-being and learning. *J. Coll. Character* **2014**, *15*, 141–148. [CrossRef]
44. Barr, J.J.; Bracchitta, K. Attitudes toward individuals with disabilities: The effects of contact with different disability types. *Curr. Psychol.* **2015**, *34*, 223–238. [CrossRef]
45. Hunt, C.S.; Hunt, B. Attitudes toward people with disabilities: A comparison of undergraduate rehabilitation and business majors. *Rehabil. Educ.* **2000**, *14*, 269–283.
46. Linden, M.A.; Hanna, D.; Redpath, S.J. The influence of aetiology and blame on prejudice towards survivors of brain injury. *Arch. Clin. Neuropsychol.* **2007**, *22*, 665–673. [CrossRef]
47. Atewologun, D.; Cornish, T.; Tresh, F. Unconscious bias training: An assessment of the evidence for effectiveness. In *Equality and Human Rights Commission*; Research Report; 2018; ISBN 978-1-84206-720-8. Available online: https://www.ucd.ie/equality/t4/media/ub_an_assessment_of_evidence_for_effectiveness.pdf (accessed on 10 April 2021).
48. Hyland, N.E.; Heuschkel, K. Fostering understanding of institutional oppression among US pre-service teachers. *Teach. Teach. Educ.* **2010**, *26*, 821–829. [CrossRef]
49. Stixrud, W.R. Why stress is such a big deal. *J. Manag. Educ.* **2012**, *36*, 135–142. [CrossRef]
50. Burstow, B. Toward a radical understanding of trauma and trauma work. *Violence Women* **2003**, *9*, 1293–1317. [CrossRef]
51. Kittay, E. The ethics of care, dependence, and disability. *Ratio Juris* **2011**, *24*, 49–58. [CrossRef]
52. Thomas, C. *Female Forms: Experiencing and Understanding Disability*; McGraw-Hill Education: London, UK, 1999.
53. Buber, M. *I and Thou*; Simon & Schuster Publishers: New York, NY, USA, 1970.
54. Youssef, C.M.; Luthans, F. Positive Organizational Behavior in the Workplace: The Impact of Hope, Optimism, and Resilience. *J. Manag.* **2007**, *33*, 774–800. [CrossRef]
55. Méndez, M. Autoethnography as a research method: Advantages, limitations and criticisms *Colomb. Appl. Linguist. J.* **2013**, *15*, 279–287. [CrossRef]
56. Bochner, A.P.; Ellis, C. Communication as autoethnography. In *Communication as . . . : Stances on Theory*; Shepherd, G.J., John, J.S., Striphos, T., Eds.; Sage: Thousand Oaks, CA, USA, 2006; pp. 13–21.