

Fatigante, M, Bafaro, S, Orsolini, M (in press, 2015) And you? What do you think then?" Taking care of thought and reasoning in intellectual disability. In M. O'Reilly, J. Lester (eds) *Child Mental Health: Discourse and Conversation Studies*. London: Palgrave Macmillan Publications

CHAPTER THIRTY TWO

"AND YOU? WHAT DO YOU THINK THEN?"

TAKING CARE OF THOUGHT AND REASONING IN INTELLECTUAL DISABILITY

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ABSTRACT

Fatigante et al. present a case study of the interactions between a target adolescent, Davide, with a diagnosis of mild intellectual disability, and adult therapists in assessment and therapeutic contexts. The study assumes a Deweyan approach to reflective thinking and analyses how the child's reasoning abilities display in conversation. Their analyses show that the adult-child discourse in these settings 1) enhances the child's argumentative abilities and 2) solicits the child to engage in a more positive consideration of how his mind works. The conclusions target the importance of providing children and adolescents with intellectual disability – who less likely engage in rich and complex social interaction – opportunities to

participate in conversation, as the natural site for developing sense-making tools and coping with self-ascription of incompetence.

Introduction

Intellectual disability is a frequent but still ill-defined condition, including individuals with heterogeneous cognitive profiles who are included in a same diagnostic category on the basis of both an IQ score below approximately 70 and a clinical assessment of deficits in adaptive functioning . In the new **Diagnostic and Statistical Manual** of Mental Disorders (DSM-V) the core deficits of *intellectual functioning* include the ability to reason, plan, solve problems, think abstractly, comprehend complex ideas, learn academic skills, and learn from experience.

Although each of these complex abilities could be analyzed through both specific neuropsychological tasks and qualitative ecologically sound methods, the assessment of intellectual functioning is still centred on IQ. In recent years there has been considerable debate on the idea that a general mental function such as intelligence fits not only the results of statistical analyses on the subtest concurring to IQ, but also the findings of developmental psychology and neuropsychology. It has been pointed out that there are several types of intelligent thinking (Gardner, 1999; Sternberg, 1985), and that acting purposefully, monitoring behavior, planning and organizing activities, are important cognitive functions that are not tapped by psychometric intelligence tests (Ardila, 1999; Fiorello et al., 2007; Greenspan & Woods, 2014; Salvador-Carulla & Bertelli, 2008).

An IQ typical of even mild intellectual disability has been traditionally conceived as an indicator of *thinking* disability. A traditional view thus assumes that thinking, reasoning, solving novel problems are not only core cognitive deficits of individuals with intellectual disability but also that such deficits cannot be modified by training or rehabilitation practices. Keeping such claim under the scrutiny of “critical thinking” we notice that reasoning processes are supported by specific cognitive functions (e.g., working memory) that on one hand are

often impaired in individuals with intellectual disability (Danielsson, Henry, Rönnerberg, & Nilsson, 2010; Edgin, Pennington & Mervis, 2010; Karmiloff-Smith, 1998; Schuchardt, Maehler & Hasselhorn, 2011; Van der Molen, Van Luit, Van der Molen, Jongmans, 2010) but, on the other hand, can improve as a consequence of training in individuals with mild intellectual disabilities (Van der Molen, Van Luit, Van der Molen, Klugkist, & Jongmans, 2010; Orsolini, Latini, Salomone & Melogno, 2014; Söderqvist, Nutley, Ottersen, Grill & Klingberg, 2012). Whether such improvements can transfer to reasoning skills is still an open research issue but the claim that reasoning processes cannot be treated in individuals with intellectual disability is not empirically grounded.

We should also consider that the ascription of limitations in reasoning leads parents, teachers, and clinicians to create simplified communicative environments that “inhibit the acquisition and display of pragmatic language skills” (Hatton, 1998: 80). Thus, emergent reasoning skills in children with even mild intellectual disability are likely to be hidden by conversational practices aimed at simplifying discourse rather than challenging cognitive and pragmatic skills. In this study, we assume that the adult-child discourse is an interactive context in which reasoning, far from being the property of a single individual's “mind”, can emerge as a co-regulated process, as a type of social action locally managed by the adult and the child, who are mutually responsible for its development and its consequences (cf. Wootton 1997). Analyzing discourse in such a context allows a psychologist to analyze verbal reasoning as emerging within what Vygotsky (1934/1978) called “zone of proximal development”, that social and interactional environment in which the adult engages with the child in the meaning-making process, enhancing his attempts to make sense out of his utterances and speech by progressively explicating and explaining.

By complementing the cognitive assessment this way, we can promote a change in the perspective of developmental assessment overall, accordingly to what Bruner mentioned for typically developing children: “...given an appropriate, shared social context, the child seems

more competent as an intelligent social operator than she is as a “lone scientist” coping with a world of unknowns (Bruner & Haste, 1987/2010, 3).

This Bruner’s claim is particularly suited for children who have been diagnosed with intellectual disability; due to their experiences of failure in complex tasks and academic performance, the lack of reciprocity they experience in interaction with peers (Tipton, Christensen & Blacher, 2013), the simplified forms of discourse they are addressed, these children often construct a self-image of individuals with low intelligence, with dramatic effects on their self-esteem (Heiman 2001).

As psychologists who take discourse as an essential arena to observe and assess the emergent interpretive abilities of the child, our efforts aim to identify *in* discourse those elements that are conceived as traditional ingredients of thought and reflection.

Vygotsky and the cultural- historical approach to thought and learning is certainly the main framework inspiring this enterprise, given the strong premise of this school that higher psychic functions stem from internalizations of social actions and are *mediated* by language as a primary symbolic artefact (Vygotsky, 1934/1978; Cole, 1996).

Besides the Vygotskian approach, we were also greatly supported by the tradition represented by the work of John Dewey and his inspiring formulation of Reflective Thought.

From his elaboration, we sorted criteria to identify and collect instances of talk, which more than others can be offered as evidences of the reasoning competences of a child, diagnosed with an intellectual disability.

In 1933, Dewey defined the notion of reflective thinking as ‘active, persistent, and careful consideration of any belief or supposed form of knowledge in the light of the grounds that support it and the conclusion to which it tends.’ (p. 9).

In contrast to a surface approach to learning and thinking, which relies on a procedure of “trial and error” and brings about “unassimilated knowledge” (143), reflective thinking implies at a basic level conceptualising a relation between “what we try to do and what happens in

consequence” (143). Questioning how (i.e., the thinking procedures by which) this relation is produced is the further step of a reflective searching for the detailed connections between activities and consequences.

Bearing the uncertainty, a sense of concern and emotional involvement in what is going on, a questioning orientation, taking the risk of not arriving at certain conclusions, are all constitutive of reflective thinking.

Project overview

Relying on the conceptual background so outlined, this chapter explores emergent reasoning and reflective thinking in a boy who has been diagnosed with intellectual disability. We will analyse discourse in which the boy interacts with a psychologist who tries to *engage* in the child's spontaneous narratives, and co-construct meaning and explanation building on his attempts to make sense out of what happens to him.

Data and context

The data we analyse are drawn from a series of individual assessment and treatment sessions between one senior psychologist (Margherita, director of the centre) and Davide (fictional name), 14.5 years old at the time of the diagnostic consultation (in Fall 2009) in the University clinical centre.

The conversations we examined include both the (overall) 4 meetings, which constitute part of the assessment protocol and a total of 10 adult-child sessions, extracted from the first 1.5 year of the treatment (up to September 2011).

To this corpus, we added a set of 6 peer (dyadic) sessions of therapy involving Davide and a peer who was also diagnosed with a mild intellectual disability. In both these sessions two junior psychologists worked with the adolescents on semi-structured activities including emotion recognition of visual stimuli and writing and discussion of self-narratives.

The sessions took place in a laboratory of the University clinical Centre and were videorecorded (except for the peer sessions, which were only audiorecorded). Informed consent for the recording and the treatment of the material was gained in written form by the children's parents and obtained orally by the adolescents.

The conversations of all sessions were first transcribed as regards content only; a detailed jeffersonian transcription was applied to those excerpts that were sorted as instances of reflective and argumentative episodes for the paper.

A Vygotskian framework for assessment and treatment

Professionals and trainees working in the Centre assume conversation as a privileged observational platform to qualitatively analyse how the child is able to take into account the other's perspective, construct and make sense of the experiences in which he is involved, engage in explanations, label and interpret emotions.

Discourse has also a central role in cognitive treatment of children with mild intellectual disabilities. In this clinical centre, treatments involve *core trainings* of specific cognitive functions (particularly of verbal working memory as reported in Orsolini et al, 2014), and *strategy trainings*, which are implemented through adult-child verbal interaction inspired by the Feuerstein approach (Feuerstein, Falik, Rand & Feuerstein, 2006). Phrases such as “according to you”, “how this thing *appears* to you” or “what did this *mean* to you”, “why do you think this happened?” are examples of adult language stimulating explanatory discourse and self-reflection. Eliciting and discussing narratives about the child's personal experiences is the *warming* stage of each training session. For some children, including Davide, narrative talk becomes an activity “per se”, and may become particularly used to report problematic events that have caused some suffering and “urge”, then, further elaboration.

Davide

Davide is a boy who arrived at the Centre with a diagnosis of intellectual disability of a non-specific aetiology, whose IQ ranged between 60 and 70 in different testing across the elementary and junior school years.

At age 3, Davide was applied a diagnosis of global developmental disorder. After two years of treatment within a small group of children, his communication skills increased in a remarkable way and the diagnostic label changed to that of a specific language impairment (evidenced in receptive language, verbal dyspraxia, phonological disorder), associated to difficulties in emotion regulation. Davide attended then speech therapy and entered the primary school one year later than expected, assisted by a special educator who, according to the Italian law, helps the children with special needs for a varying amount of time (accordingly to the severity of their impairment) in regular classes.

In the initial interview in our University clinical centre, Davide's parents reported that their son had always been very concerned with the difference in achievement he could detect between him and his peers at school. Since his referral to our centre when he was 14-year-old, he showed his interest in sorting his experiences and difficulties as object of explicit narrative and shared discussion. He eventually decided to accept to attend the therapy in our Centre telling us, that "you can perhaps change my life". We then clarified that we could not "change life" but only train skills and give support to his attempts to improve. "What are the directions in which you would like to change?" Davide answered that his desire was to communicate more with his schoolmates. After an initial treatment that was centred on working memory and executive functions (see Orsolini, 2012) Davide participated at weekly meetings first with another teen and then with a small group of peers with intellectual disabilities.

Analyses

Reflecting on others' behavior

We will examine an excerpt from the second meeting of the assessment stage. Davide refers to a scout excursion, focusing on the arrival of a new peer. We will focus on the argumentative abilities of the boy displayed in the narrative, his inquiry attitude, his involvement in searching for reasons and sharing this journey with the interlocutor.

Excerpt 1a. November 30, 2009

Participants: Davide (D.), T (senior psychologist)

- 1 D: poi c'era questo compagno nuovo,
 then there is this new mate,
- 2 T: ah si? è un nuovo entrato?
 uh really? is he a new entrance?
- 3 D: si, non è: no:: è l'unico. so:: so entrati altri nuovi compagni.
 yes, he's no:t no::t the only one. o:: other mates have entered.
- 4 però questo, è un compagno nuovo (.) che è russo.
 but this one, he is a new mate (.) who is Russian.
- 5 T: addirittura russo! ma parla italiano?
 Russian seriously! but does he speak Italian?
- 6 D: si. parla italiano, (0.6) si chiama Pavel.
 yes. he speaks Italian, (0.6) his name is Pavel.
- 7 T: mh!
- 8 D: e questo ragazzo::: non è bravo.
 → and this gu:::y is not good.
- 9 eh::: mh::: perché::: c'ha dei problemi grossi.
 → eh::: mh::: becau:::se he has big problems.
- 10 T: ho capito.
 I see.

11 D: e:::: dà:: dà fastidio a tutti.
 and:::: he:: he annoys everybody.
 12 per esempio, ieri sera,
 → for instance, yesterday evening
 13 T: mh=mh

Sequence 1-13 shows how Davide progressively builds the guy of the narrative as a *special* character, anticipated as *different* (a new mate, *Russian*) even before he is properly identified and given a name (Pavel). In this way, Davide establishes in discourse the sense of uncertainty and challenge due to the observation of another's "strange" behaviour, and anticipate his inquiry into the *reasons*, which motivated the event.

After having identified the guy, Davide makes a straight evaluative claim: *he is not good*, immediately supplementing the description of the *dispositional* state of the child with a behavioral evidence: *he makes trouble*, able to account for his claims.

Since line 13, Davide provides an example of how the child behaved; the telling of the actual episode plays as source of evidence for his original assessment of the child.

We then observe displayed in this discourse a basic argumentative structure, characterized by evaluative claims that are accounted for by descriptive or narrative evidence.

Excerpt 1b.

18 D: e questo ragazzo:, imitava:: la voce degli ↑a:nimali,
 and this guy:, imitated:: the voice of the ↑a:nimals,
 19 T: ma dai! (.) e come mai?
 you kidding! (.) and how come?
 20 glielo avete chie:sto come mai faceva così?
 did you ((pl.)) a:sked him why he was doing this?
 21 D: no. purtroppo:: i versi degli animali, si!

no. unfortunately:: the verses of the animals, right!

22 eh::: dei cani, si! no. non l'ha chiesto.

eh::: of the dogs, right! no. *hasn't asked.

23 però[↑]i miei compa:gni hanno avuto m[↑]o::lto fastidio e:::

bu[↑]t my ma:tes have been much ann[↑]o::yed and:::

24 e poi si so'inca↓zzati.

and then they got ↓pissed.

25 T: p[↑]ure!

r[↑]eally!

**((null subject in the original))*

As storyteller, Davide is oriented toward providing as much minutely as he can details about what the character's odd behaviour effectively caused to those present in the episode. In so doing, he presents himself as a valid and reliable observer of the social world he inhabits. The therapist intervenes before the story reaches a conclusion: she casts, by her assessment (line 24), the child's behaviour as exceptional, thus substantially aligning with Davide's stance in reporting the facts he witnessed. Also, the therapist proposes a scenario for which Davide and the other mates could be able to inquiry into the *reasons* underlying the boy's behaviour (line 25). Interventions like these ones, show the therapist's attempts to have the child engage in questioning reasons and ascribing causes to events (and behaviours), which can be made explicit and debated in interaction.

Reflecting upon the unconventional, bizarre behaviour and attitudes manifested by the child in the narrative, fostered Davide to question further the "reasons" behind such an oddity.

Excerpt 1c.

60 D: però io non ri[↑]esco a capire qu[↑]esto:: sa parlare bene.

→ still I c[↑]an't understand th[↑]is:: he talks well.

61 ma- si comp[↑]orta da bambino piccolo!

But- he beh[↑]aves like a small child!

62 T: mh!

63 D: non si capi:: non riesco::: a cap↓ire:::

→ it's not unde: I canno::t underst↓a::nd

64 perché qu↓esto si comporta, (.) da bambino pic↓colo.
 why this o↓ne behaves, (.) as a small child.

65 non cap↓isco.

→ I cannot underst↓and

66 T: eh! c'avrà le sue difficoltà probabilmente.
 eh! he will probably have his difficulties.

67 D: e::: io capivo meglio se:: i::

→ e::: I would have better understood if:: I::

68 io capivo me:glio,

→ I would have better understooo:d

69 se questo non sapeva parlaa:re, allora
 if this one could not ta:lk, then

70 T: eh!

71 D: però non riesco a capii:re, (.) perché questo c'ha dei problemi
 grossi,

→ but I cannot understaa:nd, (.) why this has such big problems,

The extent and limits of understanding or *not* understanding is what Davide interrogates himself.

In the overall sequence, Davide manifests his struggle to make sense of a mate's strange behaviour that appears as not legitimated by any language impairment, that is, something that publicly exposes a deficiency (also, more vulnerable to public mockery). It is easy to recognize how the report of Pavel's trouble constitutes a chance for Davide to make relevant his own difficulties (cf. Finlay and Lyons 2000 on the specific reference to others' *bad behavior* as a tool to develop downward comparisons), linked to, among other things,

articulatory problems. That is, as he interrogates the social and interpersonal reality *around* him, Davide also questions his own abilities, i.e. what happens *inside* him.

Explicitly questioning the *reasons* why certain events happen, and why people behave in certain ways, is the first evidence of Davide's reflective attitude developing in these learning therapy sessions, which attracted our attention. While reporting, Davide addresses the therapist - as well as himself – with questions regarding the underlying forces or, dispositions, motivating a person's behaviour, displaying as deeply aware of the normative grounds for which certain demeanour are regarded as “plain” and conventional, whereas others are rejected as problematic and bizarre

“Visible to oneself”: Davide's reflections on his own intellectual abilities

In this section, we analyze a set of different instances, which show how Davide applies a questioning stance and reflection to himself and examines in a critical light his “impaired” abilities too.

In (2), Davide reports to the senior therapist a narrative, implying quite a severe derogatory judgment on his way of thinking:

Excerpt 2a. *March 4th, 2010*

- 1 D: i:o certe volte quando parlo:: () (.) ho detto una
stupidaggine.
I: sometimes when I spea::k () (.) I told silly things.
- 2 quand'†era il mio compleanno:: o:: (.) il °compleanno di mio fratello°,
when it w†as my birthda::y or:: (.) °my brother's birthday°,
- 3 †ah si::! il mi:o compleanno, (0.4) sono venu:ti dei mie: i nonni,
†uh ye:s! my: birthday, (0.4) my gra:ndparents ca:me,

4 che abitano a:: xxx= di xxxx
 they live in:: ((name of a town))=from ((revision of the name of the town))

5 >gli ho ↑detto ai nonni di xxx<
 >and I ↑told the grandparents from < ((home village of the grandparents))

6 volee:te che vi facciamo porta::re la ↓torta. a casa?
 would yo:u like that we gi::ve you some ↓cake. to bring home?

7 mia zia, (.) mi ha detto. ↑↑sei sicu:ro di quello che stai
 dicendo?
 my a↑unt, (.) told me. ↑↑are you su:re of what you are sa:ying?

8 perché guarda che la torta non la puoi portare. ↑sennò si
 squaglia!
 for look you ↑can't bring the cake. ↑otherwise it will melt!

9 (1.0)

10 se fosse stato mio- mio cugino, (0.4) non la diceva mai
 if my- my cou:sin would be there, (0.4) he would have never told

11 una sciocchezza del genere.
 a foolish thing like this.

12 e nemm↑e::no un mio comp↑agno di ↓scuo:la. (.) h.=
 nor ↑↑a:ny of my sch↑oolmate ↓wou:ld. (.) h.=

13 T: =dici che è stata una grande sciocchezza?
 you say that it was such a big fooo:lishness?

14 D: s:i.
 y:es.

Here, Davide portrays a negative characterization of his conduct: he tells “silly things”.

Note how he builds this assertion. He tells that something, namely *telling silly things*, happens *sometimes* during a routine activity such as, talking. As such, the formulation is manufactured as a “script formulation” (Edwards, 1994), which, however not occurring on a regular basis (such as, *always* or, *habitually*) it can still be forecasted as possible, and non-exceptional.

In much the same format as he built the description of Pavel in two steps, first ascribing him a

stable characteristic (he is “not good”, and “he has big problems”) and then adding the evidential basis for this ascription, Davide reports in detail an exemplary instance, which accounts for the characteristic he mentioned. The narrative of the cake, including the animation (Goffman, 1981) of the aunt’s voice challenging the boy’s plan, works as an argumentative resource in support of the original claim “*when I talk I tell silly things*”.

Attending to his report, the therapist first offers the boy a chance to consider again his claim (line 14) then, she powerfully expresses a stance upon the matter, casting Davide's formulation as extreme (*goodness!*), and envisioning an exception to the script that he laid out.

Excerpt 2b.

- 15 T: ↑mamma m↑↑i::a =
 ↑my ↑↑goo:ddess=
16 a ↑ME non mi ↑se:mbra tutta sta' grande sciocche:zza.= Davide.
 I ↑DON't SEE: it such a big foo:lishness.=Davide.
17 ↑mamma mia! non ↑hai pensa:to che magari forse la to:rta,
 ↑my goodness! you did ↑not thi:nk that perhaps the ca:ke,
18 si sarebbe potuta rovina:re.
 could have ru:ined.
19 ci stanno delle ↑torte che ↑mica si ro↑vi:nano.
 there are ↑cakes that do ↑not ru:in at all!
20 D: la torta si può rovina:re, <da quando> è stata ↓presa.
 the cake can ru:in, from the <moment> when it has been ↓bought.
21 loro abitano lo- lonta:no, e e- giustame:nte,
 they live fa- far awa:y, and and- o:bviously,
22 dopo tanto t- tempo, (0.6) si può squa:g°liare°.
 after a l- long time, (0.6) it can me:°lt°.
23 ma io n- (0.4) non c'ho pen↓°°sato. (.) a questo fatto.°°
 but I did n- (0.4) not con°°sider. (.) this fact.°°
24 T: non ↑↑è così gra:ve.= Davide senti. non E' cosI' grave!

it's ↑↑not tha:t serious. = Davide listen. it's NOT thAt serious!

25 D: non ↑è grave.
isn'↑t serious.

26 T: ↑no::.. non ↑è gra:ve Da'. ↑eh! ch↑e è.
↑no::.. it's ↑not serious Da'. ↑eh! for ↑gooddess sake.

27 non ↑so:' cose gravi. =senti ti dico una cosa Davide:..
they're ↑no:t serious things.= listen I tell you something
Davide:..

28 se <↑tu stai più ca:lmo.> e ri<fletti con ca:lma>,
if <↑you 're more rela:xed.> and <reflect pa:tiently>,
29 senza avere sempre questo pre:side dentro, (.)
without always having this school dire:ctor, (.)
30 che ti pa:rla, (.) >che ti dice sempre< prendi ci:nque,
inside who talks to you, <who always tells< you get fi:ve,
(=poor school grade)),

31 sba:gli, dici le sciocche:zze,
you make mista:kes, you tell foo:lishness,

32 D: → ma- ma ↑perché. que:lla non è una sciocche-zza?
but- but ↑why. i:sn't it a foolish-ness then?

33 T: cosa?
what?

34 D: → il ↑fatto della to:rta! (.) non è una sciocchezza?
th↑at of the cake! (.) isn't it a foolishness?

35 T: ↑no! = non E' una sciocchezza! è una cosa normale, una ↑cosa
che-
↑↑no! = it's NOt a foolishness! it's a normal , s↑omething that
-

36 D: → è una cosa sTU:pida!
it's something sTU:pid!

37 T: ma ↑↑non è: una cosa stupida! perché prima di tutto,
but it's ↑↑no:t a stupid thing instead! 'cause first of all,

38 ci stanno delle torte che non si rovinano.
 there are cakes that do not ruin. (.)

39 anche se le fai stare tanto tempo fuo:ri. (.)
 even if you take them out for a lo:ng time.

40 di↑pende dal tipo di torta.
 it de↓pends on the type of cake.

41 è una cosa a cui un raga:zzo potrebbe non averci pensato.
 → it's something which a gu:y could even not think about.

The strength of argumentation, which Davide retrieves to account for the rationality and legitimacy of his position is such, that the adult therapist enters a series of vigorous attempts to remove the severe moral judgment that Davide has laid out on his performance, explicitly entering a disagreement with him (lines 15 and ff.)

The therapist provides an alternative explanation for his presumed failure, casting his belief as something that might instead have proved true, given different conditions (e.g., for cakes that do not melt). Yet, Davide re-enacts his argument (lines 20-23), better articulating the deductive reasoning upon which his judgment relies: (cakes) *can ruin* (after a certain time), grandparents *live far away*, (that) *cake can melt* (due to the long time of the travel).

Whereas Davide is oriented toward getting a confirmation to his explanation for the episode - or, if not, to get another one, similarly plausible –the therapist actively contests the moral implication that Davide drew from it, halting his inclination toward a negative judgment upon his thoughts.

The therapist's turns stem as urgent attempts to provide Davide with a less incriminating framework to interpret his actions: she opposes Davide's assertions, and eventually (line 27) she explicitly turns to an instructional frame, advising him - by using the metaphor of a school director wired *into* the boy - to ban this critical attitude once and for all (lines 29-31).

The therapist's advice (which remains uncompleted) does not stop Davide from questioning

about the validity of his claim (see lines 25, 32, 34, 36), this demonstrating his ongoing engagement in the reflexive interrogation about how his mind operates. At which point she elaborates with more detail an alternative account, able to withstand the comparison with the original one (lines 37-41).

The provision of a new reading of the story acknowledges the *situated* and mobile character of the interpretations, and the chance to account for events in varied ways: whereas Davide had adhered “irreflexively” to the aunt's interpretation of the event, the therapist prompts him to consider other routes and “tentative hypotheses”, and see how he may take a different, more self-advantageous seat, as observer of his thinking procedures. To this aim, also noticeable is the therapists’ shift (line 43) from reference to Davide as the subject of the narrative to reference to a general “guy”. This also works to cast Davide and his reasoning attitude as non-exceptional but, rather, similar to all kids of his age.

Rapley, Kiernan and Antaki (1998) showed that adults with intellectual disabilities - contrary to common assumptions about their tendency to deny ascriptions of incompetence and disability - were able to orient relevantly to their self-categorizations, exhibiting themselves as acute observers of their (varied, indeed) identities. Here, Davide pushes this orientation further, making all the more visible his own self-ascription of intellectual impairment. At the same time, he makes also visible – and open to be acknowledged by the therapist and discussed with her - his determined and extensive interrogation about how his mind works.

Reflecting upon “stupidity”

We also examined instances of talk developing during more structured activities, led by two junior therapists in the peer setting. Here, Davide and a peer (Lelio) were presented with material (photographs or sketches) meant to solicit emotion identification and labeling. In one of these, Davide is asked to comment upon a picture, portraying a child who sits at a desk with

a notebook, with a fist tightened and the other hand pushed on his head.

Excerpt 3a. *12th May, 2010*

Participants: t1 and t2 (junior psychologists), D (Davide), L (Lelio, 13.5 yrs old))

1. t1: che sta pensando?
 what is he thinking?
- 2 (2.2)
- 3 che si sta dicendo?
 what is he telling himself?
- 4 D.: fo:rse sta pensando a:, ma quanto sono stupido.
 ma:ybe he is thinking of:, but how stupid I am.
- 5 t1: dici?
 you say so?
- 6 (2.0)
- 7 può: esse:re.
 it may be:.
- 8 dice (.) ma quanto so: stupido!
 he says (.) but how stu:pid I am!
- 9 non mi sta riuscendo questo compito
 I'm not succeeding in this task
- 10 [può: esse:re
 [it ca:n be:
- 11 D.: [si!
 [yes!
- 12 t2: [come mai pensa che? ((to D))
 how come he thinks like that?
- 13 L.: [giusto!
 right!
- 14 t2: co:me mai pensa che sono stupido? ((to D))

how co:me that he thinks I am stupid?

15 L.: ° () tutte le cose che diceva lui° però=vabbè
 ° () all the things he said° but =ok

16 t1: lo ha detto bene lui <allora>
 he said it the right way <then>

17 L.: e=vabbè quindi giusto
 well =right so it's fine

18 t1: che dici Saverio?
 what do you say Saverio?

The child here interprets the angry emotion shown by the child's posture as associated to an ascription of incompetence (stupidity).

Similarly to the senior therapist in line 13 of excerpt 2, the junior psychologist here (C) addresses the child with the question: *you say (so)?*, thus casting the child's response as open to revision (Sacks, Schegloff and Jefferson 1977). Not receiving any response from Davide, the therapist accepts his contribution; still, she qualifies it as something uncertain, hypothetical (line 7); while doing so, she embodies the version given by the child and animates the character accordingly (line 8-9).

Having acknowledged the interpretation suggested by Davide (who confirmed, line 11), t2 pushes the inquiry a step further, soliciting Davide to consider (in a virtual scenario) what kind of evidences can motivate the (presumed) ascription of stupidity that the child in the picture does to himself.

See how a general preference toward considering any claim as open to justification and, debate, inspires also the question that t1 addresses to t2 (line 18), as she asks for his opinion.

Yet, t2's response orients more to the institutional aim of soliciting reflection from the adolescents than to display his own stance, and thus sends back the question again to Davide:

Excerpt 3b.

19 t2: dico. come mai pensa che sò stupido?
→ I say. how come he thinks I am stupid?
20 D.: ah: è perché è una cosa che faccio io
 uh: it's because it's something I do
21 t1: ah
 uh
22 D.: allora:: penso: che: questo si sta dicendo che è stupido.
→ so:: I think: that: this one is telling himself that he is
 stupid.
23 L.: io me lo dico de:ntro. >però non faccio così<
 I tell myself inside. >but I don't do like this<

Differently to *why*, the question *come mai* (how come) indexes a quality of problematization and critique to the object it applies. Interestingly, Davide begins his response with a change of state token (Heritage 1984), as if revealing that he acknowledged a new meaning of that question. We cannot tell whether the child would have referred to himself - as someone self-ascribing a judgment of “stupidity” – if the testing, *plus* the therapists’ questions had not made that particular self- categorization relevant in talk (Finlay and Lyons 2000). However possibly solicited by the ongoing activity, we maintain our focus on the reflective activity Davide engages: he takes in fact his experience as a target of description and formulation (*because it's something I do*) and from there, he draws implications on the way he *thinks upon* the world he is presented.

See at this regard, how he now frames the response he gave as *relative* to his own thought (*I think*, line 22), taken as an object of judgment *per se*. The twist that Davide does from responding about the picture to referring about himself, attracts Lelio too, who discloses his own habit of internally – and hiddenly – ascribing himself a judgment of stupidity.

The analyses conducted up to now lead us to consider how the conversational context arranged

in this therapeutic setting may foster, support or (as in Davide's case) enhance the likelihood that the child take his own experience as an object of “cognitive” and reflective exploration. Further, the setting such as the one examined also solicits the adolescents to orient to the identities and labels made *salient* (Finlay & Lyons 2000, 2005) in that particular context, related to the intellectual impairment.

At this regard, in the following, we finally show how Davide engages in a reflection on categorization of normality attributed to himself .

Reflecting upon being “normal”

In this session, Davide is referring to a boy, who does therapy in the Centre, who reported that he suffered exclusion in the school.

Excerpt 4a. September 28th, 2011

- 1 D mi dis- piace: che: si tro- ma- a scuola,
 I am so- rry: tha:t he fi- ba- at school, ((meaning: he feels bad at school))
- 2 perché s- se lui <arrivasse in questa scuola
 'cause I- if he <would get in this school ((meaning, the same school as
Davide's))
- 3 si sentirebbe meglio forse>
 he would feel better perhaps>
- 4 T e::h. forse sì.=
 e::h. perhaps he would. =
- 5 D =perché qua ci so-no ta:nti ragazzi::
 =for here there a- re ma:ny boys::
- 6 tipi come lui (2.0) e anche un pochettino come °me°.
 guys like him (2.0) and a little bit like °me° too.
- 7 ((D smiles))

8 T h. eh. eh.=un pochettino come tutti
 h. eh. eh.=((*she smiles*)) a little bit like everybody
 9 forse. (.) ↑pure ah ah .h
 perhaps. (.) ↑too uh uh .h
 (...)

Talking about the school where he is, highly known for including several pupils with learning or other kind of disabilities, Davide applies a categorization process, which first assigns the boy he is reporting a certain class (*guys like him*) then, with some hesitancy (signaled by the pause, decreased voice volume, smile), it includes also himself (*like °me°*). The label “like me” helps the boy not to target specific (likely problematic) features of the salient category of “learning disabled individuals” (cf. Finlay & Lyons 2000, 2005; Rapley, Kiernan and Antaki 1998; Rapley 2004), leaving them implicit. The design of Davide’s formulation at line 6, exhibits the child’s struggle between competing orientations: one that proposes his *difference* from a set of typified others (*guys*), to which his (rejected) companion would belong, and the other that proposes instead a *similarity* between him and the companion. The problematic quality of the assertion is indexed by the smile, which accompanies the statement and acts as remedial action (as light laughter often does; cf. Potter & Hepburn 2010). According to this interpretation, Davide’s smile would signal to the interlocutor that he is repairing to what he has just said, and acknowledging that his previous formulation (attributing an identity ascription to his friend only) was partially incorrect or imprecise.

The therapist affiliates with Davide by smiling back to him; still, she actively intervenes with a reformulation of the category, “strained” up to the point as to make it applicable to all individuals (including herself, cf. the plural *we*); so doing she rejects Davide’s proposal, offering him a normalizing, “lightened” alternative (see laughter at line 8, 9) to the creation of a special category that would include himself and his friend.

The therapist continues, compelling Davide to openly account for the category which they both

have alluded.

Excerpt 4b.

- 17 T perché dici.= bè- ci stanno raga-
 why do you say.= well - there are gu-
18 è una scuola .h dove si troverebbe bene.
 it's a school .h where he would feels well.
20 D forse sto:: più verso:: (.) i:: ragazzi:: (4.0)
 maybe I a::m closer:: (.) to:: guys:: (4.0)
21 quelli norma:li ↑ forse.
 the no:rmal ones maybe.
22 T <e chi è proprio °normale secondo te°?>
 <and who 's someone who is °just normal according to you°?>
23 <che vuol di:re. essere normali.>
 <what does it mea:n. to be normal.>
24 D bè:: (.) avere: mh: (2.0) problemi:: eh:: mh: (.)
 we::ll (.) to ha:ve mh: (2.0) pro::blems:: eh:: mh: (.)
25 non ↑gravi, problemi:: h:: (.) che si possono:: risolvere.
 not ↑serious, problem:: h:: (.) that ca::n be solved.
26 T risolvere ec[co!
 solved ri[ght!
27 D [e questi sono: °[prob-
 [and these are °[prob-
28 T [problemi che s- si possono attenu[a:re
 [problems that m- may attenu[a:te
29 D [e:: sì.
 [e:: right.
(...)

Asked by the therapist to account for the reasons why he suggested his school as more suitable

context for his friend, Davide makes an explicit reference to the category of “normality”. His several delays and other markers of uncertainty, punctuating his response, make evident the sensitive and dispreferred nature of making judgment about normality (that is obviously forced in a dichotomous view as opposed to abnormality) explicit.

The complex task that Davide has to solve is to reconcile the ascription of himself to the category of “normal” guys, with the acknowledgment of the difficulties that led him to attend the therapy sessions for learning disabilities. He solves the problem through a sophisticated compromise, in which errors are mentioned and acknowledged as part of normality, as long as they can be acted upon and eventually changed. Upon this “creative” solution the therapist agrees with the child and further elaborates his turn (lines 26, 28), stressing the character of modifiability of the problems, which - with regards to the learning difficulties - plays a central role in the theoretical and methodological framework shared by the therapists in the Centre.

Clinical relevance

Inspiring the overall treatment, is the idea that cognitive processes can be modified, that certain impairments can be mitigated and that, to this aim, having the child practicing and discovering his thinking and argumentative skills is pivotal.

Besides soliciting argumentative thinking, i.e establishing explicit links between what he observes/claims and the procedures by which he draws his observations, the conversational setting arranged in the therapeutic sessions we have examined appears also to solicit the child (or, adolescent) to tirelessly engage in a more benevolent consideration of how his mind works. Testing (and improving) the strategies by which the child makes sense of events means, within this perspective, also testing the *stances* he takes on them, assessing – and possibly changing - the extent to which he positions himself as hostile, helpless or discouraged toward his reasoning abilities.

Summary

In this study we analysed how thinking and reasoning were displayed by an adolescent with intellectual disability, within conversations with a psychologist who supported a varied range of conversational activities such: making evaluative claims, talking about norms (e.g., disputing about what should and should not be done or said), discussing explicitly about categorizations and ascriptions of “normality”.

We observed in Davide, the boy who has been object of our single-case examination, a genuine interest in formulating hypotheses, accounting for evaluative statements, disputing and challenging the psychologist’s different point of view. We have analysed discursive sequences in which Davide revealed able to identify problems, raise questions, and have his demands be responded, these also including demands upon himself, his ways to interpret the world and his own difficulties.

Davide’s narratives and descriptions analyzed in this chapter display a main concern, related to the question whether or not he thought differently and “abnormally” from others. Davide interrogated this question as he reported about the annoying conduct of his mate Pavel, behaving in a problematic way and blamed by his peers (excerpt 1). In this conversation Davide’s reflective thinking was somehow focused on the heterogeneous nature of *abnormal* behavior: someone can have skilled language but immature conduct. In the second excerpt, Davide validates the criticism he was addressed by the aunt, engaging in argumentative discourse that supported the criticism and solicited a debate with the therapist regarding a self-ascription of foolishness. We also observed in excerpt 3 how the child and a peer made relevant, in manners that were also coherent with the scenarios evoked by the therapists, their reflections about stupidity and self-criticism.

The final excerpt showed the therapist addressing Davide the crucial question “*what does it*

mean to be normal according to you?”, obtaining a version from him that reconciles the acknowledgement of problems and normality, and that also displays his awareness of the therapeutic work relevant here, which is aimed to remedy and lessen the impairing outcomes of the child's learning disability. In the local environment of the interaction, Davide’s has demonstrated to be able to build an argumentative and reflective context for demands that are relevant to him; he showed able to discuss and evaluate uncertain situations, to search for connections between events, persons and thought in order to understand social scenarios; further, he also displayed as keen to question his own way of thinking and acting in the world. Data also unearthed how Davide engaged in self- categorizations and made relevant social comparisons to others (Finlay & Lyons, 2000). Due to the acknowledgement of the topic as worthy of an appropriate length and in-depth analysis, we opted for deferring this examination to another place, while advocating instead, the need for psychologists to consider these instances as indicators of the child's reasoning abilities unfolding in conversation, which can add valid information to testing results on cognitive performances.

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Clinical practice highlights

1. Always include a conversational section in therapy setting as a way to offer the child/adolescent opportunities to narrate, share and “test” his interpretations about his own everyday experience. This will foster the child's “natural” abilities of reasoning and reflection, and make his questions on how “the world around him” works, public and open to debate.
2. Pivotal role of the child-therapist's explicit discussion and debate about how the child/adolescent account for his learning mechanisms and his failure; where a self-attribution of incompetence or, “stupidity” surfaces in the child's narratives and performance, dedicate a special time to work with it.
3. Always ask yourself whether the ability (and, pleasure) of cognitive exploration of the child/adolescent may be halted and impaired also by his consideration of “how his mind works”.
4. Engage and share with the child/adolescent a sense of concern and emotional involvement in what is going on, support a questioning orientation, bearing the risk of not arriving at certain conclusions (constitutive elements of reflective thinking).
5. Display to the child/adolescent that therapy not only means to improve learning, or “compensate” certain difficulties, but also to take a good “care” of his thought. Include the analysis of changes of the child's *stance* toward his own way to think and reason.

Glossary

Reflection= According to Dewey, reflection is both an intellectual and emotional enterprise implying the establishment of connections and ties between elements of experience (e.g. antecedents and consequences). It includes subsequent steps: a sense of a problem with the related attitude of bearing the uncertainty, a sense of concern and emotional involvement in what is going on, a questioning orientation, the acknowledgement of thinking as “an actual part of the course of events and designed to influence the results” (Dewey 1916: 154)

ZPD= Zone of Proximal Development; for Vygotsky, it refers to the distance between the actual development level as performed by the child independently and the level of potential development, which the child can reach under adult guidance or in collaboration with more capable peers. In this study, the discourse between the adult therapist and a boy with intellectual disability was analysed in terms of the ZPD metaphor, creating a supportive environment for reasoning skills.

Argumentation= type of discourse in which including an assertion or claim accompanied by evidences and warrants which validate it.