

Compensatory Personalization: When Expertise Meets the Organizational Void

Maya Yachini^{1,2} & Orit Avidov-Ungar³

¹The MOFET Institute, ²Tel-Aviv University ³Achva Academic College,

Research Objective

To examine how MA-prepared LD specialists navigate professional learning, develop adaptive strategies, and perceive organizational barriers in unsupportive school environments.

Theoretical Framework

- The Personalized Continuing Professional Learning (PCPL) model (Avidov-Ungar, 2024), posits that Supported Personalization depends on alignment between teacher agency and institutional support.
- The Theoretical Gap: Existing research largely assumes supportive school environments, leaving unclear how personalization functions in organizational voids.

Methodology

Design & Analysis

Qualitative interpretive; Abductive thematic analysis

Setting

Public schools in Israel

Participants

15 specialists with an MA in Learning Disabilities.

Data Collection

60–90 min semi-structured interviews.

Results

- LD specialists operate within an "Organizational Void": structural isolation and absent clinical supervision.
- Graduates deploy what we term Compensatory Personalization: a substitute for institutional structures, constructed through digital networks and AI tools.
- Individual resilience reaches its limits, revealing the need for organizational structures that sustain specialist practice.

Four analytic themes



Graduate study as foundation

"I felt like I reached home... someone gave me the names for it." - **Mor**



Adaptive strategies & digital networks

"It organizes my thinking... it doesn't tell me what to do, but it gives me directions and ideas." - **Sharon**



Structural isolation & the organizational void

"I often feel that I have no one to consult with..." - **Efrat**



The Limits of Compensation

"I decided to save my sanity and leave." - **Nur**

Conclusions

- **Compensatory Personalization is a symptom, not a solution.** When individual resilience substitutes for institutional structures, sustaining specialist practice becomes dependent on personal rather than organizational resources.
- Policy must shift the burden from individual to institution. Structured clinical supervision and regional peer networks are essential conditions for Supported Personalization.