



Specific Learning Disabilities - Mainstream Classroom Contexts

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Kabir's parents look tired, knowing that this seventh grade parent-teacher meeting would be identical to all the teacher interactions they have had in the past. Teachers would repeat their concerns about his poor reading skills, sloppy handwriting, incomplete classwork, numerous spelling errors and his reluctance to engage with academic tasks. Kabir's report cards consistently had the standard teacher comments- needs to improve, can do better if he works harder. His parents know him to be an averagely bright child, an observation often corroborated by his teachers in school and his tuition teacher, but his academic skills and performance seemed to indicate otherwise. Why, they wondered, was he being so lazy, unmotivated and difficult? The school recommends that Kabir visit a psychologist to receive a formal learning assessment, the parents initially resist the idea insisting that their son is 'not mad' but agree to it eventually.

With every referral I receive for a formal learning assessment involving a high school adolescent, there is recognition that poor grades are just the tip of the proverbial iceberg. Assessment sessions unravel years of the adolescent battling negative parent, teacher and peer attitudes, experiencing failure practically on a daily basis in the classroom, parents feeling helpless and pressurised and teachers expressing their limitations in working with learning difficulties in a mainstream classroom. Research on children who are challenged by classroom difficulties indicate that negative early learning experiences constitute significant risk factors (Hamre and Pianta, 2001) and these may have possible long term implications on future academic choices, career options and psychological well-being.

Kabir's story is not an unfamiliar one; it is unfortunately played out across millions of families of school going children in India. Research conducted in Maharashtra reported that the delay between attention and learning difficulty symptoms first being noticed and the child being diagnosed was nearly six years on an average (Karande et al., 2007). The delay is compounded by the fact that while there are definite early warning signs evident in elementary school, these become pronounced when the child enters middle and high school. Poor early identification systems and the quality of elementary education a child receives, impact the severity and prognosis of learning difficulties.

What are specific learning disabilities?

Chronic scholastic underachievement in a child is typically the most common reason for teachers and parents to seek assessment for their child. While this may indicate the presence of a primary learning disability, it can also be secondary to other psychological or social conditions. The term Specific Learning Disability (SLD) is often used interchangeably in India with learning difficulties or to describe students who are regarded as 'slow learners'. SLD however constitutes a distinctive diagnosis and refers to a heterogeneous group of disorders in one or more of the basic psychological processes involved in understanding or in using language, spoken or written. These may manifest itself as difficulties in the child's ability to listen, think, speak, read, write, spell, or do mathematical calculations. SLD excludes learning problems that are primarily the result of visual, hearing, or motor disabilities, of mental retardation, of emotional disturbance, or of environmental, cultural, or economic disadvantage (IDEA, 2004).

SLD is often referred to as the 'hidden disability' for its ability to go undetected and confound parents and teachers alike. The child with SLD has an average to above average range of cognitive functioning and hence looks and sounds like any regular child in the classroom, but may have significant difficulties with tasks involving reading, comprehension, spelling, writing and/or math. The severity of difficulties exists on a continuum ranging from mild to severe.

SLDs are currently viewed as neurologically based deficits occurring in specific cognitive processes. Research on what causes SLD points to the involvement of genetic factors and/or brain insult in the antenatal, natal and postnatal periods. There is no cure for SLD, however, with early and consistent intervention, the individual learns to cope effectively.

SLD in the classroom

Researchers warn us that epidemiological studies of SLD in India are challenged by a complex array of socio cultural, economic, language and quality of elementary schooling issues (Karanth, 2002). Available figures for the prevalence of SLD in India appear to vary from 6 to 14% of the general school going population. The ground realities of these figures indicate that the mainstream classroom and the teacher will continue to be the only viable points of providing intervention and support for the vast majority of students with SLD. Schools that are inclusive in their teaching philosophy and pedagogy are especially beneficial to children with SLD.

Teachers often cite large classrooms, lack of training and a rigid exam - driven curriculums as barriers to providing meaningful learning opportunities for children with SLD. There are also those who display a sense of acceptance of differences in the classroom and a willingness to engage with them. Policy makers and school managements seeking to promote inclusive practices would need to recognize that teachers' levels of demonstrating acceptability for inclusive classrooms are influenced by their personal belief systems and by a variety of context and programme specific variables.

Possible indicators of SLD

The process for diagnosis should take into account the child's response to any intervention measures, inputs from teachers, parents and performance scores from a variety of curriculum based and standardised tests administered by a psychologist. While the teacher is not required to make diagnostic judgments, she could be watchful of possible learning indicators of SLD in a child and initiate appropriate interventions. The Sarva Shiksha Abhiyan Manual (SSA, 2003) has a checklist for SLD which may also be used for initial screening by teachers in regular schools. Possible indicators of SLD listed in Table 1 are not a comprehensive representation, but are commonly occurring difficulties observed in the classroom. These may co-exist with areas of strength and talent in the creative/performing arts, sports, etc, and may appear as different clusters with varying levels of severity in children.

Table 1 - Possible indicators of SLD

Written Skills

- Dysgraphia- difficulties with writing
- Written work is of a poorer standard when compared to oral ability
- Letter confusion, presence of letter or word reversals
- Messy written work – poor letter formation, inconsistent size and spacing, frequent erasures and scored out words
- Spelling errors- same word may be spelt differently in a piece of writing, errors may indicate phonetic or bizarre spelling
- Poor pencil grip

Reading Skills

- Dyslexia - difficulties with reading and comprehension
- Has difficulty in sound blends and syllable division
- Difficulty in sound discrimination
- Difficulty with rhyming words
- Inconsistent reading levels
- Poor reading fluency and comprehension
- May lose place while reading, misses or adds or substitutes words
- Avoids reading activities such as reading aloud

Numeracy

- Dyscalculia- difficulty with numerical concepts
- Confusion with number line
- Confusion with number sequencing and place value
- Number reversals
- Confusion with computational signs
- Difficulty with learning multiplication tables

Motor Skills

- Dyspraxia- difficulties with motor skills
- Possible difficulties with gross and fine motor skills
- Difficulties with colouring, buttoning and tying laces
- Directional difficulties- left and right, above and below, cardinal directions on maps
- Difficulties with initiating and maintaining motor sequences

General Behaviour

- Easily distracted- lost, looks preoccupied
- May not follow through or comprehend instructions
- Incomplete classwork
- Difficulties with skills of organisation
- Performs better if actively supervised

Classroom interventions

Working to effectively meet the learning needs of children with a SLD in a mainstream classroom is a challenging task yet one that the classroom teacher will be required to undertake. These are few practical suggestions that teachers could consider in their interactions with students who have a learning difficulty:

1. Get informed- read up on difficulties the student demonstrates.
2. Accept that the child has learning difficulties and that your proactive and supportive stance is crucial to the child's success.
3. Communicate and collaborate with the parent. Regularly share positive feedback and concerns about how the student is doing at school.

References:

- Hamre, K. & Pianta, C (2001) Early Teacher-Child Relationships and the Trajectory of Children's School Outcomes through Eighth Grade Child Development, 72(2) , 625-638
- Karande, S., Satam, N., Kulkarni, M., Sholapurwala, R., Chitre, A., and Shah, N. (2007). Clinical and psychoeducational profile of children with specific learning disability and co-occurring hyperactivity disorder. Indian Journal of Medical Sciences, 61, 639-64

4. Accommodations can be made in instruction, classroom setting and assessments. Examples of accommodations for students with LD include: breaking down tasks into smaller steps, extending time to finish assignments or tests, letting a student borrow notes from another, appointing classroom buddies, preferential seating, allowing for verbal responses on tests etc.
5. Certain state exam boards and national exam boards (CBSE, ICSE, NIOS) provide accommodations for students who receive a formal SLD diagnosis. Teachers should be aware of these provisions and encourage the student to use them. These are not to be viewed as 'crutches', they are what level the playing field and enable the child with SLD a fair chance at experiencing academic success.
6. Actively teach study skills, these would include organizational skills, problem solving, time management, learning strategies, effective review strategies etc.
7. Offer specific and constructive feedback. For example- instead of stating 'can do better' on an assignment, specify exactly what areas the child needs to improve on- vocabulary, sentence structure, punctuation etc.
8. Frequently check for understanding and encourage the child to take part in class discussions.
9. It is helpful to provide supervision at the beginning of a task and to then monitor progress.
10. Establish a rapport with the child and frequently provide positive reinforcement.
11. Simplify content for the child by focussing on the core learning objectives of the lesson.

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