

UNDERSTANDING LEARNING DISABILITIES: GUIDELINES FOR
PARENTS AND CAREGIVERS

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UNDERSTANDING LEARNING DISABILITIES: GUIDELINES FOR
PARENTS AND CAREGIVERS

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Melissa Bunch
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ABSTRACT

A brief review of literature of different types of learning disabilities and successful teaching strategies was conducted. A second review of literature relating to government laws, assistance for parents and their children was conducted. Through a review of literature, it becomes obvious that great strides have been made to help children who are learning disabled reach their full potential and that they are capable of learning, but this is can be achieved through non-traditional teaching methods

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CHAPTER ONE

INTRODUCTION

In the 21st century, the goal is that all children are able to access education equally. This was not always the case for most of the United States history. In the past, the purpose of teaching was to help those with the greatest potential to learn, to excel. Schools did not have to make changes to any programs to meet any child's individual needs. Rather, those that had needs fell behind. To help students with disabilities, the U.S. Congress enacted the Education for All Handicapped Children Act in 1975, later renamed Individuals with Educational Disabilities Act (IDEA) in 2004.

Given that four to six percent of all students are classified as learning disabled, every teacher can expect to find students with disabilities in the classroom. Success for these students depends on focusing on individual achievement, progress, and learning.

Special education instructors are trained to provide individual instruction to each student on their caseload. General educators are trained to provide instruction to all students in general areas such as math, science, and history. Since general education instructors teach large groups, there usually isn't time for individualized instruction. Now, with the passing of the IDEA Act, general educators are now being asked to, design materials and activities that can meet

the needs of all students initially, rather than make modifications after the fact (van Garderen & Whitaker, 2006). This is known as Differentiated instruction.

Statement of the Problem

The purpose of this paper is to address fundamental questions that are important to parents and other caregivers who are not specialists in exceptional child education. Those questions include the following:

- What are the determinants of learning disabilities

What are the types of disabilities?

What are the social and emotional challenges that children with learning disabilities face?

- How can children with disabilities be prepared for college?

Delimitations of the Research

The research was conducted through the Karmann Libraries, University of Wisconsin-Platteville, Google Scholar, and the Racine Public Library in Racine, WI, over a period of sixty-one days. Primary searches were to be conducted via the internet through EBSCO Host with ERIC and Academic Search Elite. Key search topics will include “learning disabilities,” “educational experience and qualifications,” “types of learning disabilities,” and “teaching styles for the learning disabled.”

Method of Approach

A review of literature related for research, studies, and anecdotal evidence of children in public school systems that have learning disabilities and what the future plans are for these children will be conducted. The findings will be summarized and recommendations made.

CHAPTER TWO

REVIEW OF RELATED LITERATURE

The review of literature addresses the four questions presented in chapter one. Understanding the determinants of disabilities, types of disabilities, social and emotional challenges of children with learning disabilities, developing social skills and relationships and preparing the child with learning disabilities for college are addressed.

Learning Disability Determinants

By law, learning disability is defined as a significant gap between a person's intelligence and the skills the person has achieved at each age. For example, a fifth grader with an IQ of 100 who cannot write a simple sentence probably does have learning disability (LD).

Learning disorders may be seen by observing significant delays in the child's skill development. A 2-year delay in the primary grades is usually considered significant. For older students, such a delay is not as debilitating, so learning disabilities are not usually suspected unless there is more than a 2-year delay. Actual diagnosis of learning disabilities, however, is made using standardized tests that compare the child's level of ability to what is considered normal development for a person of that age and intelligence.

Test outcomes depend not only on the child's actual abilities, but on the reliability of the test and the child's ability to pay attention and understand the questions. Children with poor attention or hyperactivity may score several points below their true level of ability. Testing a child in an isolated room can sometimes help the child concentrate and score higher.

Each type of LD is diagnosed in slightly different ways. To diagnose speech and language disorders, a speech therapist tests the child's pronunciation, vocabulary, and grammar and compares them to the developmental abilities seen in most children that age. A psychologist tests the child's intelligence. A physician checks for any ear infections and an audiologist may be consulted to rule out hearing problems. If the problem involves speech, a doctor examines the child's vocal cords and throat.

In the case of academic skills disorders, academic development in reading, writing, and math is evaluated using standardized tests. In addition, vision and hearing are tested to be sure the student can see words clearly and can hear adequately. The specialist also checks if the child has missed much school. It's important to rule out these other possible factors. After all, treatment for a learning disability is very different from the remedy for poor vision or missing school.

If the school fails to notice a learning delay, parents can request an outside evaluation. After confirming the diagnosis, schools are obligated to

provide the kind of instructional program that a child needs. Though schools can assist with the instruction program, parents have an obligation to stay abreast of each step of the school's evaluation. Parents also need to know that they may appeal the school's decision if they disagree with the findings of the diagnostic team and parents always have the option of getting a second opinion.

Some parents feel alone and confused when talking to learning specialists. Such parents may find it helpful to ask someone they like and trust to go with them to school meetings. The person may be the child's doctor or caseworker, or neighbor. It can help to have someone along who knows the child and can help understand the child's test scores or learning problems. Because LD can affect the child and family in so many ways, help may be needed on a variety of fronts: educational, medical, emotional, and practical.

In most ways, children with learning disabilities are no different from children without these disabilities. At school, they eat together and share sports, games, and after-school activities. But since children with learning disabilities do have specific learning needs, most public schools provide special programs. (2008) Learning Disabilities, Retrieved June 23, 2008
Medicine Net Website: http://www.medicinenet.com/learning_disability/article.htm)

Types of Learning Disabilities

Approximately 5% of all public school students are identified as having a learning disability. LD is not a single disorder, but includes disabilities in any of seven areas related to reading, language, and mathematics. These separate types of learning disabilities frequently co-occur with one another and with social skill deficits and emotional or behavioral disorders. Most of the available information concerning learning disabilities relates to reading disabilities, and the majority of children with learning disabilities have their primary deficits in reading skills.

An important part of the definition of LD is its exclusions: learning disabilities cannot be attributed primarily to mental retardation, emotional disturbance, cultural difference or disadvantage. The concept of LD focuses on the differences between a child's academic achievement and his or her capacity to learn.

Recent research indicates, however, that disability in basic reading skills is primarily caused by deficits in phonological awareness, which is independent of any achievement-capacity discrepancy. Deficits in phonological awareness can be identified in late kindergarten and first grade using inexpensive, straightforward testing protocol. (Schlechty, 1997).

Interventions have varying effectiveness, depending largely on the severity of the individual child's disability. The prevalence of learning disability identification has increased dramatically in the past 20 years. The "real" prevalence of LD is subject to much dispute because of the lack of an agreed-upon definition of LD with objective identification criteria. Some researchers have argued that the currently recognized 5% prevalence rate is inflated; others argue that LD is still under-identified. In fact, it appears that there are both sound and unsound reasons for the increase in identification rates. Sound reasons for the increase include better research, a broader definition of disability in reading, focusing on phonological awareness, and greater identification of girls with learning disabilities. Unsound reasons for the increase include broad and vague definitions of learning disability, financial incentives to identify students for special education, and inadequate preparation of teachers by colleges of education, leading to over referral of students with any type of special need. (Schlechty, 1997).

There is no clear demarcation between students with normal reading abilities and those with mild reading disability. The majority of children with reading disabilities have relatively mild reading disabilities, with a smaller number having extreme reading disabilities. The longer children with disability in basic reading skills, at any level of severity, go without identification and intervention, the more difficult the task of remediation and

the lower the rate of success. Children with extreme deficits in basic reading skills are much more difficult to remediate than children with mild or moderate deficits. It is unclear whether children in the most severe range can achieve age- and grade-appropriate reading skills, even with normal intelligence and with intense, informed intervention provided over a period of time. Children with severe learning disabilities are likely to manifest an increased number of and increased severity of social and behavioral deficits. Children with disabilities in reading also manifest attention deficit disorder, their reading deficits are typically exacerbated, more severe, and more resistant to intervention. While severe reading disorders are clearly a major concern, even mild deficits in reading skills are likely to portend significant difficulties in academic learning. These deficits, too, are worthy of early identification and intervention. Even children with relatively subtle linguistic and reading deficits require the expertise of a teacher who is well trained and informed about the relationships between language development and reading development. Unfortunately, such teachers are in short supply, primarily because of a lack of professional certification programs providing this training (Hardman & Dawson, 2008).

When a child struggles with spelling, his writing is much slower than his thinking. This makes it hard for him to clearly express his knowledge and ideas in written school assignments. Spelling is especially difficult for

students with learning disabilities, so it is important that schools provide explicit, systematic spelling instruction on a regular basis throughout elementary school for these students. In order to evaluate spelling instruction in your child's classroom or to consider how you might help your child improve spelling skills, it helps to have some understanding of the skills students need in order to become competent spellers and the activities that promote these skills (Al-Yagon, 2007).

Information on learning disabilities can help parents understand that their child does not learn the same way other children do. They should find out as much as they can about the problems their child has with learning, what types of learning tasks will be hard for them, what sources of help are available, and what they can do make learning easier for their child.

Parents should look for clues that can tell them how their child learns best. Does he or she learn best through looking, listening, or touching? What is your child's weakest approach to learning?

Paying attention to the child's interests, talents, and skills can also be helpful in motivating the child's learning. For example, he or she may have great difficulty reading information but readily understand when listening. Take advantage of that strength. Rather than force reading, which can present the child with a "failure" situation, let the child learn new information by listening to a book on tape or watching a video. He or she may have trouble

with reading, but that doesn't mean learning can't happen in other ways. Many children with learning disabilities have average or above average intelligence. Taste, touch, sound, and seeing are other ways to learn that may be more beneficial to the child (Van Garderen & Whittaker, 2006).

Television can be a good place to start learning. If the child uses it properly, it won't be a waste of time. It can actually be beneficial to learning. A child can learn to pay attention, focus, improve listening skills, and increase the child's vocabulary. They will be improving their skills and having fun at the same time (Al-Yagon., 2007). Children deal with many changes while growing up and children with learning disabilities can find these changes hard to deal with.

Social and Emotional Challenges for Children

Dealing with emotional and social changes is a natural part of growing up, but it can be especially trying for children with learning disabilities. While in school, many LD children struggle with day-to-day tasks that can make them feel inferior to their peers. Along with having issues in the classroom, children with learning disabilities may lack important social skills that are necessary for making friends. The combination of these issues may

cause anxiety, stress, loneliness, and low self-esteem (Van Garderen & Whittaker, 2006).

If parents and teachers understand all issues that can come with learning disabilities, they can help the child to have a positive outlook, high self-esteem, useful social skills and other traits that can lead to success. Parents and teachers can also let the child know that there is more to life than academics. When children who are learning disabled succeed in dancing, art, music and other areas that are not related to academics, they will be more likely to build confidence in themselves and their abilities (Van Garderen & Whittaker, 2006).

Developing Social Skills and Relationships

Learning to interact with others successfully is a very important aspect of a child's development. Although many children acquire social skills by example, children with learning disabilities may have difficulty making friends. Teenagers with LD have been shown to interact less with their peers and to spend more free time alone (Martin, Martin, and Carvalho, 2008).

Not all young people who are LD experience social problems. Usually, the artist, class clown, or best athlete is likely to be accepted regardless of their learning disability. But, for many children with LD, lack of peer acceptance can become very painful and one of the hardest problems to overcome. Computers, tutors, and calculators can help children academically, but there is nothing similar to help them handle having no friends, lonely recess at school, or sitting alone at lunch. These require social competence or the skills needed for effective interpersonal functioning. These include both verbal and non-verbal behaviors that are valued and accepted by others.

Young people with social disabilities are usually less able than others their age to figure out how to behave in social situations and they are less aware of how others respond to them. This means that they act without knowledge or regard for social consequences. Most, though, tend to be unaware of their role, perceiving themselves as the victims of others' mistreatment. Therefore, they take little responsibility for their actions, blaming others or simply "bad luck" for events in their lives. What they do feel, though, is an overdose of criticism from peers and adults alike. (Martin, Martin, and Carvalho, 2008).

To help young people with social problems, it is important to understand what level they are having trouble and how their social issues

relate to their learning disabilities. The lack of maturity of many children who are LD affects them not only academically, but socially as well.

Communication skills also have social implications. Children who don't "read" body language and facial expressions very well are likely to miss important signals in life that are apparent others. This can cause feelings of insecurity, hopelessness, and inadequacy when interacting with others.

Although not all children with learning disabilities have social difficulties, those who do require special understanding and guidance from loved ones, not only in terms of their current functioning, but for the people they are capable of becoming. Even though each young person is unique, they all have the same needs—acceptance, approval, and a sense of belonging in the world and with their peers. This is especially true when preparing for college.

Preparing a Learning Disabled Child for College

What will happen to a child after high school can cause anxiety to many parents and children, but this can be multiplied if you are talking about a child with learning disabilities. What can be done to prepare a child with

learning disabilities? How can they work up to their full potential? What special accommodations may be made?

Congress has made many changes to the law to increase opportunities for more students to graduate with a regular diploma and then attend college. Students who are LD should begin their strategic planning early. Despite its purpose, IDEA has no jurisdiction after a student exits the K-12 school system. Colleges and universities work under a different set of rules – the Americans with Disabilities Act (ADA) and Section 504 Subpart E of the Rehabilitation Act. One important difference when comparing IDEA to the ADA and Section 504 is that IDEA has more procedural requirements. IDEA regulations establish timelines for student evaluations, specify who must participate, and outline the dispute resolution process in a way that shapes state, district and school rules. The ADA and Section 504 do not. This means that there is more variation in how the rules are structured from college to college because these laws do not dictate any one way to be implemented.

Since each college establishes its own procedures based on its interpretation of the ADA and Section 504, descriptions of what to expect at colleges are based on what is typical of most colleges, which means that it is important to check with each college about its expectations. As part of the planning process, guidance can be sought from a high school counselor on how to understand this information from colleges. Most colleges offer

support services including tutoring, personal counseling, writing centers, career counseling, and workshops in personal budget, study skills, and time management. These programs are offered to all students through academic departments, and student services offices. Disability service offices will likely encourage students to take advantage of these college-wide offerings. Disability services offices may offer specialized advising, study skills training and other services, but these are not required by the ADA or 504. (Brownell,2006).

At college, students need to register with the disability office and provide any paperwork that supports suggested accommodations. The disability office will assist in informing instructors of the learning disability, but it is up to the students to initiate the process with the school.

CHAPTER THREE

CONCLUSIONS AND RECOMMENDATIONS

Through a review of literature, it can be easily seen that great strides have been made in assisting children with learning disabilities. Prior to 1975, children with many different learning disabilities were labeled as slow, stupid, unable to learn and other terms. Great strides have been made, not only in diagnosing learning disabilities, but in treating them as well.

Since 1975 and with the IDEA Act of 2004, LD children have a greater opportunity to learn. Having a learning disability is no longer just the child's problem; it's the problem of doctors, parents, and social workers. Instead of being an issue that's not talked about, there are now websites, support groups, and special classes that support both children and their parents. Children who are LD are not just expected to learn with books; they can develop skills through properly monitored television, prep-classes, books on tape and by doing creative activities such as music and art.

Do children with learning disabilities receive as good as an education and as many opportunities as those labeled "normal"? The research would say yes. There is help from the age of diagnosis and through college and the job

market. LD children can excel in their abilities and improve on their disabilities. They can go from insecure, lonely children with a learning disability, to a positive, motivated adult with a learning disability. Everyone has weaknesses, but luckily an LD child has plenty of resources to become as strong as they can, in whatever they decide to pursue.

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