

ADULTS WITH LEARNING DISABILITIES AND SUBSTANCE ABUSE

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ADULTS WITH LEARNING DISABILITIES AND SUBSTANCE ABUSE

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Abstract

This paper explores the adequacy of special education for individuals with learning disabilities (LD) and the relationship between learning disabilities and substance abuse. Some important issues regarding these two variables were revealed in the literature review. Although special education started years ago schools are not equipped to address the needs of individuals with LD. Research showed that the majority of schools are not using correct assessment tools. Additionally, teachers do not have enough training to meet these individuals' academic needs. Furthermore, statistics showed that this population turns to alcohol and drug use to alleviate pain caused by academic hardship and peer rejection. A survey was conducted through Gateway Technical College in Kenosha, Wisconsin, and the results showed similar findings as the literature review. There will be some recommendations regarding the academic and non-academic needs of these individuals provided in this paper.

Table of Contents

Approval Page.....	i
Title Page	ii
Abstract.....	iii
Table of Contents.....	iv
 Chapter One: Introduction.....	 1
Statement of the Problem	
Purpose of the Research	
Significance of the Problem	
Brief Summary	
Restatement of the Problem	
Method of the Approach	
Definitions of Terms	
 Chapter Two: Review of the literature.....	 6
Summary of the Literature	
Special Education	
• Accommodation	
• Remediation	
Transition Program	
Self-Esteem Issue	
Social Skills Deficits	
Employment	
Substance Abuse	
 Chapter Three: Method of Research.....	 19
 Chapter Four: Research Results.....	 20
 Chapter Five: Conclusions and Recommendations.....	 26
 References.....	 31
 Appendix I.....	 33

Chapter One: Introduction

According to Shapiro and Rich (1999) for decades, individuals who struggled with learning were perceived as having educational difficulties. The noted educator, Kirk, introduced the term learning disability to the public in 1963. As a result, educators and physicians began conducting in-depth research to determine the cause of learning disabilities. A few years after the term learning disability was introduced to the public, research showed that individuals with learning disabilities have a malfunction in their central nervous system. Prior to this finding students with learning difficulties were perceived as lazy, lacking motivation, and lacking interest in their education.

Shapiro and Rich (1999) asserted after this medical discovery dramatically changing public perception about these individuals. Contrary to popular belief, the majority of individuals with learning disabilities have average or above average intelligence. Additionally, famous people in the field of science and politics have had learning disabilities, including Winston Churchill, Albert Einstein, Thomas Edison, and Nelson Rockefeller. Thus, educators and lawmakers started to realize that individuals with learning disabilities can be highly capable, but have different educational needs.

Shapiro and Rich (1999) also asserted these discoveries marked a new era in the field of education. Laws were passed to address the needs of this population. In 1975 the Individuals with Disabilities Education Act (IDEA) was passed, and this act was reauthorized in 1990 and 1997. After the passage of this legislation a new approach called special education emerged.

In 1975 a mandate was passed requiring all learning institutions that receive federal funding to provide special education for individuals with learning disabilities. However, some questions remain, is the special education provided for this population adequate to deal with educational and psychological needs of these individuals? Additionally, do unmet psychological needs have an impact on the development of substance abuse?

Shapiro and Rich (1999) assert the Americans with Disabilities Act (ADA) literature shows that an alarmingly high number (five to eleven million) of adults are dealing with learning disabilities. Therefore, the correct implementation and execution of special education is very important for these individuals. The future success of this population relies on the type of help they receive. Furthermore, the early detection of learning disabilities in children is the key to successful intervention. Children with learning disabilities do not outgrow this difficulty, as their learning disabilities will persist into adulthood.

According to Shapiro and Rich (1999) special education is imperative for the future success of these individuals. Adequate educational programs might prevent adolescents and adults from dropping out of school. Moreover, proper education teaches this population skills that are essential for their success in future employment endeavors. Successful adults with learning disabilities have stated that their involvement in well executed special education programs with innovative teachers helped them attain their educational goals. A respondent in one study indicated that his/her learning disability had an impact on his/her employment.

Shapiro and Rich (1999) asserted that learning difficulties are not the only challenge this population faces. Learning-disabled people have to deal with emotional

and psychological challenges as well. Scholars in the field of education and psychology believe that learning disabilities may be co-morbid with social skill deficits. Research has also showed a correlation between learning disabilities and social skill deficits.

Individuals with learning disabilities have to deal with academic failure. Further, these individuals encounter rejection by their peers and teachers. The negative experiences that these individuals face may have an effect on their self-perception which consequently leads to a low self-esteem. Adults and adolescents with learning disabilities who will go through this difficulty and ordeal are at risk for alcohol and drugs misuse. Due to their low self-esteem they are also more vulnerable for other forms of exploitation.

Tomblin and Haring (1999) estimated that in 1997, 40% of clients who entered an alcohol and drug treatment facility for substance abuse had learning disabilities and/or attention problems. Rhodes and Jasinski (1990) asserted that other data showed correlation between these two variables, as well as a high incidence of alcoholism amongst individuals with learning disabilities. Simply stated that special education for individuals with learning disabilities is very important to promote learning and avoid related problems. Is current special education for adults adequate? And, does inadequate education result in a relationship between learning disabilities and substance abuse?

Statement of the Problem

Secondary and post secondary schools are mandated to provide special education for students with learning disabilities. Is the special education programming adequate to deal with the educational and psychological needs of students with learning disabilities?

Additionally, do unmet educational and psychological needs have an impact on the development of substance abuse within this population?

Method of Approach

A questionnaire was developed, in consultation with Gateway Technical College personnel. The IRB was approved; the questionnaire was dispersed amongst the participants. Subsequently, the data was collected and analyzed. A literature review that draws upon previous research and studies conducted on adults with learning disabilities and substance abuse resulting from unmet psychological needs, additionally was included. The information gathered was summarized and a recommendation was provided.

Definition of Terms

Accommodation: Providing additional services (e.g. note-taker) for students with LD, in order to aid them with their disability.

Cognitive Behavioral Therapy: This psychological approach was established by Beck, and it is used to change the negative self-perceptions and attitudes of clients.

Learning Disabilities:

The term “specific learning disability” means those children who have a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written. A disorder may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or solve mathematical calculations. The term includes such conditions as perceptual handicaps, brain dysfunctional developmental aphasia. The term does not include problem which is primarily the result of visual, hearing, or of environmental, cultural, or economic disadvantage (Shapiro and Rich 1999, p.16).

Remediation: Basic- level courses that are designed to enhance the academic performance of students with LD by providing them with a basic foundation for more advanced courses.

Special Education: Federally mandated program to address the needs of students with LD.

Social Skill Deficits: Inability to judge social situations, lack of sensitivity to others, misreading of social cues, and language pragmatic problems

(Shapiro and Rich, 1999 p.101)

Transition Program: Individualized plan in secondary schools to allow students with LD to enter employment or higher education.

Chapter Two: Literature Review

Special Education

After the passage of the Americans with Disability Act (ADA) in 1975 and the Individuals with Disabilities Education Act (IDEA), the Federal Government established an educational program to address the needs of individuals with learning disabilities. As a result, special education was formed and implemented in educational settings.

During this era the National Joint Committee on Learning Disabilities (NJCLD), the Federal Government and other organizations started to define the term learning disability (LD). The correct definition was essential in the establishment of proper educational programs. The definition that is commonly used in education is the IDEA's definition of the term which states that:

The term "specific learning disability" means those children who have a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which disorder may manifest itself in imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations. The term includes such conditions as perceptual handicaps, brain dysfunction, dyslexia, and developmental aphasia. The term does not include a learning problem which is primarily the result of visual, hearing, or of environmental, cultural, or economic disadvantage .
(Shapiro& Rich 1999, p.16).

Although the definition above is used in education, other organizations use the same definition with a few minor differences.

Shapiro and Rich (1999) stated learning disabilities are life-long challenges for children and adults. Children will not outgrow their LD, and their LD will persist into adulthood. Individuals with LD who are not diagnosed as children struggle in educational and employment settings. In the adult population, three to ten percent of people have one

or more forms of learning disability. As a result, special education programs emerged, and schools around the nation were mandated by the federal government to provide such education. There are two types of approaches that exist in post-secondary schools accommodation and remediation to address the needs of individuals with learning disabilities.

Shapiro and Rich (1999) also stated under the accommodation approach schools are mandated to provide academic assistance to students who are diagnosed with learning disabilities. Special education for students in secondary school is provided whether the students ask for it or not. In post-secondary schools it is the student's responsibility to be a self- advocate and inform the school and his/her instructors of his/her learning disabilities in order to receive help. The assistance that is provided by post-secondary schools such as Wesleyan University includes the following:

Wesleyan University Resources for students with learning and physical disabilities
Website p.1-2).

- Extended time for test-taking and timed assignments
- Space free of environmental distractions for exams
- Printed materials, including books in alternate formats
- Tape recording classes
- Note takers
- Readers
- Sign language interpreters

It is very important that special education programs be well executed. Tamblin and Haring (1999) explained that the possibilities for higher education will increase for youth with less severe disabilities and those who have learned accommodation skills through special needs program

According to Bettinger and Long (2005), under a remediation program, students

with or without learning disabilities are helped through remedial courses in mathematics, writing, and reading. Although colleges in the United States are offering remediation, their requirements for students are different. Therefore, scholars in the field of education like Bettinger and Long did some research to further investigate this matter. The purpose of the research was to examine the degree of effectiveness in the way these programs are implemented. Their data showed that majority of students entering colleges are academically unprepared. Bettinger and Long (2005) also asserted that in 2001 almost 33% of freshman college students in the United States had to take remedial classes. They believe that these programs are effective. In this article no data was provided indicating the number of students with learning disabilities taking remedial courses. More research and longitudinal studies are needed to determine the percentage of students with disabilities who utilize these services and how effective these programs are for students with learning disabilities.

Joyce and Rossen (2006) explained that students with LD are helped beyond remediation and accommodation through a transition program. This program is designed to help students with learning disabilities become successful in their lives. In this program, high school students with learning disabilities are assisted into post secondary schools and employment. Joyce and Rosen (2006) indicated that the percentage of students who utilize transitioning services is increasing each year. For example, there was a 24.3% increase in students with specific learning disabilities from 1998 to 2000.

Joyce and Rossen (2006) asserted that to utilize this transition service in college, students must decide whether or not they want to disclose their disabilities. What is more, the key here is self-advocacy and it is necessary for students with learning disabilities to

learn this skill. The majority of post-secondary schools are equipped to handle this transition program and are able to help students with LD.

Joyce and Rossen (2006) asserted that upon the student's request for help, the post-secondary school's psychologists must be ready to assess the needs of the student, diagnose, and document the student's learning disabilities; they must also provide recommendations regarding accommodation. Moreover, post-secondary school psychologist must monitor the student's progress and re-evaluate the intervention program. Additionally, Joyce and Rossen (2006) explained that a proper intervention program in high school for students with LD is instrumental and imperative for future academic achievement and employment for these individuals. Therefore, students with LD must have an Individualized Educational Plan (IEP) in high schools that includes goals regarding post-secondary education and employment. The proper implementation and execution of special education is necessary in the intervention of the future difficulties people with LD will face in their lives.

According to some researchers in the field of education like Price, Gerber, Mulligan (2007) the Americans with Disabilities Act (ADA) is underutilized by adults with disabilities. The article by Price, et al. (2007) addresses the underutilization of ADA in employment settings. The scholars mentioned above reason that this problem is caused by a deficit in the transitional approach during the school years. The researchers in the article maintained that information is not provided to students with LD on how the ADA can be used to their advantage.

Moreover, Price, et al. (2007) imply that adults with LD usually go to work right after they are finished with their education; therefore, students with LD are not informed

properly about laws governing their rights in accordance with ADA. For example, if students decide not to disclose their LD, they are automatically declining their rights in educational or employment settings. Thus, it is imperative that students with LD receive proper education on ADA regulations. Additionally, this population is in need of psychological intervention and training on the correct style of self-disclosure of their LDs.

A survey was conducted in 1985-86 by Beirne- Smith and Deck (1989) to gather data regarding the implementation of IDEA in post-secondary schools. The purpose was to determine the types of services provided by these institutions for students with LD. Questionnaires were mailed to 284 different 4- year colleges who reported to have special programs for students with LD and 184 responded. Seventy six respondents were eliminated because the institutions contacted were misidentified either as 4-year colleges or as providers of special education programs. The questions regarded the educational and non-educational services provided, the type of assessment used, and finally, whether or not the staff received adequate training.

The result of this survey revealed that admission referrals for assistance were less than self-referrals. Data also revealed that the assessments were unsuitable or insufficient regarding the needs of post-secondary students with LD. Further criticism indicated that some centers are not equipped to do any type of assessments. With regard to staff and faculty training, the survey revealed that there was some training on how to recognize the students with LD but not in regards to proper teaching techniques.

Beirne-Smith and Deck (1989) asserted that the most interesting finding in this study is concern for the non-academic needs of students with LD. Some institutions stressed that non-academics such as career placement, faculty consultation, and

individual counseling must be included in the programs for the students as well as academics. The same scholars who conducted this research also indicated that these services might differ amongst different institutions. Another striking finding from this study was about some institutions not offering any specialized services

Self-esteem

Whelan, Haywood, and Galloway (2007) believe the issue of self-esteem is of great importance to people, but especially individuals with learning disabilities. Individuals who have a negative self-image are more likely to have a low self-esteem. These individuals see their strengths and weaknesses differently than others. They emphasize their weaknesses rather than their strengths.

Whelan et al. (2007) assert that these individuals may encounter many negative experiences and that could lead to development of low self-esteem. These scholars believe that early childhood exposure to unpleasant experiences and academic failure will cause individuals with LD to form a negative self-image. Furthermore, poor self-esteem makes this population vulnerable to other mental health disorders.

The aforementioned researchers believe that a poor self-esteem in people with or without LD leads to other psychiatric problems. Accordingly, Whelan et al. (2007) believe that psychological intervention is essential for people with low self-esteem, especially people with LD. To prove the validity of their claim, they selected a few individuals who had LD and poor self-esteem. Cognitive behavioral therapy (CBT) was used to help these individuals. The end result of this therapy was positive, and these individuals showed improvement regarding their self-image.

Ashe and Pisegna (1994) believe that the roots of these individuals' problems are

frustration and anger because of learning difficulties leading into low self-esteem. The same educators also stated that the symptoms of a low self-esteem are: a lack of self-confidence, withdrawal, and depression.

Ashe and Pisegna (1994) also asserted that these feelings are caused by the negative experiences people may encounter in life. The best solution for these individuals is to redirect their anger and frustration into a more positive attitude towards learning and their self-image. Kenner, (1994) agreed, stating that in order for individuals with learning disabilities who lack self-confidence and have a poor self-esteem to overcome these difficulties, psychotherapy is recommended.

Social Skills Deficits

Shapiro and Rich (1999) asserted that social skill deficit is another important issue for individuals with LD. Some researchers believe that there is a correlation between LD and social skill problems. Social skills deficit may be co-morbid with learning disabilities. The researcher asserted that social skills deficit may be caused by malfunction of the central nervous system.

According to Shapiro and Rich (1999) these individuals might have problems with pragmatic aspects of language. Their deficit leads to an inability to use the language appropriately. They have a poor judgment and are not capable of showing sensitivity to other people's feelings. They might not be able to understand non-verbal language and facial expressions. They might perceive all social signals incorrectly, for example, perceiving hostile attitude as friendly. People who lack social skills are likely to have difficulty in their relationships. They might not be able to form any friendships with their peers. Their inability to form any relationship or communicate effectively with others

might also result in unemployment. Since social skill deficit is co-morbid with learning disabilities, these individuals might face even more difficulties in their lives.

Researchers recommend therapy training to assist LD individuals in their lives Shapiro and Rich (1999). Otherwise these individuals are going to have difficulties in their relationships, employment, and life. They might succeed educationally, but fail in other aspects of their lives because social skill deficits may be caused by the dysfunction of central nervous system as well. The malfunction of central of central nervous system causes disturbance with information processing which are needed for cognition, perception, and language skills. They will not outgrow their social skills deficits, and they will face difficulties in life unless they receive proper psychological intervention.

Employment

Shapiro and Rich (1999) asserted that the majority of people have a wrong perception about learning disabilities. These people believe that learning disabilities are only an issue in educational settings and not employment. These individuals have to deal with their learning disabilities in all aspects of their life including employment.

Shapiro and Rich (1999) indicated that the successful adults with learning disabilities attribute their success to working hard, setting attainable goals, and looking at their disabilities in a more positive way. Individuals with LD have to recognize their strengths and use them to compensate for their weaknesses.

Madaus (2006) made the point that, like all people individuals with learning disabilities have to enter the workforce after they are finished with their education. Their readiness is very important for their future success in the employment settings. Students with LD who have received help (special education) in secondary schools are divided in

two groups. One group enters into post-secondary school, and the other group goes to work directly. Overall, the majority of them enter employment right after high-school. Therefore, these individuals need training regarding employment before they enter into this arena.

Ohlar (1995) addressed the relationship between higher education and successful employment. He believes employment maturity is linked to counseling and not education only. Individuals with LD should be counseled to recognize their strengths and weaknesses. Without proper counseling, they are unable to find employment based on their strengths; if so, they will experience irritation and dissatisfaction

Madaus (2006) indicates that a college education is very important for individuals with LD in regards to successful employment outcomes. They have a better chance in succeeding in employment, and earning a salary comparable to individuals without LD. High percentage of adults with higher education (e.g. Bachelor degree) were employed, compared to 64% of adults with a high school diploma and 44% of those without high school diploma.

Tamblin and Haring (1999) asserted that there is a belief amongst some scholars that youth with LD, whether diagnosed or not diagnosed also have addiction problems, and do not do fairly and productively in their adulthoods. Many of these youth become unemployed and homeless because they are unable to maintain full-time employment. These individuals are trapped in a vicious cycle of poverty, joblessness, health problems and substance abuse.

One American out of ten with a LD is able to attain full-time employment

Tamblin and Haring (1999). The aforementioned scholars believe that the students with LD are not being integrated into employment and adulthood successfully. The majority of these individuals are either unemployed or under-employed.

The lack of proper counseling in regards to the future employment endeavors of these individuals was also mentioned by the scholars. To address this problem extensive psychotherapy or counseling is needed for these individuals during their secondary education and should be continued accordingly into post-secondary education.

Substance Abuse

Maag and Irvin (1994) said some scholars believe that there is a relation between learning disabilities and substance abuse. The majority of researchers believe that a low self-esteem is the leading cause for substance abuse in adolescents. Adolescents who have a negative self-image and feel that they are incompetent may turn to alcohol or drugs to deal with their negative self-image. Furthermore, negative self-perception makes this population (adolescents) with or without LD vulnerable to pressure from peers regarding alcohol or drug use. They may start to use alcohol or drugs because they want to have friends or to be part of a group.

In 1994, Maag and Irvin conducted research to find a relation between people with learning disabilities and alcohol/substance abuse. They selected 123 students with LD and 138 without LD. They administered the self-esteem assessment to the students to document their level of self-esteem. The Maag and Irvin (1994) study revealed that there is a higher incidence of tobacco and marijuana use among adolescents with LD. To note, there was not a difference in alcohol use between adolescents with LD or without LD. However, the impact of alcohol use is more severe in a person with LD. This finding was

attributed to the general public's attitude and acceptance of alcohol use between these two groups. The scholars did not elaborate on why the impact of alcohol use is more devastating on people with disabilities.

In one article researchers indicated that there were mixed results regarding substance abuse amongst people with disabilities. To find an accurate answer Yu, Huang, and Newman (2008) looked into data provided by the National Longitudinal Transition Study-2. Yu, Huang, and Newman revealed that:

30 percent of young adults with LD reported smoking in the past 30 days. 20% smoked every day in the past 30 days. 51% reported alcohol use [and said they] had one or more drinks in the past 30 days. 16% [smoked] one or more marijuana in the past 30 days. 6% used 10 or more marijuana in the past 30 days. 3% used cocaine one or more times in the past 30 days. 2% used other illegal drugs one or more times in the past 30 days. 16% used any illegal drugs one or more times in the past 30 days (2008. p. 7).

This study revealed that alarmingly high percentages of adolescents are abusing drugs and alcohol. There was no information as to why this age group misuses drugs or alcohol in this article.

A preliminary study by Rhodes and Jasinski (1990) showed the relation between learning disabilities and alcohol use in adults. These researchers indicated that the development of alcohol abuse in adulthood has a direct link in children who are hyperactive, have brain malfunction, or have impaired cognitive performance.

Rhodes and Jasinski (1990) believe that cerebral malfunction is linked to alcoholism. They also believe alcoholics show that they inherited neuropsychological problems that could be linked to LD. Rhodes and Jasinski (1990) to prove their previous findings, conducted more research on the topic. The results of this research verified that there is a link between the aforementioned variables.

McCrystal, Percy and Higgins (2007) assert that individuals with mild LD are at risk for using illicit drugs. This risk was identified more than 40 years ago. Individuals with learning disabilities are more at risk to develop alcoholism or illicit drug use. This article claims that adults with LD have a lower level of alcohol and drug abuse compared with adults without LD.

McCrystal, et al. (2007) explained this in the same article substance abuse of adolescents with LD is addressed different from non-LD. They claim that social skill deficits, lack of knowledge on substance abuse, and improper intervention programs are causing adolescents with mild LD to be more vulnerable toward developing substance abuse problems.

Hollar (2005) examined the relationship between substance abuse and disabilities. The approach was to analyze data provided by the National Education Longitudinal Study (NELS) of 1988 – 2000. This study showed that 58% of adolescents with learning disabilities and 62% of adolescents with emotional disabilities have binge drinking problems. Forty-four percent of adolescents with LD, 54% adolescents with ED, and 49% with multiple disabilities are life-long marijuana users. According to this research, adolescents with multiple disabilities are more likely to dropout of high school than their peers and are less able to go beyond secondary education. This research showed no significant difference between youth with or without LD.

Cosden (2001) asserted that although there are documents showing similarities between signs or symptoms of LD and substance abuse there is not enough research to understand or imply such similarities. To fully understand whether or not there is similarities between the symptoms of LD and substance abuse Cosden (2001) reviewed

different studies regarding this matter. She reached a conclusion, asserting that it is difficult to determine that since there is no data regarding the identification of individuals with LD entering treatment facilities. Plus she restated that the symptoms they displays (e.g. poor concentration and so on) may be a result of substance abuse. Nonetheless Cosden (2001) explained that individuals with LD are at greater risk for developing substance abuse problems if they do not have a good understanding of their disabilities or have low-self esteem.

The research that was conducted by Rhodes and Jasinski (1990) suggested different conclusions. They believe that there are differences between the symptoms of alcohol use and symptoms of LD. In their study of people with LD they did not witness any symptoms of alcoholism such as impaired cognition or lowered motor performance. Nonetheless Rhodes and Jasinski (1990) believe that a relationship between learning disabilities and alcoholism exists.

Scholars believe that proper intervention in accordance to the needs of individuals with LD should be applied in treatment facilities. Individuals with LD are in need of special education regarding alcohol and drug abuse. These programs should be geared toward the needs of individuals with LD.

In the review of the articles, a few important issues were recognized. All the scholars in the field of education and psychology stated that individuals with LD are more susceptible to developing substance abuse problems. A dysfunction in the central nervous system was mentioned as a cause for LD, social skills deficits, and emotional problems in these individuals. They all stated that proper educational and psychological intervention is needed for these individuals.

Chapter Three: Method

A survey was developed in consultation with Jack Sullivan, Special Needs and Transition Counselor at Gateway Technical College in Kenosha, Wisconsin. The survey consisted of 15 multiple choice questions (Appendix I). Institutional approval from both UW-Platteville and Gateway Technical College was obtained before the survey was disseminated.

The survey was distributed by Jack Sullivan via e-mail, and the completed survey forms were returned to him. Participants were Gateway Technical College students with Learning Disabilities and/or ADHD. These students are involved in The Special Needs and/Transition Program at Gateway Technical College. Of the 100 surveys distributed, 18 surveys were returned. Data was analyzed by frequency count.

Chapter Four: Results

This chapter contains an analysis of information gathered from research that was conducted to determine the relationship between LD and substance abuse. To conduct this research 100 students were selected to participate. These students are currently attending a technical college and are part of the transition program. The survey contained 15 questions regarding learning disabilities.

Respondents were asked whether they have LD and or/ADHD. Other questions asked these students whether their LD caused them to have a low self-esteem. Various areas of the survey were designed to compare the use of alcohol among students with LD as opposed to students without LD. Some questions were directly related to a lack of confidence, self-esteem, or substance abuse. Other areas of the survey contained questions that were not directly related to substance abuse but were asked to determine whether or not these individuals face greater difficulties because of their LD. Moreover, the study was conducted to determine whether the transition program is effectively addressing the needs of students with LD. Eighteen out of 100 students responded.

Although this number is low, a high percentage of respondents indicated that they have learning disabilities. Data showed variation among respondents regarding the type of disabilities they have. In some cases, there was a discrepancy regarding the LD and the types of LD the respondents have. For example, one respondent answered no to LD but indicated having four different types of LD. Additionally, one respondent said yes to LD but no types of LD were indicated. Table 1 shows the percentage and number of respondents who said yes to having LD as well as the different variations of LD among

them. The inconsistency in response may relate to the disability itself (e.g. a reading problem, or fleeting attention).

Table 1: Proportions of Respondents Endorsing Learning Disabilities

N=18		
LD	Number	%
Yes	16	89%
Endorsing 1 Disability		
Writing	1	6%
Reading	1	6%
Processing	1	6%
Mathematics	1	6%
None	1	6%
Endorsing 2 Disabilities		
Writing, Reading	1	6%
Reading, Comprehension	1	6%
Comprehension, Mathematics	1	6%
Comprehension, processing	1	6%
Endorsing 3 Disabilities		
Writing, Reading, Comprehension	1	6%
Writing, Reading, Mathematics	1	6%
Comprehension, processing, Mathematics	1	6%
Endorsing 4 Disabilities		
Writing, Reading, Processing, Mathematics	1	6%
Writing, Reading, Comprehension, Mathematics	2	11%
Writing, Reading, Comprehension, Processing	3	17%
Note: 1 respondent said No to LD but marked 4 different types.		
1 respondent said Yes to LD but indicated None for the types of LD		

Data also showed learning disabilities are co-morbid with Attention Deficit Hyperactivity Disorder (ADHD). Fifty percent of respondents were among those who said yes and indicated as having ADHD. One respondent said no to both questions

regarding LD and or/ADHD. Lastly, one respondent said no to LD but said yes to ADHD.

Table 2 or table 3 shows this relation clearly.

Table 2: Proportions of Respondents Endorsed Learning Disabilities, ADHD, and Types of LD.

N=18

Type of LD

Writing= 1

Reading = 2

Comprehension= 3

Processing= 4

Mathematics= 5

Subject#	LD	Type	ADHD
1	Yes	5	Yes
2	Yes	4	No
3	Yes	1,2,3,5	No
4	Yes	1,2,5	No
5	Yes	1	Yes
6	No	1,2,3,4	No
7	Yes	3,5	No
8	Yes	1,2,3,4	No
9	Yes	3,4	Yes
10	Yes	1,2,3,5	Yes
11	Yes	1,2,3,4	Yes
12	No	0	Yes
13	Yes	2	No
14	Yes	3,4,5	Yes
15	Yes	2,3	Yes
16	Yes	1,2,4,5	No
17	Yes	1,2,3	Yes
18	Yes	1,2	No

Table 3: the Percentage of Respondent Endorsing LD and/or ADHD

Type	#Yes	#No	% Yes	% No
LD	16	2	89	11%
ADHD	9	9	50	50
Writing (LD)	10	8	56	44
Reading (LD)	10	8	56	44
Comprehension LD	10	8	56	44
Mathematics	7	11	39	61
Processing	7	11	39	61

Table 3 shows the percentages of respondents who said yes to having LD and ADHD.

This table also shows the percentages of respondents endorsing different types of LD. For example, 56% of respondents said they have difficulty with writing, or 39% of respondents said they have difficulty with mathematics.

This research was conducted to find whether there is a relation between LD and low self-esteem leading to greater alcohol and drug use. Table 4 and 5 show the results regarding this relation. Fifty six percent of respondents indicated that their low self-esteem was originated with their LD, but one respondent (6%) said he/she uses alcohol and drugs as a result of LD and low-self-esteem.

Table 4: Respondents Endorsing Low Self-esteem

Subject #	LD	ADHD	Low self-esteem	Substance abuse
1	Yes	Yes	Yes	No
2	Yes	No	Yes	No
3	Yes	No	No	No
4	Yes	No	Yes	No
5	Yes	Yes	Yes	No
6	No	No	No	No
7	Yes	No	No	No
8	Yes	No	No	No
9	Yes	Yes	Yes	No
10	Yes	Yes	No	No
11	Yes	Yes	Yes	No
12	No	Yes	No	No
13	Yes	No	No	No
14	Yes	Yes	Yes	Yes
15	Yes	Yes	Yes	N/A
16	Yes	No	Yes	No
17	Yes	Yes	Yes	No
18	Yes	No	No	No

Table 5: Percentage of Respondents Endorsing Low Self-esteem and Substance Abuse

	% YES	% NO
LD	89	11
ADHD	50	50
Low Self-Esteem	56	44
Substance Abuse	6	89

Note: 1 respondent answered N/A to substance abuse

As was indicated before in this paper, the intention of this research was to find a relationship between LD and substance abuse originated with low self-esteem or a lack of confidence. Although the number of respondents was not high, 56% of those who responded disclosed that their LD was associated with a low self-esteem. Sixty-seven percent of respondents indicated that a low self-esteem discouraged them from continuing their education.

Fifty percent of respondents indicated that they face difficulties in life due to their LD, and 61% of the sample indicated that their LD negatively affected their lives. Only 6% of respondents indicated greater alcohol and drug use due to their LD compared with students without LD, and 22% indicated greater alcohol and drug use among students with LD compared with students without LD. Twenty-two percent of respondents indicated that they received counseling (psychotherapy) to deal with a low self-esteem and a lack of confidence. Finally, 61% of respondents indicated that the Gateway's Transition and Special Needs Program helped them attain their educational goals.

The analysis of data in this research showed that students with LD have a low self-esteem and lack confidence because of their struggle. As was indicated in the literature review, the research showed that this population faces hardship in their relationships with their family members, friends, and co-workers. Although a high

percentage of the students said no to drug and alcohol use, some attributed their use to LD and difficulties they face.

The most interesting finding was the disparity between the percentage of students indicating that they use drugs or alcohol. Five percent indicated that they use vs. 22% of other students with LD. It seems that the respondents were reluctant to admit to their use of drugs or alcohol; therefore, the actual percentage of users might be higher than 5%. The majority of respondents were satisfied with their transition program, but it was made clear by the responses that there is a lack of psychological intervention. Therefore, it is safe to assume that individuals with LD who use more drugs or alcohol are in need of psychological intervention. They also will benefit from special education regarding substance abuse and the consequences of abuse.

This research had several limitations. The respondents did not take a self-esteem inventory. There was not a control group (students without LD) to compare the group to. There was small number of respondents (18) which makes it difficult to generalize to others. This group may not validly represent the population of LD students at Gateway Technical College. Finally, the learning disabilities themselves may have caused participants to have difficulty reaching and responding to the set of questions.

Chapter Five: Conclusion and Recommendations

A literature review was compiled to determine whether the current special education programs for individuals with LD are adequate. Furthermore, this paper explored whether inadequate education leads to a relationship between learning disabilities and substance abuse. As discussed in the second chapter, the key conclusions include the following:

- Special education lacks adequate intervention programs:
 1. Incorrect assessments are implemented.
 2. Provision of information regarding the utilization of ADA is inadequate.
 3. Teachers and staff are adequately trained to assist LD students.
 4. Proper drug and alcohol prevention programs are lacking.
 5. There is inadequate career placement and training.
- Psychological challenges that individuals with LD face in life:
 1. Social skill deficits in individuals with LD.
 2. Poor self-esteem.
 3. Lack of confidence.
 4. Peer-rejection.
 5. Dealing with academic failures.
 6. Unemployment or under-employment.
- Substance abuse.

Holler (2005) indicated:

1. 1.44% of adolescents with LD are life-long marijuana users.
2. 58% of adolescents with LD have binge drinking problems.

Yu, Huang, and Newman (2008) asserted;

- 1.6% of adolescents with LD admitted that they used cocaine
2. 2% used other illegal drugs in the past 30 days.
- 3.16% used any illegal drugs in the past 30 day.

There are a number of studies regarding substance abuse amongst individuals with any type of disability including physical, emotional, and learning disabilities. These studies have been conducted in different eras, and the results are more or less the same. The majority of these studies indicate that there is a relation between LD and substance abuse in adolescents and adults.

Scholars believe that proper intervention in accordance to the needs of individuals with LD should be applied in treatment facilities. Individuals with LD are in need of special education regarding alcohol and drug abuse. These programs should be geared toward the needs of individuals with LD.

In the review of the articles, a few important issues were recognized. All of the scholars in the field of education and psychology stated that individuals with LD are more susceptible to developing substance abuse problems. A dysfunction in the central nervous system was mentioned as the cause for LD, social skills deficits, and emotional problems in these individuals. The researchers all stated that proper educational and psychological intervention is needed for these individuals.

The survey was conducted to determine a relationship between LD, low self-esteem, and substance abuse. The participants in this survey were students with LD involved in a special needs program at Gateway Technical College. The majority of the participants (56%) reported low self-esteem due to their LD. The participants in this survey were

reluctant to admit to their substance abuse (6%), but they indicated a greater use of alcohol and drugs in other students with LD (22%). Although the small sample of students participated in this survey, the result indicated a similar conclusion.

- Low self-esteem
- Greater alcohol or drug use in the majority of them
- Relationship difficulty with peers, family members, and co-workers
- Lack of proper psychological intervention

Recommendation

Although special education has existed for a few decades, the success rate of these programs is not very high. In order for individuals with LD to achieve a high level of proficiency in their lives, two recommendations are made:

- The curriculum taught in special education should include
 1. Extra vocational training,
 2. Special education on substance abuse,
 3. A career counseling course,
 4. Internship and job placement programs.
- Two types of psychotherapy should be provided for these individuals:
 1. Individual Psychotherapy
 2. Group Counseling.

Extra Vocational Training

Special education and transitional programs should be implemented in a manner that ensures success for individuals with LD. In addition to educational courses, e.g. remedial courses, there should also be courses that teach problem-solving skills, social

skills, as well as, how to make healthy choices in life. There should be a course on alcohol and drug use and the consequences of such abuse as well.

Although a transition programs exist to prepare these individuals to advance themselves educationally, it seems that they lack a proper transitional plan toward employment. It appears that great emphasis is put into academics rather than employment. The vocational training program should start as early as middle school or 9th grade to provide students enough time to learn essential skills for employment. These individuals Educational Plan's (EP) should include career counseling, internships, and job placement. An early start on vocational training will allow these individuals to explore their interests and have an easier transition to technical colleges and more advanced vocational training.

Counseling

One important issue was clearly evident; there is a lack of psychological intervention and psychotherapy (counseling) for students with LD. In the reviewed literature, a lack of social skills, self-confidence, and self-esteem were established as characteristics of individuals with learning disabilities. Scholars attributed social skill deficits to a malfunction in the central nervous system.

Researchers attributed a lack of self-confidence amongst individuals with LD as a result of academic failures and rejection by their peers and teachers. A lack of confidence and low self-esteem are related to the development of substance abuse amongst individuals with LD.

Consequently, proper psychological intervention is imperative for the future success of individuals with LD. In order to prevent substance abuse, intervention should start as early as the age of 12 for these individuals. Through individual and group

counseling these individuals are empowered to deal with their disabilities in a much healthier manner. Psychotherapy is instrumental in teaching individuals with LD better coping skills, social skills, and self-confidence.

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Appendix 1

Appendix I: Survey

Please circle the answer that is most applicable.

1. Do you have a learning disability?

Yes No

2. What type of a learning disability do you have? Please circle any apply

Writing Reading Comprehension Processing Mathematics

3. Do you have Attention Deficit Hyper Activity Disorder (ADHD)?

Yes No

4. Before you were diagnosed with your learning disability and/or ADHD did you experience greater frustration in school?

Yes No Not Applicable

5. Have you had an easier time in school since you were diagnosed with learning disability and/or ADHD?

Yes No Not Applicable

6. Has your learning disability and/or ADHD caused you low self-esteem (not to feel good about yourself)?

Yes No Not Applicable

7. Did the lack of self-esteem caused by your learning disability and/or ADHD discourage you at times from continuing your education?

Yes No Not Applicable

8. Do you believe your learning disability and/or ADHD has negatively effected the quality of your life?

Yes No Not Applicable

9. Did you ever contemplate using alcohol or drugs out of the frustration you experienced because of your learning disabilities and/or ADHD?

Yes No Not Applicable

10. Has your learning disability and/or ADHD created difficulty with family, friends, and co-workers?

Yes No Not Applicable

11. Did your learning disability and/or ADHD cause you to hesitate at times in continuing your education in high school or college?

Yes No Not Applicable

12. Do you think your learning disability and/or ADHD has caused you to use more alcohol or drugs in comparison with students without learning disability and/or ADHD?

Yes No Not Applicable

13. Have you noticed more alcohol or drug use in other learning disability and/or ADHD students in comparison with students without learning disability and/or ADHD?

Yes No Not Applicable

14. Have you ever received counseling during your academic career to deal with low self-esteem or lack of confidence?

Yes No Not Applicable

15. Has your experience with Transition and Special Needs Program at Gateway Technical College encouraged you and caused you to feel good about yourself?

Yes No Not Applicable