
Review Article



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**MYSERY AND MYOPIA: SPECIFIC LEARNING DISABILITY IS
A CHANNEL TO WORST FORMS OF HUMAN RESOURCES**

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Abstract

Learning Disabilities are presumed to be due to Central Nervous System Dysfunction. It is one of the threaten disabilities in the world. It had adverse effect on the Children. Retrospectively, countries failed to produce potential human resources due to these menus. Moreover, the developed countries are alarmed on this issue and also started to work out for the same. Pathetically, developing countries are unaware about this disability. The twin problems of Children Learning Disability and learning process failure have various complex causes that could be put under categories such as genetical influence, head injury, pregnancy complications, accidents and life events. Methodologically, this paper is based on the analysis of secondary sources. This article sensitize on problem, assessment, Intervention and recommendations for overcoming learning disability issues.

Keywords: Specific Learning Disability, Central Nervous System, Potential Human Resources, Child Academic failure, Assessment and Intervention.

Introduction

Learning disability is a generic term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing and mathematical abilities. Learning disabilities are presumed to be due to central nervous System dysfunction. Anderson (1970)¹ termed specific learning disabilities as 'Hidden Handicap'. In the modern society, the mastery of basic academic skills (reading, writing and arithmetic) is a necessary pre-requisite for success both in schools and employment settings. A large percentage of children are suffering from learning disabilities or learning difficulties (Reiff, H. B, and Gerber, P. J, 1992)². The world is growing, competitions have

increased, and hence, the survival of the fittest depends upon competence and efficiency. With the rise in competition, parents, naturally, expect their children to get first marks. All parents want their children to be at the top notch, which seems to be quite impossible. Parents are unaware of what their children are going through. The process of learning proceeds right from the birth of a child. He explores his environment and gradually begins to understand the elements around him and recognize his mother and care takers who satisfy his needs. Though all children go through the developmental stages and acquire tasks appropriate to the given stage, each child is unique with his own physical appearance and characteristics, abilities and talents,

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personality pattern as well as learning styles (Janaki, 1986)³.

In a country where academic excellence seems to be the only route to recognition, the percentage/entrance/capitation epidemic is rising in parents. Media is targeting them to market health products because the child needs to be healthy primarily to study hard and give results. Creativity, on the other hand, is merely a tool for the parents to prove their social status. With this as a backdrop imagine a child who is trying to read, write or add but is unable to make sense of letters or numbers. He does have the capacity to conceptualize creative ideas but is unable to express them. The IQ (Intelligence Quotient) score is high but his handwriting is illegible and the teacher complains that he can never sit still. He is unable to concentrate for a long time despite making efforts.

Learning disabilities are problems that affect the brain's ability to receive process, analyze, or store information. These problems can make it difficult for a student to learn as quickly as someone who isn't affected by learning disabilities. There are many kinds of learning disabilities. Most students affected by learning disabilities have more than one kind. Certain kinds of learning disabilities can interfere with a person's ability to concentrate or focus and can cause someone's mind to wander too much. Other learning disabilities can make it difficult for a student to read, write, spell, or solve math problems.

Learning disability is a general term that describes specific kinds of learning problems. A learning disability can cause a person to have trouble learning and using certain skills. The skills most often affected are: reading, writing, listening, speaking, reasoning, and doing math. Learning disabilities vary from person to person. One person with learning disability may not have the same kind of learning problems as another person with learning disability.

Prevalence rate of the disability

In the mid-1960s, the Commission on Emotional and Learning Disorder in Children (CELDIC, 1970)⁴ in its report concluded that nearly 16 per cent of Canadian children were in need of specific remedial treatment. The authors of the report later collected data from incidence studies of children

with special needs from several countries and reported incident rate in Great Britain-14 per cent; France-12-14 per cent; United States-10-15 per cent; Canada-10-16 per cent. Perhaps, developed countries reduced their learning disability percentage to 6-7 percent through proper intervention process. Since the developing countries are unaware and the incidence rate is expected to be more than 12-14 percent in each school of their countries. Statistics indicate that learning disability occurs in about 1 in every 50 people. The disability is acquired before the age of 18 years.

Literature of review

Most literature on the specific Learning Disabilities comprehensive analysis of the causes of assessment and Intervention . This is the task taken up in this paper. A brief recommendation is also part of this article.

Macharey G (2008)⁵ did a study to assess whether parents of learning disability perceive stigmatization of their child or themselves. The findings of the study suggest that parents of children with learning disability often perceive stigmatization of their children or themselves.

Uslu R, G (2011)⁶ did a study to assess the use of psycho-education group program on expressed emotion, family functioning and child behavior by parents of children with learning disorders. Findings of the study indicate that psycho-education group program could be effective in helping parents to establish a more positive emotional climate in their relationships with their children who have learning disorders.

Little L (2002)⁷ also investigated how often mothers of children with Asperger's syndrome and nonverbal learning disorders reported using either psychological aggression (shouting, cursing and name calling) or corporal punishment (hitting and spanking) when disciplining their children and also examined the correlates of these methods of discipline, the findings indicated that the use corporal punishment was more than psychological aggression

S Karande, (2009)⁸ in their dissertation quality of life of parents of children with newly diagnosed specific learning disability analyzed the quality of

life (QOL) of parents having a child with newly diagnosed specific learning disability (SpLD) and evaluated the impact of clinical and socio-demographic characteristics on their QOL. The study has identified domains and facets that need to be addressed by counselors for improving overall QOL of these parents. Initiating these measures would also improve the home environment and help in the rehabilitation of children with SpLD

Tali Heiman, (2008)⁹ examined the perceptions of family relationships and communication in 52 families who have an adolescent child diagnosed with learning disabilities (LD) with a matched group of 52 families who have a child without LD. Findings revealed parents perceived their child as either over-involved or under-involved with their parents and not sharing the same values and norms as their parents. Findings indicated that parents of youth with and without LD share similar perceptions of both the openness and problematic aspects of family communication. Youth with and without LD reported higher levels of problematic maternal involvement than perceived by the mothers; youth without LD rated their mothers' affective expression higher than reported by their mothers; both groups of youth perceived their mothers' and their fathers' communication as less open and more problematic than reported by their parents.

Natale K, (2008)¹⁰ analyzed data from the longitudinal study of dyslexia to investigate the factors to which mothers of children with and without familial risk for dyslexia attribute the causes of their first-grade children's reading achievement. The results showed that the higher the word reading skills the children had, the more their mothers attributed their success to ability than effort.

Assessment of specific learning disability

Many normed assessments can be used in evaluating skills in the primary academic domains: reading, not including word recognition, fluency, and comprehension; mathematics, including computation and problem solving; and written expression, including handwriting, spelling and composition.

The most commonly used comprehensive achievement tests include the Woodcock-Johnson

III (WJ III), Wechsler Individual Achievement Test II (WIAT II), the Wide Range Achievement Test III (WRAT III), and the Stanford Achievement Test–10th edition. These tests include measures of many academic domains that are reliable in identifying areas of difficulty.

In the reading domain, there are also specialized tests that can be used to obtain details about specific reading deficits. Assessments that measure multiple domains of reading include Gray's Diagnostic Reading Tests–2nd edition (GDRT II) and the Stanford Diagnostic Reading Assessment. Assessments that measure reading subskills include the Gray Oral Reading Test IV – Fourth Edition (GORT IV), Gray Silent Reading Test, Comprehensive Test of Phonological Processing (CTOPP), Tests of Oral Reading and Comprehension Skills (TORCS), Test of Reading Comprehension 3 (TORC-3), Test of Word Reading Efficiency (TOWRE), and the Test of Reading Fluency. A more comprehensive list of reading assessments may be obtained from the Southwest Educational Development Laboratory.

The purpose of assessment is to determine what is needed for intervention, which also requires consideration of contextual variables and whether there are co morbid disorders that must also be identified and treated, such as behavioral issues or language delays.

Interventions of specific learning disability

- **Mastery model:**
 - Learners work at their own level of mastery.
 - Practice
 - Gain fundamental skills before moving onto the next level
- **Direct Instruction:**
 - Highly structured, intensive instruction
 - Emphasizes carefully planned lessons for small learning increments
 - Scripted lesson plans
 - Rapid-paced interaction between teacher and students
 - Correcting mistakes immediately
 - Achievement-based grouping
 - Frequent progress assessments
- **Classroom adjustments:**
 - Special seating assignments
 - Alternative or modified assignments

- Modified testing procedures
- Quiet environment
- **Special equipment:**
 - Electronic spellers and dictionaries
 - Word processors
 - Talking calculators
 - Books on tape
 - computer
 - dictation programs
- **Classroom assistants:**
 - Note-takers
 - Readers
 - Proofreaders
 - scribes
- **Special Education:**
 - Prescribed hours in a special class
 - Placement in a special class
 - Enrollment in a special school for learning disabled students
 - individual education plan (IEP)

Sternberg has argued that early remediation can greatly reduce the number of children meeting diagnostic criteria for learning disabilities. He has also suggested that the focus on learning disabilities and the provision of accommodations in school fails to acknowledge that people have a range of strengths and weaknesses, and places undue emphasis on academic success by insisting that people should receive additional support in this arena but not in music or sports.

Recommendations

- Learning disability was found to be associated with increased academic anxiety, stress and low self-esteem. There are array of interventions available that include, though not restricted to, are awareness, precision teaching, direct instructions, enabling children to self monitor learning process, peer group teaching, attribution training and bio-feedback and relaxation training.
- Awareness generation among teachers, parents and peers about the learning difficulties faced by the students is critical improving acceptance of children with learning disabilities. Such knowledge dissemination about the learning disability and its different aspects to teachers and parents will have a significant influence on children's stress experience.

- Peer tutoring may be yet another critical tool to enhance learning of children with learning disabilities. Peer tutoring has two significant goals viz., it improved academic performance as well as improved social acceptance of the children by their peers. Evidence suggests that adolescents who are engaged in peer tutoring enjoyed better social acceptance thereby enjoyed reduced behavioural problems and stress. Thus, considering the positive outcomes, peer tutoring may be encouraged in classrooms wherein children with learning disabilities are educated.
- Reciprocal teaching may be considered to teach students with learning disability, especially as part of the remedial education programme. This reciprocal education is a method of teaching aimed at improving the method of understanding a material through structured dialogue between teacher and students (Palincsar & Brown, 1986; & Palincsar & Brown, 1987)¹¹. In this method, emphasis is placed on the correct completion of a task successfully whereas learning strategy is based on a language that students are instructed to use during the task completion. Evidence suggests that this method of teaching is effective in structured classroom teaching contexts.
- Based on behavioural principles, Kozloff (1999) ¹²developed precision teaching. This is a method of evaluating instructions on a daily basis which allows the students to assess either success or failure of instructional techniques (White, 1986)¹³. The daily assessment allows specific educational improvements in a child's daily lessons in order to facilitate progress.
- The stress reduction programmes such as bio-feedback, and other relaxation techniques are found to be effective in managing stress in children with learning disabilities. Finally, attribution training may be yet another critical method of training that help children to improve reading persistence and also to improve locus of control or simply, the self reliance.

Conclusion

Developing countries are suffering from the twin problems of Specific Learning Disability and Lack of Potential Human Resources. These cataclysmic problems are the results of inseparably blended

internal and external conflicts between the stakeholders of the Specific Learning Disability. So, the indigenous assessment and Technological development process should be developed to reduce the impact of Specific Learning Disability among the developing countries . In light of the prevalence, magnitude and incidence of learning disability among developing countries, short-term measures to reduce current trends may be considered. These may include awareness raising, information dissemination and sensitization programs targeting most vulnerable groups and the community at large, enforcement measures targeting schools to break the link between learning problems and worst human resource producing process, and Learning Disability Supportive system s(LDSS)economic activities focusing on the Children . Government should improve the infrastructure facilities to assist the Learning Disability Children empowerment.. Moreover, it should expand education about negative impact of Specific Learning Disability among the stake holders of the schools.

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