

# Learning Disabilities

## What are learning disabilities?

If a child has average or above-average intelligence and is performing very poorly in school, he or she may have a learning disability (LD). This disability is probably caused by the makeup or function of a person's brain and may last throughout life.

The definition of learning disability used for educational purposes may vary from state to state. The National Committee for Learning Disabilities includes several disorders under the general category of learning disability. These disorders involve difficulties with listening, speaking, reading, writing, reasoning, or solving math problems.

## What are the characteristics of an LD?

Learning disabilities have a wide range of characteristics and various degrees of severity. However, all learning-disabled children have poor or uneven academic achievement even though they have normal or above-normal intelligence. These children may show difficulties in one or many of the following areas:

### 1. Attention

Focusing attention is by far the most common difficulty children with LDs have. As a result, these children may often perform poorly in the classroom, on tests, or at home. Impulsiveness may affect their ability to give thoughtful responses to questions or to stop inappropriate behaviors. They may seem to be lazy or disinterested because they have trouble focusing on details and get tired easily when they try to concentrate.

### 2. Language

Children may have difficulties with receptive language or with expressive language.

Children who often ask to have things repeated or have trouble following multiple instructions may have difficulties in receptive language.

Children who cannot express themselves clearly may have expressive language difficulties. They may often use the wrong words or mix their words up. They may not be able to tell a story without getting the events mixed up. (This type of difficulty should not be confused with the problems of a child who uses English as a second language.)

### 3. Temporal-spatial orientation

A child with problems in this area may have trouble understanding the difference between tomorrow and next week. Or he may have difficulty with directions and often get lost. He may be the last to learn the way to the bus or the bathroom.

### 4. Visual-perceptual processing

Many children seem to see letters or words backwards. For example, they may confuse b's and d's or read "was" for "saw" even after they have finished the 3rd grade. They may also have difficulty learning to write and get poor marks in penmanship.

### 5. Auditory-perceptual processing

Children who have this kind of problem have difficulty focusing on important sounds in the classroom instead of background noise. For example, they may have difficulty listening to the teacher. They may appear inattentive and have trouble following spoken

# Learning Disabilities

instructions.

## 6. Memory

Many children may have trouble remembering basic information like their addresses and phone numbers. They may find it hard to remember multiplication tables or days of the week. They may also have trouble with short-term memory and forget classroom instructions or where they are in telling a story or in conversation.

## 7. Fine motor control

Children who have trouble with fine motor control have poor handwriting and turn in messy papers. They may be slow in copying work from the blackboard. It may be hard for them to produce good work because writing is so difficult. They become ashamed of their work.

## 8. Gross motor control

Children with an LD may at times appear to be clumsy and awkward. They may drop things and bump into desks more often than other children. As a result, their peers may tease and reject them.

## What causes an LD?

Learning disabilities seem to be caused by the brain, but the exact causes are not yet known. Learning disability has been related to many biological factors including:

- heredity
- various conditions that the mother may have had during her pregnancy with the child, such as infections during the early months of pregnancy or use of drugs or alcohol
- prematurity, low birth weight, or birth trauma or distress
- certain conditions after birth (such as metabolic imbalances or infections)
- chronic medical illnesses, such as asthma or diabetes
- head injuries
- poor nutrition.

A child who has a learning disability may have other conditions, such as hearing problems or serious emotional disturbance. However, LDs are not caused by these conditions, nor are they caused by environmental influences such as cultural differences or inappropriate instruction.

## What are the consequences of an LD?

Children who are not doing well in school may not feel good about themselves. If they feel they can't cope with the demands of the people around them, they may withdraw from their friends and social activities. Some experts believe that the loss of self-esteem may cause learning-disabled children to spend time with others who view themselves as losers and may contribute to juvenile delinquency. The children may lose motivation and drop out of school. It is important not to overlook poor self-esteem in LD children. These children need to receive counseling and change expectations about themselves.

## What is the treatment?

### 1. Complete evaluation

# Learning Disabilities

It is important for a team of professionals to gather information about your child to determine the nature and degree of the learning disability and the child's educational needs. The evaluation includes testing and input from teachers and parents.

The evaluation may begin several ways. A teacher or your pediatrician may suggest your child needs evaluation. The school may ask your permission to evaluate your child. You may ask for an evaluation of your child by the school. You may take your child to a private facility for evaluation.

The team of professionals may include the following:

- social worker
- learning disability specialist or special educator
- speech/language pathologist
- audiologist (hearing specialist)
- physical therapist
- school occupational therapist
- pediatrician trained in assessing a child's neurological development
- child psychiatrist.

This approach is needed to define the severity of the disability and decide on treatment. It is also important to make sure there is no medical problem underlying the child's condition. Parents are of utmost importance in the evaluation. The professionals rely heavily on the parents' perspectives of the problems to make meaningful recommendations.

## 2. Preparation of treatment at school

The results of the evaluation help determine whether your child is eligible to receive special education services. The results are also used to develop an Individualized Educational Plan (IEP). Parents must help write and agree with the IEP. The IEP must outline the following:

- your child's present performance
- specific special education services and who will provide them
- short-term objectives and yearly goals
- objective criteria and evaluation procedures to measure your child's progress toward these goals on at least an annual basis.

To get the most appropriate services for your child, you must work closely with the other team members. If you hear something surprising about your child or strongly disagree with the conclusions of the evaluation, services, or therapies offered, voice your concerns at the IEP meeting. Signing the IEP means that you agree to the services, goals, and other matters listed in it. If you disagree and a compromise cannot be reached, the school must inform you of the procedures for challenging the IEP.

## 3. Specific treatments

There are a several ways in which special educators can help learning-disabled children. Some schools have special classes for children with particular learning disabilities. For children with less severe problems, time with a special educator for several hours a week may be all that is needed. Sessions with a language therapist or other specialist may also be helpful.

# Learning Disabilities

If your child has attention deficit hyperactivity disorder (ADHD), your pediatrician may prescribe medication. Coordination among the parents, teachers, behavior therapists, and your doctor is necessary to monitor the effects of the medicine.

## What can I do to help?

1. Provide support, sensitivity, and acceptance. Your child needs you to accept his condition and to give unconditional love and support. You can build up your child's self-esteem and confidence by constantly reminding him of his strengths.
2. Help your child to understand his problem and talk about it. Then he won't feel as strongly that he is a problem and can focus on coping skills.
3. Provide an educationally nurturing home environment. Provide an organized place and time for study. In addition, a balanced diet, enough rest, play activities, and family outings strengthen a child's body and mind.
4. Maintain communication with the school. Stay in close touch with your child's teachers, therapists, and other caregivers. Let your child's teacher(s) know that you want to play an active role in your child's education. Ask how you can reinforce and expand on what is taking place in the classroom, both behaviorally and academically.
5. Seek professional counseling for yourself as well as your child if you feel the need for extra help to cope. Most parents find advice on handling difficult behavior and feelings extremely valuable.
6. Join LD associations and support groups. These will help keep you up to date with the latest information on LD and put you in touch with parents who have children with similar problems.
7. Be cautious of nontraditional treatments. Be sure to check with your pediatrician before adding nonstandard therapies to the treatment plan. Discuss all ideas freely with your pediatrician.

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