ABSTRACT

The term learning disability was first coined by Samuel Kirk in 1963. Learning Disability is described as the seeming unexplained difficulty a child has in acquiring basic academic skills. These skills are essential for success at school and for coping with life in general. Learning Disability is not a single disorder; it refers to a group of disorders in listening, speaking, reading, writing and mathematics. A deep-rooted concern among educationist, education planners and programmers has been a great failure of children due to which the dropout rate in early years of school has been very high. On one hand we want to impart free and compulsory education, and on the other side, there is total waste and neglect of the real potential. Learning disability can negatively impact a person’s ability to read, listen, write, spell, calculate, organize, and remember or to pay attention. The educational authorities in a great many countries have a lot to answer for, because to a large extent around the world, even many educators have simply ignored a child or young person, who cannot accomplish or adopt the simple skills that others find so easy. They cannot read, write or count correctly; they get blamed for being lazy or not paying attention and therefore are identified not only by their teachers but also by their peers, as being ‘dumb, stupid and thick’. A very large percentage of the existing established teachers are not able to handle these children because they have not been educated on the subject, on account of this allow these children to be left on the scrapheap of the educational system.

Individuals with learning disabilities can face unique challenges that continue throughout the lifespan. Remedial strategies should be used to help the individual to learn that will foster future development, depending on the type and severity of the disability. Teachers and parents should be a part of the intervention in terms of how they aid the individual in successfully completing different tasks. School psychologists quite often help to design the strategies and coordinate the execution of the plan with teachers and parents. Social support can be a crucial component for students with learning disabilities in the school system and should not be overlooked in the remedial plan. With the right support and remedial teaching, people with learning disabilities can succeed in school and go on to be successful later in life.
Learning disability is not a single disorder; it refers to a group of disorders in listening, speaking, reading, writing and mathematics. It is characterized by intra-individual differences, usually in-form of a discrepancy between the learner’s ability and his/her achievement in areas such as reading, writing, mathematics or speaking (Lerner, 2000).

Learning disability cannot be cured. With the right support and intervention, however, children with learning disabilities can succeed in school and go on to be successful later in life. At present there is a general lack of awareness about specific learning disabilities in India. The Hindi Movie "Tare Zameen Par" ("Stars on the Earth") has sensitively and accurately depicted the problem of an 8-year old boy battling specific learning disabilities. The movie has created tremendous impact on viewers about this hidden disability. However, a lot needs to be done to ensure that every child with specific learning disability is detected and receives remedial education in our country. Even in the mega cities like Mumbai, Bangalore, New Delhi, Chennai and Kolkata there are very few clinics for doing the psycho educational testing for diagnosing specific learning disabilities.

The present investigation entitled “Identification and remedial strategies for children with specific learning disabilities” was conducted with the following objectives:

- To assess and identify children with specific learning disabilities.
- To find out the level of intelligence among children with specific learning disabilities.
- To examine visual and hearing profile of children showing specific learning disabilities.
- To study the support system available for children with specific learning disabilities.
- To assess the level of academic performance of children with specific learning disabilities on Grade Level Assessment Device (Pre-testing).
- To find out the level of awareness and knowledge about specific learning disabilities among parents and teachers (Pre-testing).
• To plan remedial strategies for improvement of academic performance of children with specific learning disabilities.
• To expose the participants (Children, parents and teachers) with remedial strategies.
• To find out the impact of remedial strategies on participants (Post testing).

A sample of 30 children with specific learning disabilities from Second and Third grade was taken for the present study. The present study was conducted within the premises of Jhunjhunu District of Rajasthan for optimum personal contact. The investigation was conducted with the help of following tools:
• Rutters Proforma-A by Rutter (1967) to elicit scholastic performance of children.
• Behavioural Checklist for Screening the Learning Disabled by Swarup and Mehta (2011).
• Raven’s Coloured Progressive Matrices (1995) for assessment of intelligence of children with specific learning disabilities was used.
• Grade Level Assessment Device for Children with Learning Problems in Schools by Jayanthi Narayan (NIMH, 1997) was used to identify specific learning disabilities among children.
• Demographic Profile Schedule and Interview Schedule (Self prepared).

After data collection means, standard deviation, frequencies and percentage scores were computed for data obtained on children with specific learning disabilities. To know the relationship among different variables, inter-correlation (Pearson’s ‘r’) was computed. Teachers as well as children were exposed to remedial strategies. Interactive sessions were organised with the parents to enhance their awareness about specific learning disabilities. Impact remedial strategies was seen by computing percentage scores and ‘t-test’.
Major findings of the study:
1. Most of the children were facing difficulties in all the eight areas of BCSLD, namely: Visual processing, auditory processing, cognitive domain, motor coordination, language, memory, preservation tendencies and affective domain.
2. Auditory processing difficulties were found in majority of children followed by memory and affective domain in the present study. These children were not having any visual or hearing impairment.
3. Majority of the children showed symptoms of speech and language deficit. Distractibility, reaction to unnecessary stimuli, poor class work, erratic learning behaviour, inability to transfer learning, reading difficulties, writing difficulties, lack of cooperation, preservation, disorganisation, memory deficit, hyperactivity, low frustration tolerance, lack of co-operation, problems in gross and finer motor skills and problems related to directionality were the symptoms observed in more than half of the participants under study.
4. More boys than girls were found to be learning disabled. Most of the participants were from middle SES families, followed by low and high SES. Majority of the participants were first born. All the parents were educated but not aware about learning disabilities and not giving time to their children’s study. Fathers of children were mostly in service while some were doing their own business. The mothers were mostly housewives. Majority of the participants were found to be living in developing surrounding. Only limited numbers of participants were living in underdeveloped or developed surrounding. The participants were supervised by their mothers more than their father in home work completion. Majority of parents spent only one hour to help their child in completion of his/her school work. The children were found to have medium exposure to mass media that was only limited to watching television without any supervision. Children were found to spend limited time in writing or reading that too only for completion of homework given in the school.
5. Some of the mothers reported serious complications during pregnancy while majority of mothers reported that they had faced minor problems. The physical development of children was found to be normal. The gestation period was full nine month in case of most of children, as reported by the mothers. Majority of the participants were born by normal delivery process.

6. Lack of facilities for children with learning disabilities was found in all the schools under study. No provisions for screening, diagnosis or remedial teaching. There was no counsellor in any of the schools. The schools were having no provisions for smart classes or multisensory teaching. Only audio-visual aids were available in some schools but those were also less used. Teachers were not even aware about the provisions made by CBSE and Government for these children. The schools did not have any provisions for continuous and comprehensive evaluation in the schools.

7. Majority of teachers were found to be unaware about children’s learning disabilities. A few teachers only heard about the term LD, but not able to explain the cause, characteristics or types of learning disabilities. Though, most of the teachers have done B.Ed. No other special training was done by the teachers.

8. The reasons told by most of teachers for poor academic performance of children were lack of interest and poor concentration, low IQ, family background, surroundings and family problems, parental negligence and lack of parental awareness, poor understanding and memory, careless attitude, Irregular, indiscipline or over pampered, lack of guidance and motivation, lack of confidence, excess exposure to mass media, lack of practical knowledge and practice, teacher-student ratio, etc.

9. The study found that children have high level of difficulties on the worksheets administered in English, Hindi and Mathematics. Most of the children were found at frustration level on Grade Level Assessment Device (GLAD). The common types of errors noted in English and Hindi included; poor visual processing, difficulty in copying accurately, spacing of letters and words, letter and word reversals, poor handwriting, repetition of sentences, omission of some words and letters, overprinting to correct mistakes, grammatical mistakes (punctuations, spellings and capitalization),
inadequate expression of ideas and vocabulary, poor organizational skills, unreadable letters and words, non-attempt or slowness in completing work. In Mathematics, most pupils totally failed in items that tested their skills in spatial order and relationships, division, time and money.

10. A highly significant positive inter-correlation was found in visual processing deficit and motor coordination deficit while a significant negative correlation of visual processing was found with language and memory of the participants.

11. Auditory processing difficulty was found to have a highly significant correlation with cognitive domain while no significant correlation of auditory processing was found with other areas of difficulty.

12. A significant positive relationship was found between language deficit and memory deficit. Difficulty in Motor coordination had highly significant positive correlation with preservation tendencies. A highly significant negative relationship of affective domain was found with motor coordination. Affective domain was also found to have significant negative correlation with visual processing.

13. There were significant improvements in the scores of children on English, Hindi and Mathematics. Percentage scores of children after exposure to remedial strategies found to increase on GLAD worksheets. The remedial strategies were found to be effective to improve academic skills of children with specific learning disabilities.

14. It was found that there was increase in parental awareness after interactive sessions. Most of the parents were found to be aware about specific learning disabilities, consequences, recommended treatments and remedial strategies as well as the provisions available for these children.

15. There were significant improvements in teachers’ knowledge level after exposure to remedial strategies. After exposure to remedial strategies, majority of teachers were found using remedial strategies with these children in the normal classroom setting. Teachers were now aware about the concept of learning disabilities, types of learning disabilities, causes and characteristics and also about the provisions made by CBSE and Government of India for these children.