

CHALLENGES IN EARLY IDENTIFICATION OF CHILDREN 'AT RISK' FOR LEARNING DISABILITIES: A REVIEW OF LITERATURE

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Abstract

Learning disability is a diverse set of conditions that affects an individual's ability to understand language whether it is spoken, written, etc. It affects the neurological development of the brain, as a result of which the ability to learn is hampered. Along with this it also affects a person's ability to stay attentive, remember what was learnt, coordination of movements, etc. Though the IQ is not affected but learning disabilities affect the over-all quality of life of an individual. It has certain types such as dysgraphia, dyscalculia, dyslexia, etc. It is crucial to note that learning disability develops or emerges at young age, this entails the importance of early identification of learning disabilities among children. The intent for early identification is to find out whether the child is at risk or already has a particular disability. It includes a close observation by the primary caregivers of the child to see what kind of behaviour the child displays, based on its "distinctness" a rehabilitation professionals help is gained. Significant to the identification of children with learning disabilities are the challenges, which cannot be passed over under any circumstances. The process of early identification includes 1) proper screening, 2) observation and 3) evaluation, but it is not an easy process as there are a number of obstacles that the members involved in the process, such as- child, parents, teachers, etc. tend to face. This particular paper tries to study the challenges faced during the process of early identification of children that are at risk for learning disabilities. For the same, existing research articles were perused.

Keyword- Learning Disability, Early Identification, Children, Challenges

Introduction:

Many children face issues in their academic life with difficulty in reading, writing, etc. it is extremely common. It becomes a point of worry when it is prolonged and doesn't seem to resolve. It is characterized as a learning disability. It emerges among young children and leaves a negative impact on their lives, if not dealt with. It is important to note that though it develops at young age the diagnosis can be delayed even till college. That means that sometimes the process of identification and diagnosis becomes difficult or that the disability was masked so well that it was not developed. Learning disabilities are a state of affairs in which the individual's dealing with it come across marked deficits in their ability to read, write speak, etc. it is said to have certain connections with the neurological development. (Gupta, 2022) Abnormal development or understand development leads to the development of learning disability.

According to the RPwD act 2016, Specific learning disability is a set of corresponding conditions that severely affect a person's ability to read, speak, write, etc. this is due to the inability to grab and comprehend language, both spoken or written. This disability is caused due to deficits in brain. It is important to note that till now there is no single identified cause of learning disabilities rather there are multiple area and reason as to why a child has learning disability. It can be due to risk during or after the birth such as low birth weight, consumption of drugs or alcohol by the mother, any injury and birth aphasia being the most common. Birth aphasia is when the child does not get enough oxygen during the birth.

Types of Learning Disability:

Learning disability has certain types to it. They are as follows-

- **Dysgraphia-** difficulty with writing ones thoughts. This results in poor eye-hand coordination, inability to understand letter spacing and word spacing, etc. due to dysgraphia, it becomes extremely difficult to think and write simultaneously.
- **Dyslexia-** it involves difficulty in reading due to the inability to pin point the speech sound and then relate the letters together. This can include poor vocabulary and reading comprehension. It is one of the most common learning disability and is seen in at least the 80% of the people who are diagnosed with learning disability.
- **Dyscalculia-** includes deficits in dealing with numerical concepts. It is also called as a type of "math dyslexia". The person having this particular type of learning disability experiences significant issues with numbers, concept of reasoning, money concept, reading time, etc.
- **Dyspraxia-** this type of disability impact the movement and coordination ability of the individual, leading to a hampered sense of balance, coordination, etc.
- **Dysphasia-** a condition in which the ability to produce and form sounds are affected majorly due to an injury in the brain. It occurs when the area of language construction and comprehension is negatively affected.
- **Visual Processing Disorder-** people having visual processing disorder face many challenges with motor movement, majorly eye-hand coordination. For example- continuously losing the spot that was being read.
- **Auditory processing disorder-** difficulty in possessing different sounds. It is due to the brains inability to interpret the information that is received through the ear. This hampers the person's ability to understand and interpret sounds.
- **Nonverbal learning disability-** difficulty in identifying non-verbal cues. People with non-verbal learning disability face difficulty in reading facial expressions, understanding body language, etc.

Learning disability is quite diverse with its types. It is important to note that a person can have more than one type of learning disability. For example- having dyslexia and dyscalculia together. It is often observed that learning disabilities are majorly seen and diagnosed in the early schooling years, due to the difficulty in overcoming the academic challenges.

Characteristics of Learning Disability:

There are certain sign and symptoms of learning disabilities. They are as follows-

- Poor eye-hand coordination

- Inability to identify different sounds
- Poor letter spacing
- Inability in expression
- Slower speech
- Unorganized
- Slow vocabulary
- Confusion in following simple directions
- Inconsistency in performance
- Slow speech development

Children with learning disabilities experience few of these symptoms but it would not be uncommon for anyone to experience all of these symptoms. If a proper intervention is not provided for these symptoms, they can persist and can hamper further development. This emphasis on the dire need to promote the early identification of children with learning disabilities. This early identification would help in providing early intervention so that these children can get a head start to their life with disabilities. Along with this it would be helpful in development of different strategies and methods that can be helpful for bringing ease into the lives of the identified cases (Lange & Thompson, 2006).

Early Identification:

Early identification means a thorough assessment of a child (usually under the age of 3) for any existing disability or a risk of upcoming disability. Early identification allows for a careful checkup by rehabilitation professionals and then the formation of a plan that would help and direct both the child and the parent with the way the disability should be dealt with. Early identification leads to improved number of chances of an appropriate development of the child. Since, it involves creation of an individualized educational plan (IEP) all the details of the child are with the team members leading to a more intimate work system and following of the designed steps that leads towards the optimum development.

Early identification includes formation of positive strategies for an appropriate development. Early identification cannot be just done or conducted rather it has a process that needs to be followed to achieve an apt result. In all these stages a child is thoroughly observed and the behaviours are learnt. It is only after the identification the further steps and treatments are followed.

The process is as follows-



Screening- This stage includes discovering the areas in which the child may be facing issues or difficulties. This is possible only by using an appropriate and standardized screening tool. The tool selected has to be based on the unique abilities of the child, so it should be individualistic in nature. Along with this, the comfort of the child should also be prioritized

because only if the child is comfortable then only the screening procedure can be completed with a smooth flow.

Risk indicators and Protective Factors- the risk factors are basically the warning signs or the “red flags” that point out to a possible risk of the disabilities. The protective factors are the people that will be involved in the whole intervention procedure. For example- special educator, psychologists, pediatrician, etc.

Systematic observation- observing the behavior of the child. The likes and the dislikes, strengths and weaknesses, etc. these allow to form activities with a prerequisite idea of what the child can do and what the child cannot do or would find it difficult to do. This stage is extremely important as it allows to provide the specific intervention. It allows for a much closer understanding of the child so as to frame a good and functioning individualized education plan.

Comprehensive evaluation- after a carefully done screening, reading out the risk indicators and proper observation, if it is indicated that the child has a disability then a comprehensive evaluation should be followed. This evaluation would allow to further know specific details regarding the child.

It is only after this process is followed, the rehabilitation professionals move forward with the early intervention process. They include special assistance that the child might require in order to overcome the barriers and gaps they might be facing. It is paramount to do away with these barriers as they hinder with the whole process and eventually negatively impacts the child.

Review of literature

Lange & Thompson (2006) published their work “Early Identification & Intervention for children at risk for learning disabilities”, in which they emphasized on the importance of early screening of young children, especially under the age group of 3-5 years. This can work as a preventative intervention for the children who are at risk of learning disabilities. Learning disabilities has a negative impact on the overall development of the child and so early identification of it becomes all the more important. If early identification is not done and the disability remains professionally unsupervised it can adversely impact the child’s overall development.

Johnson, Mellard & Byrd (2006) in their work “*Challenges with SLD identification: what is the SLD problem?*” they put forth a number of challenges that are faced in the identification of SLD, along with this they put forth a self-made SLD identification tool. First factor in identification is the availability of proper resources. Many a time’s students with low academic progress may be identified with SLD, but it is due to inappropriate conditions and in availability of appropriate resources in the educational environment. So, the teachers should be extremely careful before providing referrals to the students. A proper and thorough observation should be conducted. Second challenge that is faced multiple times is the need of upstanding assessment procedures. Assessment has a few stages that are to be completed before arriving to any conclusions. These stages can be- prereferral, referral, evaluation & eligibility determination. If done without consciousness then problem may occur in all these stages and lead to inaccurate identification of students. Some reasons can be – improper observation, discrepancy in evaluation, etc. Lastly, lack of team members integration and communication. If the stakeholders are not exclusively involved in the whole procedure of identification then many challenges arise. Learning disability is a collective and collaborative decision. The parent,

teachers. Special educators, doctors, psychologists, etc. work together collectively for a suitable identification. These challenges can be limited by the collaborative work among the stakeholders, exigent assessment procedures and attentive observation by all the people involved in the task.

Shapiro, Palmer, Wachtel & Capute (1984) researched on the topic “Issues in the early identification of specific learning disabilities”, in which they highlighted the existence of a neurological substrate which through proper assessment can be identified in the infant years. For this, a thorough study of the case is to be conducted, from examination, study of birth history, newborn behavior assessment, etc. So, the article suggests that learning disabilities can be identified in infancy through the above mention rigorous process and so there is no need to wait for the academic progress and work pattern of the child. This is early identification can improve the early intervention leading to an improved quality of life of the children. The article suggests that this wait for the academic achievements of the child can become a barrier in the fulfillment of the quality of life criteria. So, the early identification is crucial and should be done as soon as possible.

Scruggs & Masteropieri (2003) worked on the topic “Issues in the identification of learning disability”, they studied many existing challenges and problems faced in the process of early identification of learning disabilities. According to the paper, the major challenges or barriers to identification are variance, over-identification and specificity. Further, variance between IQ and achievement is also a common challenge. Sometimes, people are overly labeled to have learning disability even though they don’t fit in the criteria. Along variability in identification is seen as different professionals use different criteria and assessments for learning disabilities. The paper recommends improvement in the specificity and consistency of the criteria, reducing labeling and over-identification, as all of this will support in the reduction and elimination of the current barriers that are faced in the authentic identification of learning disability.

Misquitta & Panshikar (2022) researched on the topic “Identification of learning disabilities in India: current challenges and issues”, in this they highlighted the importance and need to develop assessment tools in different languages and to also standardize them based on the Indian population. Since learning disability is still a recently discovered disability (discovered in 2016) still a lot of work is there to be done in order to understand it and about it. One of the major challenge is its identification was observed to be language barrier. India is a diverse country and so there are a number of languages, regions, way of living, etc. All of this cannot be amalgamated and kept in mind while developing a single tool. So, it was recommended that tools should be developed in multiple languages and should also be standardized based on the Indian population.

Kholi, Sharma & Padhy (2018) in their work “Specific Learning Disabilities: issues that remain unanswered” highlighted a number of issues that are observed and that specially put forth huge challenges in the identification of learning disability. One of the challenge was the use of words such as learning disability and learning difficulty interchangeably this leads to confusion and ineffective instruction delivery. The second challenge is the lack of information and knowledge among teachers. While quoting another study they highlighted that at least 67% teachers in schools are unaware and have no knowledge about learning disabilities. It was also pointed the lack of standardized assessment tools, that would help in a more clear identification

of learning disabilities. These were the major highlighted issues that still exist. It is paramount to do away with these issues and challenges for appropriate understanding and identification of learning disability. Lastly it was pointed out that to understand learning disability one needs to understand it to its core.

Conclusion: Learning disability is a homogeneous conditions that affect the way an individual's ability to read, write carry out mathematical application, etc. A child is essentially born with learning disability and it majorly emerges in the early years of life when the child is actively engaged in academic sessions and activities. Constant difficulty in being able to read, write, etc. proves leads to a negative sense of being and eventually to a poor life quality lead by the individual. So, the identification of learning disability is crucial so as to provide an appropriate intervention to the child and facilitate them in their journey. But, identification is not always so easy, during the process multiple challenges are seen in order to identify the children that are at risk for learning disabilities. One of these challenges were need for appropriate resources in order in the educational setting. This ranges from infrastructure to the qualified teachers. For any disability to be identifies it has to be first observed, but in many school due to lack of availability of qualified teachers sometimes even the academically low performing students are also classified as having learning disability. So, one challenge id the in availability of trained teachers that possess good observation skill as well teaching skills. Along with this it was seen that linguistic barriers also needs to be addressed. In India with the presence of a huge population and diversity, it is impossible to identify children with learning disability by using only few tools. There is a dire need to develop new tools in multiple languages which will follow the inclusive criteria for all. Another common challenge was variance in the used tool. Many rehabilitation professionals use different tools in the way they find is appropriate. This leads to a lack of uniformity in identification and diagnosis. So, there is a need to follow a certain criteria for identification. Another major challenge is the exclusion of stakeholder in the processes. The family knows the most about the child and how s/he behaves when not in the controlled environment. It is essential to do away with these challenges as they work as a huge barrier in the process of identification.

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