


DYSLEXIA AND LEARNING DIFFICULTY IN READING AND WRITING

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ABSTRACT

Recognizing the importance of discussing dyslexia and learning difficulties related to reading, the aim is to present some significant directions aimed at stimulating the student's ability to develop the practice of reading. Bearing in mind that the student is inserted in a context that requires a systematic interpretation arising from the habit of reading. It is pointed out here that a conscious work by the teacher can contribute to the elimination of the problem, enabling the student to overcome the barrier of failure and achieve learning. In public schools, the teacher, when detecting any problem, must request the help of the student's family in order to share the difficulties encountered and try to remedy them in the best possible way. Speech, reading and writing result from the harmonious development and integration of the various functions that underlie the functional language system from the beginning of its organization. Dyslexia is defined as a difficulty in reading and writing that arises from the neurological disorganization of the student. After detecting atypical behavior and results, it is necessary to know the opinion of the school, the parents and raise the family history and the development of the student since conception, to then seek specialized help. In the reading process, dyslexics only resort to the brain area that processes phonemes. Reading-writing, therefore, consists of connecting the

graphic representation of words with the individual's knowledge, which previously depends on a full neuro-psycho-sociolinguistic development. Studies have also pointed out that although many children have normal hearing, they show gaps in language development with a delay in reading acquisition. To work with the dyslexic child, the teacher needs to be trained and have knowledge about Dyslexia. With knowledge, development of differentiated techniques for teaching, and specialized assistance, many of these difficulties can be solved within the school itself.

Keywords: Reading and writing difficulties; Dyslexia; Learning difficulties.

INTRODUCTION

Recognizing the importance of discussing learning difficulties related to reading and writing, the aim is to present some significant directions aimed at stimulating the student's ability to develop such practices.

When doing a historical retrospective, one finds preponderant elements that are associated with the fact that the individual develops a reading that transcends books, documents or records and is inserted in the lived context.

Writing and reading constitute advances in the search for systematic and in-depth knowledge. It is feared that the individual who does not develop the writing and reading habit will fail to evolve as an active citizen. In the school context, the problem of reading and writing is recurrent and worrying, as it is directly associated with school failure. It is through reading that the student interprets the facts and still feels stimulated to develop learning, since reading is responsible for maturing the intellect. However, the difficulties presented by learning gain another connotation, from the moment when blocks related to reading are identified and this shows a certain deficiency in the child's cognitive development in school practice.

In cases of disability, reading can be a barrier in the teaching-learning process. And in cases of inattentive practice, reading texts that are beyond the student's capacity, tiring, outdated, with a complex language, out of context, can make the student's development even more difficult, considering that it does not arouse their interest, transforms the act of reading in a dramatic and uninteresting moment.

In this context, understanding the need to develop reading as one of the stages of the educational process, emphasis is placed on the main guiding aspects of research aimed at facing this problem, the challenges to be overcome and its resizing in the pedagogical context.

LEARNING PROBLEMS

Learning problems can occur both at the beginning and during the school period and arise in different situations for each student who presents them. Its appearance requires an investigation to discover the cause of its occurrence, detect where the difficulties are centered, for an understanding, from there a possible attempt to solve the problem. José & Coelho (1997) consider that, in order to detect learning problems, the teacher must have in mind a very clear notion of what is normal, problematic and abnormal in children's behavior.

It is important to emphasize that if the teacher does not know the manifestations of children's thinking for the various age groups, it will be difficult to identify the stage in which the student is, and may incur the animism and egocentrism of a preschooler as problems (JOSÉ & COELHO, 1997, p. 58).

The developmental stages of a normal child consist of egocentrism, indifferenciation, animism, artificiality, finalism, imitation, and self-centered affectivity. A well-oriented child naturally overcomes the characteristics of each phase as it evolves. Therefore, in order to assess any learning difficulty, it is fundamental that the teacher identify the normal manifestations of children's thinking for the age group with which he is working.

The child, in order to develop well, needs an effectively balanced environment, where he receives the love and understanding that are indispensable for his harmonious growth, which allows him to satisfy his natural needs and requirements for his better development. If these needs are not met, an imbalance can result that can generate problematic, or even pathological, behaviors.

The abnormal or pathological behavior may originate in the child itself, when the factor is generic, or in the environment, being the social factor.

To characterize abnormal behavior Mielnik states that the following factors must be considered: age, physical constitution; development; natural environment; conduct and personality of parents and siblings; tensions and traumas; inner tendencies and psychic defenses of the infantile ego; means of adapting to these pressures; and evolutionary processes in the maturation of the child's personality (JOSÉ & COELHO, 1997, p. 63).

After checking the factors specified above and finding the abnormality, it is necessary for the teacher to make an analysis regarding the permanence of these characteristics, as the

child may be going through a difficult phase, for which, depending on the conditions in the deal with it, you may find the overcoming or not.

The changes that arise in the course of human life require that adequate measures be taken so that the problematic individual is not further harmed. The teacher, for example, can help the student to overcome difficult situations that may impede their development in certain content. A conversation with the student, trying to understand his life situation, and offering him the necessary guidance to overcome difficult issues becomes a positive point in the educational action developed at school.

According to José & Coelho (1997), learning problems refer to difficult situations faced by normal children and by children with deviations from the normal framework, with long-term learning expectations. In the normal child, non-learning does not occur in a permanent framework, but at a given moment and in a given content of a certain subject, that is, the student may have learning difficulties in a subject with which he does not identify or for which he finds no practical purpose in his life. But this does not mean that this non-learning remains over time. If there is a positive intervention in relation to this fact, learning may occur.

It is up to the teacher to detect the learning difficulties that appear in the classroom and to investigate the causes in a broad way, which covers the organic, neurological, mental and psychological aspects, added to the environmental problems in which the child lives. This attitude facilitates the referral of the child to a specialist who, when dealing with the disability, can guide the teacher to deal with the student in normal classrooms or, if necessary, also indicate assistance in the resource rooms with the professor of assistance to specialized education. (AEE). José & Coelho (1997) consider that there are countless factors that can trigger a problem or learning disorders, being considered fundamental: the organic factors, the psychological ones and the environments. Organic factors refer to poor physical health, lack of neurological integrity and inadequate nutrition. Among the psychological symptoms, inhibition, fantasy, anxiety, anguish, inadequacy to reality and the generalized feeling of rejection are relevant. Environmental factors include, among other aspects: the type of family education, the degree of stimulation that the child received from the first days of life and the influence of the media.

There are many children who are identified as having learning problems just because they do not perform what is expected through a teaching schedule. However, the non-execution of tasks is not always a problem from this angle. Some children may reject exercises because they are stuck with mechanisms that they try to reproduce without success, that is, they lack an appropriate form of expression to achieve what is asked of them. A conscious work by the

teacher can contribute to the elimination of the problem, enabling the student to overcome the barrier of failure and achieve learning.

When the act of learning presents itself as problematic, a much more comprehensive and thorough evaluation is needed. The teacher cannot forget that the student is a social being with culture, language and specific values to which he must always be aware, also to avoid that his own values do not prevent him from helping the child in his learning process. The child is a whole, when he has learning difficulties, he needs to be evaluated in his various aspects (JOSÉ & COELHO, 1997, p. 71).

José & Coelho (1997) consider that the proposal of the Brazilian operating system is to give each child the opportunity to learn as much as their capacity allows. However, this is not what happens in reality. Students who have difficulty learning do not have the opportunity they need. Because they are unable to keep up with the learning pace of other children or the curriculum established by schools, they fail, being classified as mentally retarded, emotionally disturbed or simply conceptualized as weak or multiple repetitions. Children who need specialized care are seriously handicapped because the Brazilian educational system has no place for them.

Many children with learning problems could be educated close to their homes, through public services, in regional schools, with specialized personnel and a curriculum consistent with this special system. But in the Brazilian reality, special education is a utopia. Only families with better economic conditions can properly educate a child with a learning problem. In public school, the teacher, when detecting any problem, must ask for help from the student's own family, to overcome it.

According to Piletti (1989) the school contributes to the occurrence of problems in learning when “it does not take into account the family situation of each student”. This happens, above all, to the extent that it does not seek an understanding of the particular situations in each child's life, starting to consider students as if they were all equal, with the same aspirations, needs, expectations and human characteristics. Without knowing the maturity, pace of learning, interests and aptitudes of each student, the school stops working to make learning a reality.

Undoubtedly, what most hinders free and creative learning is the school itself and the social system of which the school is a part. The social system produces a school that is inadequate for the child's development, a school that seeks to nullify the child in order to adapt it to society, a school that reproduces social inequality in the child (PILETTI, 1989, p. 89).

Many obstacles to learning have a family and individual origin, but their negative effects on the student's work can be minimized or annulled if the teacher and the school detect, understand and take into account the problems involved in order to overcome them.

DIFFICULTIES IN LEARNING TO READ AND WRITE

Reading-writing is conceived as the most complex form of communication that man has and is the vehicle par excellence for recording humanity's cultural and technical variations. Sawyer and Butler (1991) explain that when acquiring the competence to read, this is built on bases already available in the primary system of spoken discourse: the phonology, or structure of the sound of the language that includes syllables and phonemes; syntax, set of rules that govern the sequential ordering of words in phrases and sentences; and semantics, or systems of meaning that adhere to the former as a consequence of experiences in a variety of contexts.

All three depend on the capabilities and functioning of short-term and long-term memory for their development and refinement. Additionally, bridging the gap between speech and graphic impression, or the task of establishing sound/symbol correspondences at the beginning of reading, not only stems from phonological skills and memory, but also depends on discovering what words are made of. smaller, isolatable parts. This knowledge is often referred to as auditory segmentation which is an aspect of metalinguistic awareness.

Vellutino (1977), in his review of several other studies that found readers performing poorly on various types of processing tasks, concluded that alterations in phonological, syntactic, or semantic language processing, or any combination of these, probably contributed to the severe difficulties many children experience in acquiring reading skills. These hypotheses about verbal deficit have gained considerable support over the years in a wide variety of research. Such a deficit may result from one or two conditions: 1) inadequate experiences with language as a consequence of limited access to speech for communication or problem solving; or 2) difficulties in neurological processing that cause a delay or change in language.

THE DYSLEXIA

Dyslexia is defined as a difficulty in reading and writing. Currently, the most used definition is that Dyslexia is one of several learning disorders, it is not considered a disease, therefore, we should not talk about a cure.

From preschool, the teacher needs to pay attention to some signs that the child may show, such as: lack of attention; not able to play with other children; has delay in speech and writing development and visual development; lack of motor coordination; difficulty learning rhyming songs; lack of interest in printed materials among others.

The Associação Brasileira de Dyslexia has records that about 10 a15% of the world's population have learning difficulties, that the greater incidence of this in our classrooms is not due to poor literacy, lack of attention, poor socioeconomic status or low intelligence, but because they present a dyslexic condition. Dyslexia, without a defined cause, is a neurological, genetic and generally hereditary problem characterized by marked difficulty in reading, writing, spelling and spelling. Usually diagnosed during literacy, it is responsible for high rates of repetition and school dropout.

According to Poppovic (1981) speech, reading and writing cannot be considered as autonomous and isolated functions, but rather as manifestations of the same system, which is the functional system of language. Speech, reading and writing result from the harmonious development and integration of the various functions that underlie the functional language system from the beginning of its organization.

Before attributing reading difficulty to dyslexia, parents and teachers should rule out the following factors along with clinical judgment: learning immaturity; emotional problems; faulty learning methods; absence of culture; General inability to learn. In order to do a quality job with the student with dyslexia, the school must have a multidisciplinary team, formed by psychologists, speech therapists and clinical psychopedagogues, who must initiate a thorough investigation to diagnose the disorder and verify the need for the opinion of other professionals, such as neurologists, ophthalmologists and others, as appropriate.

To diagnose whether a student has dyslexia, it is necessary to rule out some factors that are very common in the classroom, such as: hearing and visual difficulties, brain injuries (congenital or acquired), lack of affection, school failure and hyperactivity. After discarding all these factors, with the help of specialized professionals, it is necessary to know the opinion of the parents' school and to survey the family history and the development of the student since its conception. If treated in time, the dyslexic can overcome his difficulty in reading and writing, but he will still be dyslexic. Adequate didactic procedures allow the student to develop all his aptitudes, which are multiple.

Many doubts about dyslexia lead to a lot of information that often confuses teachers and parents instead of informing. The media, in Brazil, the few times they address the subject, only

do so in a partial or inappropriate way and, even, outside the global context of current scientific discoveries.

DYSLEXIA AND COGNITIVE DEVELOPMENT

Dyslexic children have difficulty understanding what is written and writing what they are thinking. When he tries to express himself on paper, he does so incorrectly, making the reader not understand his ideas. Second Oliveira (1997), at birth, the human being presents some structures already ready, defined, such as, for example, the color of the eyes, hair, sex. Others are yet to be developed. In the latter case is the part of the nervous system, which needs favorable conditions for its full functioning and development. To understand the reason for this difficulty, we first need to know if this student processes knowledge in the same way. brain area than a non-dyslexic student.

The brain of dyslexics is normal, made up of neurons that communicate with each other. It is divided into two areas: left and right. In normal individuals the left area is responsible for perception and language; subdivided into distinct subareas: one processes phonemes, the other analyzes words and the last one recognizes words. These three subdivisions work together, allowing the human being to learn to read and write. The child only learns to read when he recognizes and processes phonemes, memorizing the letters and their sounds. As the child learns to read, another part of the brain begins to develop with the function of constituting a permanent memory that makes the child recognize words more quickly and without much effort.

The brain of dyslexic children, due to failures in brain connections, does not work this way. In the reading process, dyslexics only resort to the brain area that processes phonemes. Therefore, dyslexics have difficulty differentiating phonemes from syllables, as the brain region responsible for word analysis remains inactive. Their brain connections do not include the area responsible for identifying words and therefore the dyslexic child cannot recognize words that he has already read or studied. Reading becomes a great effort for her, as every word she reads seems new and unfamiliar.

READING, WRITING AND AUDITORY DISCRIMINATION

According to Downing and Thakray (1974), reading involves translating the printed word, both to the sounds of the spoken language and to their meaning. It is recognizing the

auditory and semantic meaning of written or printed words. Reading-writing, therefore, consists of connecting the graphic representation of words with the individual's knowledge, which previously depends on a full neuro-psycho-sociolinguistic development. That is, it cannot be understood as an automatic procedure of auditory-articulatory evocation or copying of graphic symbols through practical-manual exercises, but as a way of reflecting individual reality without having an interlocutor directly in front of you.

According to ECLAC - UNESCO (1991), approximately one out of every two children in Latin America repeats primary school, and each year repetition affects 30% of all students in basic education (18 million) and almost half of them need two years to perform the phoneme-grapheme association.

The key event for the reading-writing process is the phoneme-grapheme association, which is extremely complicated, as it requires a central nervous system in good condition, as well as sensory analyzers and adequate intracerebral communication mechanisms of the different visual areas and neurological systems - motor - auditory - articulatory, that is, between the centers that perceive and understand auditory and visual stimuli, to those that organize practical movements - manual, ocular and mobile structures of the speech articulator mechanism.

In other words, for the child to be able to identify a letter and a sound, a process of interconnection between the hearing centers (temporal lobe) must begin in his brain, which recognize the characteristics of the sound, its duration, rhythm, meaning, etc., vision (occipital lobe) and speech (predominantly frontal lobe), to then reach a later stage, such as transcribing or representing the sound by means of a letter (grapheme) that implies the existence of factors (parietal lobe), orientation in space, and structuring of activity in this and in time, since the leaf is an empty space in which signs must be placed and united, each one defined not only by its shape, but also by the specific direction and succession that make them unique and identifiable.

In modern man, the dissociation of the left and right sides of the brain is evident from the first days of life, which has been proven by MOLFESE (1977), among others, through studies on the relative amplitude of the auditory responses evoked on the temporal lobes.

Studdert-Kennedy (1987) reports that many descriptive and experimental investigations have established that the perceptive motor capacity of speech is attributed to the left cerebral hemisphere in more than 90% of normal adults. In other words, it has greater resolution capacity to discriminate information located in the low zone of the sound spectrum (ARDILA, 1984) as is the phonetic code system (LURIA, 1981); that is, for handling the sounds of speech. The

right, in turn, decodes the signals corresponding to the ambient noise, the timbre and the rhythmic-musical system. However, the two must act in perfect harmony.

DEFICIENCY IN AUDITORY PROCESSING

Auditory processing is particularly crucial for children, as impairments that can occur in the development of processing often lead to problems learning to read. On the other hand, the sequence of events that lead to the normal acquisition of the necessary skills for that school area depends to a great extent on the correct processing of auditory information and is probably the factor that best predicts future success in school (KURLAND & COLODNY, 1969; RAMPP, 1980; YULE & RUTTER, 1976). And finally, significant changes in this processing can also cause delays in speech and language development.

Children with central auditory processing disorders often present similar symptoms in the classroom to other students with mild to moderate and fluctuating peripheral hearing loss. Their behavior is often very inconsistent, as it revolves around auditory skills such as discrimination, memory and understanding of information. For a teacher, this behavior can generate a certain degree of concern, especially when it is not clear whether the student has a premeditated lack of attention or has a physiological basis that causes it. Academically, such students have difficulties in reading, mathematics, or both; and socially, they may present inappropriate behavior as a result of the mental confusion created by this problem in central auditory processing. These children get to feel quite frustrated or anxious and, therefore, can be aggressive with their companions or isolate themselves.

Perceptually, speech already has a unique status for the child from the first hours or days of birth. Neonates discriminate speech from other sounds or noises, and, perhaps as a result of intrauterine stimulation, prefer the mother's voice to that of *strangers*.

Children with hearing losses, whether permanent or intermittent for a long time, do not benefit enough from normal language stimulation to remain within the normal temporal parameters for language acquisition. Therefore, it is important that the educational institution has a record of students who have some type of hearing problem or those with a history of otitis media in the first years of life.

Let's imagine that in that first year the child has episodes of otitis media. You will obviously hear speech in a distorted manner and equally distorted auditory-articulatory engrams will be generated. Once subjected to drug treatment and the otitis is cured, it will be very difficult for the child to restructure, according to the parameters given by the surrounding

linguistic environment, and possibly a delay in language development will be recorded. We already know about the impact of this fact on the acquisition of reading and writing. On the other hand, the presence of a foreign agent inside the middle ear could increase the latency between sound production by the sound source and its reception in the inner ear, which would unbalance the visual-auditory association of the speech current and the perception rhythm, which would certainly affect speech learning in an adequate way.

MA T URATION AND LANGUAGE

Many children with normal hearing show gaps in language development and, therefore, there is a delay in reading acquisition. The difficulties in acquiring reading can be explained as a consequence of the increase in the latency of brain maturation, which leads to a delay in acquiring sensory-perceptual skills such as auditory discrimination and phonological development, and subsequently linguistic-conceptual skills, such as semantics and syntax, which are critical to reading acquisition. For example, ARDILA (1984), propose that the organization of speech motor programs has a parallel development with the syntax and both fit based on the same nervous structures.

Children with auditory processing difficulties seem not to be able to respond efficiently to normal levels of linguistic stimulation and thus are also unable to stay within normal temporal parameters in language development. Similarly, some children may have difficulty making efficient connections between cognitive and motor performance that allow them to effectively articulate the distinctive features of speech sounds that they are able to pick up intellectually. TALLAL (1987), in a longitudinal study that involved subtypes of children with delays in language development, noticed that it is the neuropsychological alterations more than the alterations in the linguistic knowledge per se, which made the distinction between the mentioned groups.

FOOD, SLEEP AND LEARNING

Several investigators determine that hunger produces in human beings a significant decrease or extinction of recreational and cognitive aspirations or vital interests, affects all intellectual functions and generates a series of cumulative organic alterations, irreversible according to age and the time that the individual undergoes to the mentioned condition. When hunger reaches its crux , *hunger neurosis appears* , characterized by extreme irritability. Their

connection causes states of apathy, depression and nausea, detecting, in addition, severe difficulties in carrying out tasks that require mental concentration.

Delgado (1994) reports that studies carried out in Africa found that the intellectual capacity of undernourished children between one and eight years old was 20 points below the group of the same age and region, but better nourished.

As for sleep, an adult person requires seven to nine hours of night rest a day and children a little more. However, schoolchildren often stay up late at night watching television, and many of them must get up very early to go to school. It has been shown that sleep can cause increases in latency to respond to stimuli, decreased motor coordination for gait or digit-manual activities, higher fatigability index in face of intellectual tasks, irritability, drowsiness and involuntary lapses of daytime sleep; that is, periods of one to ten seconds in duration during which the subject sleeps with his eyes open. It is concluded, therefore, that these are adverse conditions for the development of learning.

MOTOR DEVELOPMENT, PLAY AND READING - WRITING

For Ajuriaguerra (1981), our writing, a conventional and codified activity, is the result of an acquisition. It is made up of signs that, due to their form, have no directly symbolic value, but are thus transformed in relation to the meaning that the subject acquires through learning. In carrying out writing as a motor act, the individual is normally seated in front of a table or desk, performs a certain postural immobilization, keeps the eyes at a certain distance from the paper, arm and hand benefiting from some general tonic support; holds the writing instrument, the paper and the book in a certain way.

Ajuriaguerra (1981) distinguishes two levels of psychomotor development for such an action. The first level is general development, which involves the set of tonic-postural relationships and kinetic coordination. The second level is the development of fine digital activities.

It also defines some phases and steps. For example, it determines that the *pre-calligraphic phase* lasts from 5 - 6 years to 8 - 9 years. Between the ages of 6 and 7, the child will see the elimination of the main difficulties in the way of holding and handling the instrument of writing. When this happens, it passes to *the infantile calligraphic phase*. From 8 to the age of 10 the child is much less rigid. Graphic forms are more familiar to him and he is able to bring them to paper with organization and chaining in a kind of childish calligraphy that allows him to shape his writing. Between the ages of 10 and 11, he adjusts the size of the letters

and their performance. And finally, between the ages of 10 and 12, writing reaches a level of maturity and balance that allows it to move on to *the post-calligraphy phase* in which its written expression gives speed.

Goodman (1969) determines that each child arrives at school with 5 or 6 years of language and experience. These vital elements develop fundamentally through play, a primordial occupation at this stage of life, which serves as an organizer of sensorimotor, emotional, perceptive, cognitive and linguistic elements that help to create an internal model of oneself and of the external world that surrounds.

Children who do not learn to play, due to parents and unstimulating environments, manifest problems at school and in social situations. LURIA (1978) refers to an experiment in which a man is placed lying on the floor of a chamber impermeable to light and sound, isolating him from external effects. He initially tends to sleep, but later the test becomes unbearable for the subject. Something similar happens to children who are isolated by their parents.

Stenberg and Powell (1983) claim that good readers combine the information heard or read with their own *knowledge of the world* in the semantic memory, to create a new entity inside the head, which represents the meaning of the text or speech. And Miller (1979) explains that the meaning that any element has for a person consists of the total history of their interaction with said element. Obviously, such interaction does not exclusively imply *physical manipulation* of the same, but cognitive access to the concept. In this way, a child who has insufficient or imperfect knowledge of the world due to deficiencies in one or more of the factors mentioned above will not be prepared for the semantic processing of reading and writing.

THE DIDACTIC-PEDAGOGICAL WORK WITH THE DYSLEXIC STUDENT

Once dyslexia is detected, it is up to the school, together with the teacher, to include this student in the classroom, working in a *different way*, to make sure that he can alleviate his learning disorder. Even with a differentiated job, the child will never stop being dyslexic, but he will be able to have an almost *normal school life*, being able to learn to read and write like the others, despite the difficulties he has.

To work with the dyslexic child, the teacher needs to be trained and have knowledge about Dyslexia. He needs to know what dyslexia is, its cause, as well as know how to diagnose it. With this information, the teacher can work with the student in the classroom, not letting him feel excluded and with low self-esteem.

Most of the time, teachers have a wrong concept in relation to the problem presented by the student, considering him/her relapse, inattentive, lazy and unwilling to learn. This makes the student feel incapable, without motivation, has rebellious reactions and even triggers depression. The picture is even worse when there is repetition and school dropout, because many times we do not have the real diagnosis.

According to Oliveira (1997, p. 9), many teachers, concerned with teaching the first letters, and not knowing how to solve the difficulties presented by their students, often refer them to the various specialized clinics that label them as *sick*, incapable or lazy. Many of these difficulties could be resolved within the school itself.

In the first place, the teacher needs to be patient to work with this student seeking, through daily motivation, different techniques to meet the needs that the student presents. This should not be literate using the traditional method, as the child with dyslexia cannot internalize the whole, needing to have an individualized work, with a lot of repetition, also using the phonetic method, as their difficulty is, mainly, in fixing the phonemes. This work should start by reading books with a simple understanding, gradually increasing their content and only reaching the whole when you think that the student is already prepared or qualified to have this understanding. This work must be carried out in partnership with the dyslexic's parents.

The first step is the actual diagnosis of the problem issued by a neurologist, after, teachers together with the parents need to talk and expose the problem to the child with dyslexia, seeking to restore their self-esteem, confidence through adequate guidance and instruction so that it little by little overcome the trauma of your inability to learn to read and write correctly.

In this way, parents and teachers need to work together, one should not contradict the other, but both seek to increase motivation to restore self-confidence and the student, valuing what he does, even if it is not correct, having the Be careful not to emphasize his mistakes. It is necessary to value all the effort and interest shown by the student, respecting their rhythm, because the dyslexic needs more time to think and understand what needs to be done than a normal student, and for that the teacher needs to have patience and strength of mind. willingness to help him, because there is no specific method to alphabetize this student. The concept of heterogeneity must never be forgotten.

The teacher needs to know the subject and seek information from people who know the subject in order to develop activities for this child.

Another way to help this student is by explaining to him that his difficulty in learning to read and write has a name: Dyslexia, since the teacher wants to help him overcome this

problem and it is up to him to overcome it, not giving up at the first obstacle. , but still firmly seeking knowledge with courage and persistence like the other students.

The teacher needs to be calm with this student, because he will be slower in relation to the others, he will need to give him more time to take the test, copy the matter from the blackboard, solve it, in addition, it is necessary to use different strategies to this student so that he understands the content. It is recommended to use stimulating and interesting materials that the child can see, feel, hear, handle, etc. such as games, posters, stories on CD, toys and games, etc., seeking to teach her the way she best understands the proposed content even if it is through a game where everything is done orally.

THE RIGHT OF PEOPLE WITH DYSLEXIA TO SPECIAL EDUCATIONAL SERVICE

The Federal Constitution of 1988, aLaw 9.394/94 and the legislation of the National Council of Education provide broad support to students with language-related learning difficulties (dyslexia, dysgraphia and dysorthography). Dyslexics have special educational and specific reading needs.

We have some points to consider. The first: the Magna Carta is the highest law of a political society, as its name suggests. In 1988, the Federal Constitution, of a liberal nature, in its article 208, item III, among the attributions of the State, that is, of the Public Power, the “specialized educational assistance to the disabled, preferably in the regular education network”.

The constitutional guarantee results from the liberal commitment of the Brazilian State to educate everyone, without any discrimination or social exclusion, and access to fundamental education, for students of school age, whether normal or special, becomes, as of 1988, a subjective public right , that is, inalienable, without families being able to waive their demand before the Public Power.

In the provision of the 1988 Constitution, as we have observed, there are legal advances and retreats. I advance when you say that people with disabilities should receive specialized care, preferably in the regular education network. However, there is a retreat when it still brings, in the late 1980s, a narrow, exclusionary terminology, when referring to people with a special need, in the school context, as *people with disabilities* .

When it comes to terminological analysis, today we make a discount on the legal expressions of the Federal Constitution of 1988, because we were, in 1988, in the middle of the

end of the 20th century, whose concept of disability was a legacy of medicine from previous centuries. The terminology “people with disabilities” reminds us of an exclusionary Brazil that treated its patients, disabled or not, as “carriers of an infectious disease”. This clinical focus, therefore, lasted until the Federal Constitution of 1988.

The LDB is also an example of Ordinary Law, below, hierarchically, in the legal system of the country, of the Magna Law. This is Law 9,394, of December 20, 1996, Guidelines and Bases of National Education, a law derived from the Federal Constitution, which will fix (social correction) and concert (international tuning) the terminology “people with disabilities” to “people with disabilities” students with special educational needs”.

In its article 4, item III, the LDB says that the duty of the State, with public school education will be carried out by guaranteeing “free specialized educational assistance to students with special needs , preferably in the regular education network”.

The framework of learning difficulties absorbs a variety of educational needs associated with: psycholinguistic problems (dyslexia and related disorders), psychomotor, motor, cognitive (attention, concentration, perception, memory) problems, hyperactivity and also environmental and socioeconomic factors, such as deprivation of a sociocultural and nutritional character.

Soon, we see the advances of the provision of Law 9.394/96: a) Educational assistance is free . Therefore, the provision of specialized care within the scope of the official education network cannot be charged; b) People of school age are considered *students with special needs* , which presupposes a pedagogical focus, or more precisely, a psychopedagogical focus, when it comes to educational assistance. The body and soul of students are the responsibility of all those who promote school education.

Article 58 of the LDB, however, mixes the clinical and pedagogical approaches a little by conceptualizing special education “as a type of school education, offered, preferably, in the regular education network, for students with special needs”.

In § 1, article 58, of the LDB, the legislator says that “there will be, when necessary, specialized support services, in the regular school, to meet the peculiarities of the special education clientele”. Here, it reveals the more medical facet of specialized care, by treating students with special needs as a clientele . Clientele, as is known, refers to the patient, in relation to the usual doctor.

Opinions and Resolution manifested by the National Council of Education are examples of legislation. In general, to have legal force, they are homologated by the Minister of Education and Sports who support them for application in the organization of national education.

More recently, the manifestations of the National Council of Education, in the effort to build a framework of national guidelines for special education, indicate in Opinion CNE/CEB n. ° 17/2001, of July 3, 2001 and CNE/CEB Resolution n.° 02, of September 11, 2001, that education systems must enroll all students with special educational needs. However, who, in the school process, can be considered a “student with special needs?”

CNE/CEB Resolution No. 02, of September 11, 2001, defines, in its article 5, item I, that students with special educational needs are those who, during the educational process, present severe learning difficulties . These students are those who have, within the school, specific learning difficulties, or limitations in the development process that make it difficult to follow up on curricular activities.

Children with dyslexia and related difficulties (dyslalia, dysgraphia and dysorthography), for example, are in the group of these students with difficulties *not linked to a specific organic cause* , while malnourished children and with cognitive assimilation difficulties, in turn, are framed among *those related to conditions, dysfunctions, limitations or disabilities* . Here, dyslexia can, above all, be understood as a specific difficulty in learning to read, compromising spelling (text decoding) and text comprehension.

II) Communication and signaling difficulties . These, in the opinion of the advisors, are the ones *differentiated from the other students* , which would require the use of applicable languages and codes. Children blind from birth, for example, would fit into this group.

III) And students with learning facilities. Counselors observe that there are students who, due to their marked ease of assimilation of information and knowledge, cannot be excluded from the regular education network. Here, the value is in assessing that those who *quickly master concepts, procedures and attitudes* in the school environment are special.

The inclusion of students with special educational needs in the school environment is a way to make society more democratic. Likewise, the transformation of educational institutions into spaces for social inclusion is the task of everyone who works with the soul and body of special children.

CONCLUSION

We can conclude that due to the concern of teachers with the learning of all students, including those with special educational needs, there is a search for specialized reading, courses, lectures, etc. aiming at greater knowledge about the different difficulties and disorders that

affect part of the students enrolled in almost all classrooms in our country and also around the world.

It is known that it is the teacher's duty to seek improvement in order to work with all types of students, and not just with the so-called "normal", those who do not have learning problems. It is necessary, however, that the teacher knows the different types of learning problems that may arise in a classroom, identifying what they are, how to diagnose them, what to do, who to turn to, how to work and what strategies and available resources to promote the development of this being who has the right to learn like others. But there is still a problem about this subject. Today, there is little specialized content published about the majority of learning problems that affect children, and there is still much controversy about deficiencies in the teaching-learning process and the real deficiencies of students, especially in the beginning of literacy. The media also gives little prominence to this subject.

The diagnosis takes a long time to be carried out by the specialist in the area, due to the bureaucracy that exists in Brazil, since the law says that a child who is attending preschool cannot be evaluated, even if the teacher detects that his student has a problem, this can only be referred for a psychopedagogical evaluation after two years of attendance in the classroom, that is, at the end of the first grade or the beginning of the second grade, even so it will still need to be evaluated by the multidisciplinary team of the school, which will diagnose the problem and then ask for an evaluation by a specialist in the area: the neurologist. This process takes a long time, there are children who finish primary school and have not solved their problem because of the lack of support from some professionals who should help the teachers. In addition to these problems, there are also cases of errors in the diagnosis and also cases of careless and/or inattentive professionals who do not take responsibility for themselves and add nothing to the students' school life.

It follows, therefore, that a greater commitment of all parties involved in the teaching-learning process is necessary so that there is an effective transformation of the discrepancies in writing and reading of students inserted in the school context.

REFERENCES

AJURIAGUERRA, Jean. **The scripture of the child**. Barcelona: Editorial Laia, 1976.

CONDEMARIN, M.; BLOMQUIST, M. **Dyslexia: a corrective reading manual**. Porto Alegre: Medical Arts, 1986.

DOWNING, John and THAKRAY, Derek. **Maturity for reading**. Buenos Aires: Editorial Kapelusz, 1974.

DROUET, Ruth Caribé da Rocha. **Learning Disorders**. Sao Paulo: Publisher

GAGNÉ, RM **How learning takes place**. Rio de Janeiro: Technical and Scientific Books, 1967.

LURIA, Aleksandr. **Brain and language**. Barcelona: Editorial Fontanella, 1978.

OLIVEIRA, GC **Psychomotricity: education and re-education in a psychopedagogical approach**. 9. Ed. Petropolis: Voices, 1997.

PALACIOS, M. (org). **Psychological development and education**. Porto Alegre: Medical Arts, 1995.

PILLETI, Nelson. **Educational Psychology**. Sao Paulo, Attica, 1989.

POPPOVIC, AM **Literacy: psychoneurological dysfunctions**. 3. Ed. São Paulo: Vector, 1981.

POPPOVIC, AM; GOLUBI, GM **Literacy readiness : program for the development of specific functions**. São Paulo: Veto, 1966.

JOSÉ, Elisabete da Assunção; Coelho, Maria Theresa. **Learning problems**. São Paulo, 1997.

SAWYER, Diane; BUTLER, Katharine. **Early language intervention: a deterrent to reading disability**. En: *Annals of dyslexia*, Vol. 41. The Orton Dyslexia Society, 1991.

STUDDERT-KENNEDY, Michael. The phoneme as a perceptual motor structure. In: ALLPORT, Allan and others. **Language perception and production**. Academic Press, London, 1987.