

## Chapter 1 : Learning disability - Wikipedia

*"Learning Disabilities" is an "umbrella" term describing a number of other, more specific learning disabilities, such as dyslexia and dysgraphia. Find the signs and symptoms of each, plus strategies to help below.*

While most of us can learn by any of these methods, many believe that we usually have a preferred way to learn. There is controversy over the validity of this theory and many different learning style models have been developed. One of the most common and widely-used models, the VAK Learning Styles, categorizes three types of learners: Visual – Visual learners think in pictures and prefer to learn through what they see visual aids such as overhead slides, diagrams, handouts, etc. Auditory – Auditory learners learn best through what they hear listening to lectures, discussions, tapes, etc. It can be downloaded or answered online through many educational facilities. Do a web search or try this Sinclair College link: Identifying their learning style can help learners focus on what works best for them. Learning Disabilities LDs – which is short for learning disabilities – affect one or more of the ways that a person takes in, stores, or uses information. LDs come in many forms and affect people with varying levels of severity. Between 5 and 10 percent of Canadians have LDs. Learning Disabilities Association of Ontario [www](http://www.ldao.org). There are many different kinds of LDs and they affect each person differently. LDs are not an illness, nor can they be cured. However, people can cope with LDs by using their areas of strength to compensate and by using assistive devices such as technology. As literacy practitioners, we cannot diagnose learning disabilities – that is the role of a psychiatrist, certified psychologist or other licensed specialist. However, given that about half of LBS learners may have learning disabilities, we should be looking for and addressing LDs in our intake and assessment process. Discussing learning disabilities in more detail is beyond the scope of this module. These organizations have a wealth of resources and provide many links to valuable tools and information. If an LD has previously been diagnosed, or if you suspect one, you can work with the learner to incorporate strategies that may lead to greater success. You can learn about strategies and about screening for learning disabilities, thanks to two resources produced by Literacy Link South Central. The first one is Learning Disabilities Training: Both resources are available for download in their entirety in PDF format at [www](http://www.llsc.org). In particular, refer to Module 3: Questions and Activities for Reflection Take one of the learning style inventories mentioned. What did the inventory say your preferred learning style was? How accurate do you feel the results were? How might knowing your learning style help you in learning new things? How might knowing the distinctions help you in your assessment of learners? Using the resource mentioned in 2, read about intellectual disabilities. How would you distinguish between learning disabilities and intellectual disabilities?

## Chapter 2 : Learning Disabilities - Methods

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Children with math learning disorders might also have trouble with counting principles such as counting by twos or counting by fives or have difficulty telling time. Learning disabilities in writing dysgraphia Learning disabilities in writing can involve the physical act of writing or the mental activity of comprehending and synthesizing information. Basic writing disorder refers to physical difficulty forming words and letters. Expressive writing disability indicates a struggle to organize thoughts on paper. Symptoms of a written language learning disability revolve around the act of writing. They include problems with: Other types of learning disabilities involve difficulties with motor skills movement and coordination , understanding spoken language, distinguishing between sounds, and interpreting visual information. Learning disabilities in motor skills dyspraxia Motor difficulty refers to problems with movement and coordination whether it is with fine motor skills cutting, writing or gross motor skills running, jumping. In order to run, jump, write or cut something, the brain must be able to communicate with the necessary limbs to complete the action. Signs that your child might have a motor coordination disability include problems with physical abilities that require hand-eye coordination, like holding a pencil or buttoning a shirt. Language is also considered an output activity because it requires organizing thoughts in the brain and calling upon the right words to verbally explain something or communicate with someone else. Signs of a language-based learning disorder involve problems with verbal language skills, such as the ability to retell a story and the fluency of speech, as well as the ability to understand the meaning of words, parts of speech, directions, etc. Auditory and visual processing problems: An inability to distinguish subtle differences in sound, or hearing sounds at the wrong speed make it difficult to sound out words and understand the basic concepts of reading and writing. Visual processing disorder – Problems in visual perception include missing subtle differences in shapes, reversing letters or numbers, skipping words, skipping lines, misperceiving depth or distance, or having problems with eye-hand coordination. Anxiety, depression, stressful events, emotional trauma, and other conditions affecting concentration make learning more of a challenge. In addition, ADHD and autism sometimes co-occur or are confused with learning disabilities. Children with ADHD often have problems sitting still, staying focused, following instructions, staying organized, and completing homework. Children with autism spectrum disorders may have trouble communicating, reading body language, learning basic skills, making friends, and making eye contact. Hope for learning disabilities: The brain can change How does understanding the brain help a learning disorder? Using a telephone analogy, faulty wiring in the brain disrupts normal lines of communication and makes it difficult to process information easily. If service was down in a certain area of the city, the phone company might fix the problem by re-wiring the connections. Similarly, under the right learning conditions, the brain has the ability to reorganize itself by forming new neural connections. These new connections facilitate skills like reading and writing that were difficult using the old connections. Science has made great strides in understanding the inner workings of the brain, and one important discovery that brings new hope for learning disabilities and disorders is called neuroplasticity. Throughout life, the brain is able to form new connections and generate new brain cells in response to experience and learning. Innovative programs, such as the Arrowsmith program, use strategic brain exercises to identify and strengthen weak cognitive areas. For example, for children who have difficulty distinguishing between different sounds in a word, there are new computer-based learning programs that slow down the sounds so that children can understand them and gradually increase their speed of comprehension. These discoveries about neuroplasticity provide hope to all students with learning disorders, and further research may lead to additional new treatments that target the actual causes of learning disabilities, rather than simply offering coping strategies to compensate for weaknesses. That said, you should trust your instincts. If you think something is wrong, listen to your gut. If you feel that a teacher or doctor is minimizing your concerns, seek a second opinion. Keep in mind that finding someone who can help may take some time and effort. Even experts mix up learning

disabilities with ADHD and other behavioral problems sometimes. You may have to look around a bit or try more than one professional. Leave that to the professionals. Focus instead on steps you can take to support your child and address his or her symptoms in practical ways. The diagnosis and testing process for learning disabilities Diagnosing a learning disability is a process. It involves testing, history taking, and observation by a trained specialist. Finding a reputable referral is important. Types of specialists who may be able to test for and diagnose learning disabilities include:

## Chapter 3 : Do2Learn: Educational Resources for Special Needs

*Knowing which teaching methods for students with learning disabilities are appropriate to use varies as much as the individual students themselves. Learning disabilities affect how individuals perceive, process, store, retrieve or express incoming or outgoing information.*

For those students with disabilities, the classroom setting may present certain challenges that need accommodation and consideration. Terminology Types of Disabilities Access to Resources Confidentiality and Disclosure Inclusive Design Learn More References Terminology In order to create an inclusive classroom where all students are respected, it is important to use language that prioritizes the student over his or her disability. Disability labels can be stigmatizing and perpetuate false stereotypes where students who are disabled are not as capable as their peers. In general, it is appropriate to reference the disability only when it is pertinent to the situation. For more information on terminology, see the guide provided by the National Center on Disability and Journalism: Types of disabilities may include: For instance, you may not know that a student has epilepsy or a chronic pain disorder unless she chooses to disclose or an incident arises. For example, if you ask the students to rearrange the desks, a student may not help because he has a torn ligament or a relapsing and remitting condition like Multiple Sclerosis. Or, a student may ask to record lectures because she has dyslexia and it takes longer to transcribe the lectures. Access to Resources When students enter the university setting, they are responsible for requesting accommodations through the appropriate office. This may be the first time the student will have had to advocate for himself. For first year students, this may be a different process than what they experienced in high school with an Individualized Education Program IEP or Section plan. Department of Education has a pamphlet discussing rights and responsibilities for students entering postsecondary education: As part of the required paperwork, the student must present documentation from an appropriate medical professional indicating the diagnosis of the current disability and, among other things, the types of accommodations requested. All medical information provided is kept confidential. Only the approved accommodation arrangements are discussed with faculty and administrators on an as-needed basis. It is important to note that this process takes time and certain accommodations, like an interpreter, must be made within a certain time period. However, students with disabilities may feel nervous to disclose sensitive medical information to an instructor. Often, students must combat negative stereotypes about their disabilities held by others and even themselves. Similarly students with physical disabilities face damaging and incorrect stereotypes, such as that those who use a wheelchair must also have a mental disability. Your attitudes and values not only influence the attitudes and values of your students, but they can affect the way you teach, particularly your assumptions about studentsâ€which can lead to unequal learning outcomes for those in your classes. Strategies A statement in your syllabus inviting students with disabilities to meet with you privately is a good step in starting a conversation with those students who need accommodations and feel comfortable approaching you about their needs. Here are two sample statements: The Department of Spanish and Portuguese is committed to making educational opportunities available to all students. In order for its faculty members to properly address the needs of students who have disabilities, it is necessary that those students approach their instructors as soon as the semester starts, preferably on the first day of class. They should bring an official letter from the Opportunity Development Center explaining their specific needs so that their instructors are aware of them early on and can make the appropriate arrangements. If you have a learning or physical disability, or if you learn best utilizing a particular method, please discuss with me how I can best accommodate your learning needs. I am committed to creating an effective learning environment for all learning styles. However, I can only do this successfully if you discuss your needs with me in advance of the quizzes, papers, and notebooks. I will maintain the confidentiality of your learning needs. If appropriate, you should contact the Equal Opportunity, Affirmative Action, and Disability Services Department to get more information on accommodating disabilities. Provide an easily understood and detailed course syllabus. Make the syllabus, texts, and other materials available before registration. If materials are on-line, consider colors, fonts, and formats that are easily viewed by students with low vision or a form of color blindness. Clearly

spell out expectations before the course begins e. Make sure that all students can access your office or arrange to meet in a location that is more accessible. Think of multiple ways students may be able to participate without feeling excluded. Inclusive Design One of the common concerns instructors have about accommodations is whether they will change the nature of the course they are teaching. However, accommodations are designed to give all students equal access to learning in the classroom. When planning your course, consider the following questions from Scott, What is the purpose of the course? What methods of instruction are absolutely necessary? What outcomes are absolutely required of all students? What methods of assessing student outcomes are absolutely necessary? What are acceptable levels of performance on these student outcome measures Answering these questions can help you define essential requirements for you and your students. For instance, participation in lab settings is critical for many biology classes; however, is traditional class lecture the only means of delivering instruction in a humanities or social science course? Additionally, is an in-class written essay exam the only means of evaluating a student who has limited use of her hands? Could an in-person or taped oral exam accomplish the same goal? Instead of adapting or retrofitting a course to a specific audience, Universal Design emphasizes environments that are accessible to everyone regardless of ability. By focusing on these design principles when crafting a syllabus, you may find that most of your course easily accommodates all students. For instance, a syllabus with clear course objectives, assignment details, and deadlines helps students plan their schedules accordingly. Similarly, some instructional material may be difficult for students with certain disabilities. For instance, when showing a video in class you need to consider your audience. Students with visual disabilities may have difficulty seeing non-verbalized actions; while those with disorders like photosensitive epilepsy may experience seizures with flashing lights or images; and those students with hearing loss may not be able to hear the accompanying audio. Additionally, it allows other students the opportunity to engage with the material in multiple ways as needed. Additionally, the EAD office can help students and instructors address any questions or concerns they may have Journal of Learning Disabilities, 33 1 , Universal design in higher education: From principles to practice. Accommodationsâ€™or just good teaching?: Strategies for teaching college students with disabilities. Stereotypes of individuals with learning disabilities: Journal of Learning Disabilities, 43 6 , Post-Secondary Students with Disabilities: Issues Related to Empowerment and Self-Determination. Developmental Disabilities Bulletin, 38 , Accommodating College Students with Learning Disabilities: How Much Is Enough?. Innovative Higher Education, 22 2 , Universal Design for Instruction. Remedial and Special Education, 24 6 , Universal Instruction Design in Higher Education: An Approach for Inclusion. Students with disabilities preparing for postsecondary education: Know your rights and responsibilities. Toward an Accessible Pedagogy: Technical Communication Quarterly, 19 4 , Students with Asperger syndrome: A guide for college personnel.

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Request Information Purdue University - online MEd in Special Education offering separate tracks for initial teacher licensure, and licensed teachers looking to add advanced endorsements. Knowing which teaching methods for students with learning disabilities are appropriate to use varies as much as the individual students themselves. Learning disabilities affect how individuals perceive, process, store, retrieve or express incoming or outgoing information. Auditory processing disorders that affect the discrimination of non-verbal and verbal sounds making it hard to follow auditory cues and instruction. Language processing disorders that affect the processing and interpretation of meaningful speech and impact reading and writing development. Non-verbal disorders that affect understanding of body language and facial clues which contribute to appropriate social interactions. Visual perceptual or motor problems that affects how a person sees or produces information and can impede writing, copying, drawing and coordination skills. Dyscalculia, dyslexia or dysgraphia, which affect how a person processes, comprehends and expresses math, reading or writing concepts. Regardless of what type of learning disabilities a student may exhibit, however, cutting-edge teaching methods for students with learning disabilities remain grounded in traditional approaches while incorporating modern treatments and therapies. Here are some examples. Experiential learning uses visual, auditory and hands-on approaches, with self-directed student participation, to enhance comprehension and reinforce content. Teachers can then guide students to master content more easily while supporting independent learning skills. As a result of these combined approaches, students benefit from active engagement in the learning process, process content more efficiently, and are more likely to increase their comprehension and retention of target material. Direct Instruction and Scripts Unlike experiential learning and scaffolding approaches, where teachers guide students through self-paced activities, direct instruction uses scripts to explicitly teach concepts through structured routines in group or individual settings. As a long-established teaching methodology, direct instruction adapts beautifully to new ways of use when combined with the use of scripts. Together, these approaches help to develop automatic recall skills, acting as cues for students to remember previously learned information. Established technology includes a wide variety of tools, including: Students with learning disabilities can be successful learners when they identify their learning strengths and the strategies that work best for them to comprehend and retain information. By incorporating new instructional approaches with traditional teaching methods for students with learning disabilities, learning success for every child is possible. Leave a Reply You must be logged in to post a comment.

## Chapter 5 : Learning Styles and Disabilities | Literacy Basics

*Learning disabilities, or learning disorders, are an umbrella term for a wide variety of learning problems. A learning disability is not a problem with intelligence or motivation. Kids with learning disabilities aren't lazy or dumb.*

Learning Disabilities Association of America It is also important to note that children with learning disabilities do not always acquire skills in the normal developmental sequence. If an individual does not develop adequate phonemic awareness during the pre-reading period, effective decoding may not be possible, which influences the development of fluent reading and comprehension skills. Also, children with learning disabilities often come to the reading task with oral language comprehension problems. When assessing and planning for instruction, consideration of these oral language comprehension problems may facilitate acquisition of reading comprehension. No single reading method will be effective for all students with learning disabilities. Most individuals with learning disabilities will benefit from the application of a variety of methods. Instructors need a repertoire of instructional methods. Selecting the appropriate program to apply to the student is not a simple matter, and requires a careful assessment of where the student is in the developmental process. Because there may be a lack of understanding of the sophisticated decoding skills needed, reading with fluency suffers. Students with learning disabilities should be provided with sound strategic approaches that empower them as readers, rather than be allowed to learn and internalize incorrect practices. Selecting the appropriate method A significant part of selecting appropriate instructional approaches is understanding the learning profile of an individual. A diagnostic program is necessary to identify students with learning disabilities. Students with learning disabilities need to be taught strategic approaches explicitly. They need to have ideas made conspicuously clear to them. Persons with learning disabilities who need to work on reading mechanics frequently respond to explicitly taught code-emphasis developmental reading methods such as phonic, linguistic, or multisensory approaches. Some of the more popular approaches are briefly described below.

**Phonics approach** The phonics approach teaches word recognition through learning grapheme-phoneme letter-sound associations. The student learns vowels, consonants, and blends, and learns to sound out words by combining sounds and blending them into words. By associating speech sounds with letters the student learns to recognize new and unfamiliar words.

**Linguistic method** This method uses a "whole word" approach. Words are taught in word families, or similar spelling patterns, and only as whole words. The student is not directly taught the relationship between letters and sounds, but learns them through minimal word differences. As the child progresses, words that have irregular spellings are introduced as sight words.

**Multisensory approach** This method assumes that some children learn best when content is presented in several modalities. Multisensory approaches that employ tracing, hearing, writing, and seeing are often referred to as VAKT visual, auditory, kinesthetic, tactile methods. Multisensory techniques can be used with both phonics and linguistic approaches.

**Neurological Impress Technique** This is a rapid-reading technique. The teacher begins as the dominant reading voice, but gradually the student spends more time leading these sessions. Students who have learned mechanics without adequately learning reading fluency frequently benefit from this, as do students who read slowly or who hesitate over a number of words but are able to identify most of the words in a sentence. A student is directed to read a passage without errors. This method functions most effectively when it is practiced for short periods every day. This can be done in small groups and individually. Familiarity with the content and the vocabulary facilitate reading these stories. Each child can develop a book to be read and re-read. This approach helps children know what reading is and that ideas and experiences can be conveyed in print.

**Reading comprehension support** Persons with learning disabilities who need work on reading comprehension often respond to explicitly taught strategies which aid comprehension such as skimming, scanning and studying techniques. These techniques aid in acquiring the gist, and then focus is turned to the details of the text through use of the cloze procedure. With this method, every fifth to eighth word in a passage is randomly eliminated. The student is then required to fill in the missing words. This technique develops reading skills and an understanding not only of word meaning but also of the structure of the language itself.

**Conclusions** Persons with learning disabilities will typically require a variety of

instructional approaches in order to make their educational experiences more productive. There is no one best approach to teach reading to students with learning disabilities. There are many reading methods available with ongoing debate about which one is preferable. It is critical that instructors understand both the student and the various reading methods available if the student is to have the best possible learning experience. The importance of a comprehensive evaluation that will result in prescription for intervention cannot be over-emphasized. As important is the notion that teachers must have the ability to effectively and systematically alter various methods to meet the needs of individual children with learning disabilities. Reading Methods and Learning Disabilities. Learning Disabilities Association of America.

## Chapter 6 : Effective Teaching Methods for People With Intellectual Disabilities

*Learning disabilities, or learning disorders, are an umbrella term for a wide variety of learning problems. A learning disability is not a problem with intelligence or motivation.*

We recommend that you apply these strategies across home, school, and community contexts. Go to the Site Map for a full list of resources and activities! Probe regularly to check understanding. Provide regular quality feedback. Present information visually and verbally. Use diagrams, graphics and pictures to support instruction. Model what you want students to do. Clearly define and post classroom expectations for work and behavior. Explicitly teach study and organizational skills. Teach student how to use planner or agenda to record assignments and due dates. Provide prompts of strategies to use and when to use them. Provide simple instructions preferably one at a time. Sequence slowly, using examples. Speak clearly and turn so students can see your face. Allow time for students to process requests and allow them to ask questions. Use graphic organizers to support understanding of relationships between ideas. Use adaptive equipment if appropriate books on tape, laptop computers, etc. Ask questions in a clarifying manner, then have student describe understanding of the questions. Use an overhead projector with an outline of the lesson or unit of the day. Provide clear photocopies of notes and overhead transparencies. Provide a detailed course outline before class begins. Keep oral instructions logical and concise and reinforce them with brief cue words. Repeat or re-word complicated directions. Frequently verbalize what is being written on the board. At the end of class, summarize the important segments of each presentation. Eliminate classroom distractions e. Give assignments both in written and oral form. Have more complex lessons recorded and available to the students. Have practice exercises available for lessons, in case the student has problems. Have student underline key words or directions on activity sheets then review the sheets with them. Provide and teach memory strategies, such as mnemonic strategies and elaborative rehearsal. Write legibly, use large type, and do not clutter the board. Assist the student in borrowing notes from a peer if necessary. Clearly label equipment, tools, and materials, and use color-coding. Review relevant material, preview the material to be presented, present the new material, and then summarize the material just presented. Provide a peer tutor or assign the student to a study group. Allow the student to use a tape recorder. Use specific language and state expectations. Reading Provide a quiet area for reading activities. Use books on tape, and books with large print and big spaces between lines. Provide a copy of class notes to student. Allow alternative forms for book reports. Have students use both visual and auditory senses when reading text. Present material in small units. Use graphic organizers to connect ideas. Read and share stories with students. Provide students with chapter outlines or study guides that highlight key points in their reading. Announce reading assignments well in advance. Offer to read written material aloud, when necessary. Share informational texts and invite students to wonder about the new ideas presented. Point out ways in which reading is important in everyday life e. Teach students how books are organized. Use stories that have predictable words and words that occur frequently in the text. Label objects in classroom. Help students notice the letters in the environmental print that surrounds them. Engage students in activities that help them learn to recognize letters visually. Teach students to attend to the sounds in language. Model and demonstrate how to break short sentences into individual words. Have students clap out syllables and listen for and generate rhymes. Focus on activities that involve sounds of words, not on letters or spellings. Model specific sounds, and ask students to produce each sound in isolation. Teach students to blend, identify sounds, and break up words into sounds. When teaching the letters of the alphabet, activities should be explicit and unambiguous. When teaching decoding, begin with small, familiar words. Model sounding out words, blending the sounds together, and saying the word. Have students read new stories and reread old stories every day to build fluency. Engage students in discussion of reading topics that are of interest. Provide high interest reading selections whenever possible. Model comprehension strategies and provide students with guided assistance. Point out how titles, headings, and graphics reveal main ideas and tell what a book is about. Teach students to identify main ideas presented in the text, as well as the supporting details. Point out unfamiliar words, revisit them, and explore their meaning. Teach students to use contextual clues to figure out

meanings of unfamiliar words. Build background for reading selections and create a mental scheme for text organization. Set a purpose for reading to gain meaning from text. Writing Use oral exams in place of written exams when possible. Allow use of tape recorder in class. Assign a note taker for student. Provide notes or outlines to reduce the amount of writing. Provide a partially completed outline that allows student to fill in details under major headings. Allow use of a laptop or other computer for writing assignments. Provide computer with spell check, grammar, and cut and paste features. Reduce copying that the student is required to do e. Have wide rule paper, graph paper, and pencil grips available. Provide alternatives to written assignments video-taping or audio recording. Use mnemonic devices to teach writing process e. Capitalization, Organization, Punctuation, Spelling. Allow the student to use print or cursive. Teach pre-organization strategies, such as use of graphic organizers. Use a speech recognition program combined with the word processor so students can dictate rather than type for older students. Do not count off for poor spelling on first drafts, in-class assignments, or on tests. Have student proofread papers using a checklist not immediately after writing. Shorten writing assignments and allow extra time if necessary. Have students complete writing tasks in small steps. Stress or de-emphasize certain task requirements during a complex assignment. Allow use of abbreviations in writing assignments, and have student keep a list of appropriate abbreviations available. Mathematics Allow use of fingers and scratch paper. Use diagrams and draw math concepts. Present activities that involve all sensory modalities auditory, visual, tactile, and kinesthetic.

## Chapter 7 : Treatment for Learning Disabilities . Education | PBS Parents

*No single reading method will be effective for all students with learning disabilities. Most individuals with learning disabilities will benefit from the application of a variety of methods. Instructors need a repertoire of instructional methods.*

Fostering Independence in Children Treatment for Learning Disabilities What kinds of medical, behavioral, and holistic treatments are available? What are the pros and cons of each type? Hear what our panel of experts advises about treatment options. Parents should be cautious about treatments that are promoted as a cure for learning disabilities. While some medical interventions — such as medication if a child has also been properly diagnosed with a coexisting disorder such as ADHD — can be most helpful, many treatments are unproven and ineffective. Many of the treatments that we see promoted through advertising are extremely costly and have no independent research showing that they are effective and that the effects are sustained over time. Should parents find a treatment that looks promising, a substantial amount of homework should be done before proceeding. Parents can be quick to act on a promising treatment, wanting to help their child if at all possible. Ask for contact information from other parents whose children have undergone the treatment program and ask for independent research that shows that the program or treatment achieves the results promised. Then, post messages in some of the online discussion areas and seek feedback from other parents. Ask teachers and other professionals if they know of the treatment and its efficacy. Any well-researched treatment recommended by a trained and qualified professional is likely to have some merit. Often, a multidimensional treatment plan works best. For example, while a reading-disabled child will clearly benefit from explicit instruction in word decoding, comprehension skills and exposure to literature should also be considered. Sometimes, it is necessary to prioritize treatment components. For example, structuring the classroom environment before a medical approach is used can be helpful in some cases. The best way to understand and treat learning disabilities is head on, with targeted screenings and assessments, and focused, intensive, and explicit instruction. If in doubt, ask for help from an expert at either a university or hospital-based evaluation and treatment center or through a national organization like the National Center for Learning Disabilities , the International Dyslexia Association , or the Learning Disabilities Association of America. Treatment of all learning disabilities should center on educational interventions. Medical treatments for related medical problems including attention disorders do not seem to affect learning disabilities directly. Multiple interventions that look at all relevant biological, psychological, and social factors are essential and comprise a general principle of treatment. We all want that magic bullet to take care of learning problems. Unfortunately, the belief that medication alone will work is too readily embraced. Likewise, the belief that behavioral strategies alone are enough contains both risks and benefits. He held on to the thoughts expressed by his teacher because she believed in him and gave him hope for the future.

### Chapter 8 : Learning Disabilities and Disorders: Types of Learning Disorders and Their Signs

*Individuals with intellectual disabilities (ID, formerly mental retardation) benefit from the same teaching strategies used to teach people with other learning challenges. This includes learning disabilities, attention deficit/hyperactivity disorder, and autism.*

Individuals with intellectual disabilities ID, formerly mental retardation benefit from the same teaching strategies used to teach people with other learning challenges. One such strategy is to break down learning tasks into small steps. Each learning task is introduced, one step at a time. This avoids overwhelming the student. Once the student has mastered one step, the next step is introduced. This is a progressive, step-wise, learning approach. It is characteristic of many learning models. The only difference is the number and size of the sequential steps. A second strategy is to modify the teaching approach. Lengthy verbal directions and abstract lectures are ineffective teaching methods for most audiences. Most people are kinesthetic learners. This means they learn best by performing a task "hands-on. A hands-on approach is particularly helpful for students with ID. They learn best when information is concrete and observed. For example, there are several ways to teach the concept of gravity. Teachers can talk about gravity in the abstract. They can describe the force of gravitational pull. Second, teachers could demonstrate how gravity works by dropping something. Third, teachers can ask students directly experience gravity by performing an exercise. The students might be asked to jump up and subsequently down , or to drop a pen. Most students retain more information from experiencing gravity firsthand. This concrete experience of gravity is easier to understand than abstract explanations. Third, people with ID do best in learning environments where visual aids are used. This might include charts, pictures, and graphs. These visual tools are also useful for helping students to understand what behaviors are expected of them. Charts can also be used as a means of providing positive reinforcement for appropriate, on-task behavior. A fourth teaching strategy is to provide direct and immediate feedback. Individuals with ID require immediate feedback. A delay in providing feedback makes it difficult to form connection between cause and effect. As a result, the learning point may be missed.

### Chapter 9 : Reading Methods for Students with LD | LD Topics | LD OnLine

*Learning disabilities affect families, and families affect learning disabilities. Children who are failing or struggling too hard feel confusion, disappointment, anger, anguish, and guilt, as do their parents.*

Definitions[ edit ] Representatives of organizations committed to the education and welfare of individuals with learning disabilities are known as National Joint Committee on Learning Disabilities NJCLD. One such difficulty was its belief of central nervous system dysfunction as a basis of understanding and diagnosing learning disability. This conflicted with the fact that many individuals who experienced central nervous system dysfunction, such as those with cerebral palsy, did not experience disabilities in learning. On the other hand, those individuals who experienced multiple handicapping conditions along with learning disability frequently received inappropriate assessment, planning, and instruction. The NJCLD notes that it is possible for learning disability to occur simultaneously with other handicapping conditions, however, the two should not be directly linked together or confused. These disorders are intrinsic to the individual and presumed to be due to Central Nervous System Dysfunction. Even though a learning disability may occur concomitantly with other handicapping conditions e. The LD Roundtable produced the following definition: Strong converging evidence supports the validity of the concept of specific learning disabilities SLD. This evidence is particularly impressive because it converges across different indicators and methodologies. The central concept of SLD involves disorders of learning and cognition that are intrinsic to the individual. SLD are specific in the sense that these disorders each significantly affect a relatively narrow range of academic and performance outcomes. SLD may occur in combination with other disabling conditions, but they are not due primarily to other conditions, such as intellectual disability, behavioral disturbance, lack of opportunities to learn, or primary sensory deficits. The DSM-5 does not limit learning disorders to a particular diagnosis such as reading, mathematics, or written expression. Instead, it is a single diagnosis criterion describing drawbacks in general academic skills and includes detailed specifiers for the areas of reading, mathematics, and written expression. People with learning disabilities generally have intelligence that is average or higher. It addresses the educational needs of children with disabilities from birth to the age of Originally called the Association for Children with Learning Disabilities, the Learning Disabilities Association of Canada " LDAC was created to provide awareness and services for individuals with learning disabilities, their families, at work, and the community. Since education is largely the responsibility of each province and territory in Canada, provinces and territories have jurisdiction over the education of individuals with learning disabilities, which allows the development of policies and support programs that reflect the unique multicultural, linguistic, and socioeconomic conditions of its area. In the UK, the term "learning disability" refers to a range of developmental disabilities or conditions that are almost invariably associated with more severe generalized cognitive impairment. The first definition for learning disability was coined in , and in , the Enrichment Project for the Support System for Students with Learning Disabilities was established. Since then, there have been significant efforts to screen children for learning disabilities, provide follow-up support, and provide networking between schools and specialists. Neuropsychological differences can affect the accurate perception of social cues with peers. It has generally been difficult to determine the efficacy of special education services because of data and methodological limitations. Emerging research suggests adolescents with learning disabilities experience poorer academic outcomes even compared to peers who began high school with similar levels of achievement and comparable behaviors. Students with a positive perception of their academic abilities generally tend to have higher self-esteem than those who do not, regardless of their actual academic achievement. However, studies have also shown that several other factors can influence self-esteem. Skills in non-academic areas, such as athletics and arts, improve self-esteem. Another important finding is that students with learning disabilities are able to distinguish between academic skill and intellectual capacity. This demonstrates that students who acknowledge their academic limitations but are also aware of their potential to succeed in other intellectual tasks see themselves as intellectually competent individuals, which increases their self-esteem. However, some causes of neurological impairments include: Heredity and genetics Learning

disabilities often run in the family. Children with learning disabilities are likely to have parents or other relatives with similar difficulties. One study [22] estimated that about one in children had such spontaneous mutations, for example a fault in the CDK13 gene which is associated with learning and communication difficulties in the children affected. Other areas of assessment may include perception, cognition, memory, attention, and language abilities. Although the discrepancy model has dominated the school system for many years, there has been substantial criticism of this approach among researchers. Low academic achievers who do not have a discrepancy with IQ i. Response to intervention[ edit ] Much current research has focused on a treatment-oriented diagnostic process known as response to intervention RTI. Researcher recommendations for implementing such a model include early screening for all students, placing those students who are having difficulty into research-based early intervention programs, rather than waiting until they meet diagnostic criteria. Their performance can be closely monitored to determine whether increasingly intense intervention results in adequate progress. Those who do not respond adequately to regular classroom instruction often called "Tier 1 instruction" and a more intensive intervention often called "Tier 2" intervention are considered "non-responders. Some models of RTI include a third tier of intervention before a child is identified as having a learning disability. A primary benefit of such a model is that it would not be necessary to wait for a child to be sufficiently far behind to qualify for assistance. In the United States, the reauthorization of the Individuals with Disabilities Education Act permitted states and school districts to use RTI as a method of identifying students with learning disabilities. RTI is now the primary means of identification of learning disabilities in Florida. Third, it requires a strong intervention program before students can be identified with a learning disability. Lastly, RTI is considered a regular education initiative and is not driven by psychologists, reading specialists, or special educators. Latino English language learners[ edit ] Demographers in the United State report that there has been a significant increase in immigrant children in the United States over the past two decades. Various teaching strategies are more successful for students that are linguistic or culturally diverse versus traditional methods of teaching used for students whose first language is English. It is then also true that the proper way to diagnose a learning disability in English language learners ELL differs. In the United States, there has been a growing need to develop the knowledge and skills necessary to provide effective school psychological services, specifically for those professionals who work with immigrant populations. With an unclear diagnosis, many students will suffer because they will not be provided with the tools they need to succeed in the public education school system. For example, in many occasions teachers have suggested retention or have taken no action at all when they lack experience working with English language learners. Students were commonly pushed toward testing, based on an assumption that their poor academic performance or behavioral difficulties indicated a need for special education. S dealing could be potentially dealing with. Many school districts do not have the proper personnel that is able to communicate with this population. Also, an emphasis is placed on informal assessment measures such as language samples, observations, interviews, and rating scales as well as curriculum-based measurement to complement information gathered from formal assessments. It is very unfortunate that many schools do not have school psychologist with the proper training nor access to appropriate tools. Also, many school districts frown upon taking the appropriate steps to diagnosing ELL students. Assessment[ edit ] Many normed assessments can be used in evaluating skills in the primary academic domains: These tests include measures of many academic domains that are reliable in identifying areas of difficulty. A more comprehensive list of reading assessments may be obtained from the Southwest Educational Development Laboratory. By stage of information processing[ edit ] Learning disabilities fall into broad categories based on the four stages of information processing used in learning: Difficulties with visual perception can cause problems with recognizing the shape, position, or size of items seen. There can be problems with sequencing , which can relate to deficits with processing time intervals or temporal perception. Some children appear to be unable to process tactile input. For example, they may seem insensitive to pain or dislike being touched. Integration This is the stage during which perceived input is interpreted, categorized, placed in a sequence, or related to previous learning. Students with problems in these areas may be unable to tell a story in the correct sequence, unable to memorize sequences of information such as the days of the week, able to understand a new concept but be

unable to generalize it to other areas of learning, or able to learn facts but be unable to put the facts together to see the "big picture. Storage Problems with memory can occur with short-term or working memory, or with long-term memory. Difficulties with visual memory can impede learning to spell. Output Information comes out of the brain either through words, that is, language output, or through muscle activity, such as gesturing, writing or drawing. Difficulties with language output can create problems with spoken language. Such difficulties include answering a question on demand, in which one must retrieve information from storage, organize our thoughts, and put the thoughts into words before we speak. It can also cause trouble with written language for the same reasons. Difficulties with motor abilities can cause problems with gross and fine motor skills. People with gross motor difficulties may be clumsy, that is, they may be prone to stumbling, falling, or bumping into things. They may also have trouble running, climbing, or learning to ride a bicycle. People with fine motor difficulties may have trouble with handwriting, buttoning shirts, or tying shoelaces. By function impaired[ edit ] Deficits in any area of information processing can manifest in a variety of specific learning disabilities. It is possible for an individual to have more than one of these difficulties. This is referred to as comorbidity or co-occurrence of learning disabilities. The term " Developmental Dyslexia " is often used as a synonym for reading disability; however, many researchers assert that there are different types of reading disabilities, of which dyslexia is one. A reading disability can affect any part of the reading process, including difficulty with accurate or fluent word recognition, or both, word decoding, reading rate, prosody oral reading with expression , and reading comprehension. Before the term "dyslexia" came to prominence, this learning disability used to be known as "word blindness. This difficulty must also cause significant impairment to academic achievement and tasks that require composition of written text Criterion B , and if a sensory deficit is present, the difficulties with writing skills must exceed those typically associated with the sensory deficit, Criterion C. A disorder in spelling or handwriting without other difficulties of written expression do not generally qualify for this diagnosis. By a number of organizations, the term " dysgraphia " has been used as an overarching term for all disorders of written expression. Dyscalculia Sometimes called dyscalculia , a math disability involves difficulties such as learning math concepts such as quantity, place value, and time , difficulty memorizing math facts, difficulty organizing numbers, and understanding how problems are organized on the page. Dyscalculics are often referred to as having poor "number sense". Nonverbal learning disabilities often manifest in motor clumsiness, poor visual-spatial skills, problematic social relationships, difficulty with mathematics, and poor organizational skills. These individuals often have specific strengths in the verbal domains, including early speech, large vocabulary, early reading and spelling skills, excellent rote memory and auditory retention, and eloquent self-expression. Difficulties that often co-occur with learning disabilities include difficulty with memory, social skills and executive functions such as organizational skills and time management. Spell checkers are one tool for managing learning disabilities. Learners work at their own level of mastery. Practice Gain fundamental skills before moving onto the next level Note: Emphasizes carefully planned lessons for small learning increments Scripted lesson plans Rapid-paced interaction between teacher and students Correcting mistakes immediately.