

Research paper on learning disabilities and current issues

[Health & Medicine](#), [Disability](#)



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Introduction

Learning disabilities could remain for life-long if not diagnosed and addressed. Moreover, it could have an influence on different parts of an individual's life. Some people have apparent overlapping learning disabilities, while others may have isolated or single learning problem i. e., the greater the number of disabilities, the larger its impact on lives (Perry, Marston, Eva, Hammond and Gaskell, 2010, 104). Thus, it is important to diagnose learning disabilities in children.

This paper initially defines learning disabilities. Moreover, the current issues in learning disabilities are highlighted i. e., the more appropriate measure to identify and treat learning disabilities. Finally conclusion is drawn.

Learning Disabilities

Learning disabilities or sometimes referred to as LDs are actual as they have an influence on the ability of brain to accept process, store the information, communicate and respond to the information obtained. Basically, LDs are multiple disorders and not an isolated disorder. Moreover, the learning disabilities are different from intellectual disabilities or mental retardation), autism spectrum disorder and sensory impairments (hearing or vision). Children or adults with LD are of above average or of average intellect but are required to struggle to obtain certain skills that have an influence on their performance at home, in school, in workplace and in community. The learning disabilities do not include all learning problems because most children have slow development of some specific skills. The children usually show natural difference that is due to their rate of development which could be due to delay in maturational.

Generally, the learning disabilities have an influence on the ability of an individual in the area of speaking, listening, writing, reading, reasoning, spelling and mathematics. There are different types of learning difficulties that are as follows (American Academy of Pediatrics, 2004, 1433):

- Dyslexia: people face difficulty in processing language
- Dysgraphia: people face difficulty in written expression
- Dyscalculia: people face difficulty in math skills
- Dyspraxia: people face difficulty in fine motor skills

Current issues on Learning Disabilities

Learning disabilities in children are usually identified by school psychologist, psychiatrists; counseling is psychologists, clinical psychologists and neuropsychologists via using a combination of academic achievement test, intelligence testing, aptitude and social interaction, and classroom performance. In addition to this, the learning disabilities are also identified using assessments of language abilities, attention, memory, cognition and perception. The results obtained help to determine the learning disability is due to her or his cognitive ability i. e., if the cognitive ability of a child is higher than her or his academic performance than it is said that the child has learning disability.

There are basically two current issues that are widely debated i. e., IQ-Achievement Discrepancy and Response to Intervention (RTI). Both of the two issues helps to identify the learning disability in children, however both the two are not considered to be an only reliable method.

IQ-Achievement Discrepancy

Despite of the fact that the discrepancy dominates in majority of the school system, but there is lot of criticism of this approach by most researchers.

Current research has given some evidence that the differences that lie between achievement and IQ that is measured reflects learning disabilities in a child (Warner, Dede, Garvan and Conway, 2002, 501). Moreover, effectiveness of the treatment of learning disabilities in a child could not be predicted on the basis of diagnosis of discrepancy (Wong and Butler, 2012, 98). The treatment benefits both i. e., low academic achievers that have any

sort of discrepancy and those that do not have any sort of discrepancies. Another issue with this model is that it does not follow consistent practices to identify learning disabilities. Similarly, in IQ-achievement discrepancy model, most students who are having academic achievement problems are not considered because of being slow learners or having low intellectual ability which could affect their long term academic progress (Restori, Katz and Lee, 2009, 132). Besides this, this approach has less scientific basis i. e., the decision on identifying a child with learning disability using one test score and at a particular time is not a reliable practice. Therefore, repeated number of assessments and use of more than one measure to identify learning disabilities is essential. Thus the issue of validity and reliability is most debated to diagnose learning disabilities.

Response to Intervention (RTI)

Another most important issue on which the researchers have main focus is response to intervention (RTI). In this mode, early screening is done for all students that place those children who face difficulty in early intervention programs that are research based instead of waiting to meet the learning difficulty diagnostic criteria. The performance of the students must be closely watched to find out the influence of the strong intervention that contribute to adequate progress. The students who respond well do not require any further intervention. However, the students who give poor response to the instructions given in classrooms (Tier 1 approach) and performance lag behind peers (" Tier 2" approach) are said to be " non-responders." Thus, such students are referred to be guided through special education where

most of the time they are recognized with learning disability. Besides the two approaches of RTI, the third approach identifies the eligibility of special educational needs i. e., a student having a learning disability (Kavale and Spaulding, 2008, 174).

The RTI must not be considered as a means of identifying learning disability as it is basically a screening procedure and does not consider the individual neuropsychological factors in children such as memory and phonological awareness that assists in designing instruction. Moreover, the designing of RTI or response to intervention takes significantly longer than recognized techniques, sometimes many days or months in finding an adequate intervention tier (Restori, Katz and Lee, 2009, 136). In addition, the RTI takes a well-processed intervention program to identify children with learning disability. Besides this, the response to intervention is acknowledged as routine education initiative that does not incorporate decisions by reading specialists, psychologists, or special educators. Thus, it is mostly debated issue whether the RTO is an adequate measure to identify learning disabilities.

Conclusion

Thus, from the above discussion on current issues of learning disabilities, it could be concluded that the need to use RTI or IQ-Achievement Discrepancy as a more adequate measuring tool needs to be answered. Comparing the two, RTI provides more improved measures as compared to IQ-Achievement Discrepancy model. This is because RTI model provides more benefit for effective treatment of children with learning disability. In addition it focuses

more on instructional environment and measuring student achievement that gives better outcome and is in benefit for both educators and children. However, more research is required that come up with more validate and reliable measure to identify learning disabilities in children.

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