

# Learning disability's



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1962 Kirk coined the term learning disability  
 1963 Kirk used the term at a Chicago meeting with concerned parents and educators, and the term took off

ON LEARNING DISABILITY' S SPECIFICALLY FOR YOU FOR ONLY \$13.  
 90/PAGE Order Now 3. 41%, 44-50% \_\_\_\_\_ of children (ages 6-21)

\_\_\_\_\_ of all children receiving special education have a learning disability in Ontario  
 4: 1 ratio of boys: girls diagnosed 60% spend 20-60% Most students are educated within the regular classroom

\_\_\_ spend most of the day in general classroom

\_\_\_ - \_\_\_ of the day in the general classroom Why the gender difference? Boys more likely to engage in overt behavior

Classrooms becoming more " girl friendly" over the past 30 years

Boys tend to have more difficulties with language, even in typically developing samples

middle-class Usually applied to children from \_\_\_\_\_ - \_\_\_ backgrounds

No discernible mental or physical anomalies

Still failing in school Academic difficulties (1) usually in the areas of reading or mathematical computations

in the student's performance

across domains of development Discrepancy between IQ and school achievement 2 (2) Potential versus performance

The \_\_\_ year lag rule (Can lead to learned helpness)

Assumed that the wider the gap, the more severe the disability Exclusion of other disabilities (3) What is left over after excluding:

visual or hearing impairment, motor disabilities, IDD, social or economic

disadvantage Interindividual differences Compared to peers

E. g. 2 grades behind in reading comprehension

This is an example of Intraindividual differences E. g. CA- 9 year old child

11 year old IQ

6 year old social dev.

Peaks and valleys

This is an example of: Neuropsychological disorder(4)—basic learning disabilities are the result of some type of neuropsychological disorder.

Average or above-average intelligence(5) Previously would have been classified as ID Social Deficits?

non-verbal

social skill(6) Some focus just on intellect and school achievement

Others include \_\_\_\_\_ and emotional challenges that impact learning

Social interactions are often difficult for children with learning disabilities,

particularly \_\_\_ - \_\_\_\_\_ learning disabilities, and that \_\_\_\_\_ deficits are

common Dyslexia Difficulties reading, spelling, and with reading

comprehension

Great difficulty mapping letters into sounds and vice-versa (impaired

phonological loop) Expressive Language Receptive difficult too, but not as bad

E. g. overextending words " juice" for everything from juice, to water, tea, milk, etc. semantics Vocabulary tend to be small and superficial

By 8-9 years of age, most children can cope with multiple meanings of high frequency words (e. g. Bat)

Bat (sports equipment versus Halloween decoration)

Lead poisoning can lead to health issues. Does the deer see the does? The dove dove down to its nest.

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Take things quite literally syntax Problems organizing phrases

Tend to ramble

Talk about things out of order pragmatics Difficulties with the social use of language

Turn taking non-verbal Many children struggle with \_\_\_ - \_\_\_ communication less accurate Study of grade 3 - 6 students

Task: Identify facial expressions of emotion

Students with learning disabilities are much \_\_\_ than typically developing peers Main Idea Real challenge since students are stuck trying to decode words that they can't get to the main point of the lesson or the paragraph, etc. miscues " And " versus " But "

Words read differently than how they are written.

spelling " Seemingly impossible task " Good readers 4 6-7 \_\_\_\_\_ Rhyme by \_ years of age

Can blend and segment orally presented words by \_\_\_ years of age phonological awareness Ability to blend, segment, rhyme, or manipulate sounds of spoken words

Strong relationship between early literacy and \_\_\_\_\_ 3 Problems are often identified in grade clean their room By middle elementary school, reading can be so aversive that many poor readers would rather \_\_\_\_\_ than read social deficits Roughly 50% of children with learning disabilities also have 35 15 \_\_\_ % neglected by peers \_\_\_ % rejected by peers

May stem from a mix of deficits in verbal and non-verbal communication, and social perception skills hope Upon hearing the diagnosis, parents often

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report feeling late  
In contrast to other disabilities, \_\_\_ diagnosis for the family  
3. 5 years  
Rarely detected before the child enters school

Gap of about \_\_\_\_\_ between suspected and diagnosis  
roller coaster of expectations  
Described as a \_\_\_\_\_ " Hopes for the future alternately raised and dashed as the child progresses or falls back"  
Advocate for the child

(Ensure the school system addresses their child's needs)

Support system at home (Safe and loving environment)  
Role of the Family: 1)

A learning disability

2) Expected lags as the student is learning as second language (esp. in early stages of acquisition of L2)  
Limited English proficiency can arise because of:

glitch  
According to IPM A learning disability can be explained as a \_\_\_\_\_ in this

system  
Sensory Intergration  
Ability to use two

or more senses

simultaneously

E. g. Note taking  
Thinking  
Meaning is born out of connecting remembered thoughts

Challenges organizing thoughts into useful concepts

Developmental Aphasia  
Used when child has a specific delay in

language  
Dysgraphia  
a learning disability that results in difficulty in

writing  
Self-regulatory skills  
Monitoring of reading to tell when something is confusing or when they are tuning out  
Emotional Context Memory

capacity  
Strong negative emotions have an impact on all aspects of our ability to process information

Anxiety can use up your \_\_\_\_\_  
Anticipatory anxiety  
Where a person

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experiences increased levels of anxiety by thinking about an event or situation in the future. Discrepancy Model large discrepancy exists between what students would be expected to do based on their cognitive ability and how they are actually performing in various school subjects Hard to measure discrepancy in young children

" Unexplained underachievement"

rather than a learning disability

" Wait-to-fail" model (2 year rule)

Problems with the Discrepancy Model RTI Model which model Permits early and pre-referral intensive interventions based on the student's needs without

" waiting to fail" Tier 1 High quality general learning environment

Includes developmentally appropriate screening

Periodic progress monitoring Collaborative problem solving (Tier 2) solving involves a multidisciplinary team working together with parents to design services that address the students needs.

Generally the general teacher in the general classroom

Teaching becomes more explicit and directive

Can be delivered through embedded activities within general lessons

Often also includes small group interventions Evidence-based

interventions (Tier 2) interventions meets the students' needs, also called standard protocol approaches. Progress monitoring ramps up (Tier 2) uses

data on student's achievement, performance, etc. to monitor progress, guide decision making, and plan for future needs (slope of improvement) Tier

3 Referral for formal assessment

Usually provided by Special Education Services

Within the general classroom or elsewhere

IEP created

Trillium Demonstration School Real life example of Tier 3