



Teachers' attitudes with learning disable students in a normal classroom at Primary Education Level

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ABSTRACT

Learning disability of students is one of the major problems faced by teachers in a normal classroom. Due to learning disability a child needs extra care and attention from the parents and teachers as well for getting proper learning. Present study aimed to investigate the role of teachers in handling learning disable students in a normal classroom at primary education level. The study was conducted on 80 primary school teachers of Abbottabad (Pakistan). It was found that although, in general, according to pedagogies, teachers should consider learning disabilities of students in class room; but teachers face problems in handling these students due to not having proper training in this context.

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Introduction

Every individual is different from the other one. None two persons will have similarities. The term used for such difference is called *individual differences*. Individual differences have different dimensions like cognitive, emotional etc. Due to these differences in a normal classroom, teachers have to deal with different types of students. According to new trends of education the teacher should deal every individual differently. There are also some students in a normal class who have learning disabilities of different types. A teacher should be vigilant enough to diagnose the learning disabilities of students.

Learning disability is a very important area in education (Robert, Dennis, 2005). Average intelligent students face difficulty in studies to progress due to specific deficits or disabilities. A learning disable child needs special care and attention for better progress. According to American Federal Law every child having disability is eligible to a free appropriate public education. It is not easy for parents to identify LD of their children in time so it is better to consult professionals for this purpose and whenever parents feel anything different in their child growth then parents must visit the doctor for proper advice.

"Historically policy and legislation changes have been influenced by the redefining of disability, particularly during the 1970' and 1980'. Three categories of definitions of disability have been used in education, namely functional limitations, medical and socio political. Functional limitations definition emphasizes the limitations or inability of the person to perform a particular activity or activities. Medical definition emphasizes the person's condition, involves an assessment of their medical condition and describes each disability in a separate category, e.g. cerebral palsy, spinal cord injury. Socio political definition emphasizes "the failure of the environment to adapt to persons with disability" (Bernell, 2003).

Fredrick 2011 mentioned that "Federal law states that a learning disability (LD) is a permanent neurological disorder that may be subtle to severe. It limits the brain's ability to store,

process and produce information and affects a person's ability to speak, listen, read, write or do math. A child with a learning disability has average to above average intelligence, but he or she falls below his or her academic potential to a significant degree. The current estimates indicate that children with learning disabilities make up 15 percent of the school-age population".

Tramontana 2008 is of the view that LDs come in many forms and their effects are different from person to person. They relate to:

- Getting information into the brain (Input)
- Making sense of this information (Organization)
- Storing and retrieving information (Memory)
- Getting information back out (Output)

Tim, Joann 2006 opines that child with a disability is taken to mean a child with mental retardation, hearing impairments (including deafness), speech or language impairments, visual impairments (including blindness), serious emotional disturbance, orthopedic impairments, etc.

Robert, Dennis 2005 assumed that, there are different signs of learning problems which help in understanding intensity of learning disability. Some of them are:

- a. Mismanagement e.g. sloppy homework or papers crumpled or out of place.
- b. Careless attitude e.g. misread instructions or mishear directions
- c. Forgetfulness - give excuses for not completing home tasks
- d. Irresponsible attitude towards home work
- e. Poor attention
- f. Different moods
- g. Untidy home work
- h. Problems in learning by heart
- i. Poor reasoning
- j. Delay in taking initial steps

Dyslexia is a form of LD in which children have language disorder. This language disorder affects reading, writing and spelling. It is very easy to recognize the LD of a child by a

person who is very close to child and both spend maximum time of a day together. If it is found that a child has LD then parents may formally request the school administration to test their child for diagnosing child's specific area of disability. (www.clevelandclinics accessed on 6th July 2013)

There are different types of learning disabilities. National Institute of Neurological Disorders and Stroke reports that Hyperactivity/ attention disorder is present in about 20 percent of children. Such children get frustrated, lose interest in school and do not accept challenges. They have social issues too. They may have low self esteem. If their learning disability is not diagnosed then they become angry and frustrated.

Tramontana 2008 says in developed countries it is included in the syllabus of teacher training program that how to deal learning disable students studying in a normal class room but not so in developing countries. It is good to treat learning disability educationally especially at early stages of education. A vast range of teaching strategies has emerged through which teachers can guide a child to overcome child's problem. Diagnostic assessment is one of the good ways to diagnose the problem of a student and provide remedial services to child. Tutorial classes can be used for this purpose. Sometimes schools advise to repeat a grade class which is not recommendable. Parents may consult psychological counselors if parents and teachers give an understanding and emotional support to such children that can give good feeling to students and they will feel ease. Such children should be given exposure of those areas in which they have interest and they may show their abilities. Such children have social problems. They do not like gatherings and have adjustment problems with classmates but if they are provided counseling services that will help to improve their social skills. It is very important to consider that there is no medical treatment of learning disabilities. Only those children who have coexisting disorder may get medication but physician should also follow academic progress of their patients along with medication.

As said earlier learning disabilities are permanent. According to Catherine Rauch 2011 it is hardly possible to recover learning disabilities. These are for the whole life. Students having learning disabilities accommodate themselves in any other way for not affecting their disability on their intelligence. People around the child can help him/her to compensate for the disability e.g. if a child has eye sight problem, teacher can ask the child to drill and practice of the context orally as much that they get perfection instead of emphasizing on writing. It is very important that parents should always encourage their children for positive activities. If parents do not support their learning disable child that may affect adversely. Parents' main goal should be their child's strength. If a child learns better by getting firsthand experience instead of rote memory then they should acknowledge their child. It is very necessary to boost their child's self-esteem by encouraging the child. Parents can plan activities of child's interest.

According to National Institute of Child Health & Human Development parents should remain in contact with child's school personnel, physician and school friends. They should make sure that he/she is receiving help for his/her learning disabilities. They should also keep on observing child's development to make sure adequate improvement in learning. Parents should also consult other specialist time by time for advice. They should also provide such an atmosphere at home that will encourage healthy learning. Even though children don't outgrow learning disabilities, they can learn to adapt and improve their weak skills. If learning disabilities are identified

and treated early, children with these disabilities are more likely to learn to overcome their difficulties while maintaining a positive self-image. They can also learn to develop their personal strengths and become very productive and successful adults. Frederick 2011 posits "it is very common that learning disabilities are ignored at initial stages". Teachers can not diagnose learning disabilities until student spend maximum time in school. Although there are some signs of learning disabilities that parents may diagnose at home e.g. developmental delay. There are number of causes of learning disabilities e.g. inherited LD, parental prenatal risk factors, poor medical care, etc. To avoid all this there should be regular check ups of a child for normal growth. Parents should keep notes to discuss with doctor about child's development. When child is admitted in school, parents should have meetings with child's teachers. It is recommended to schedule a meeting with child's teacher at the time of admission. Children start reading simple chapter of book, write simple sentences and subtract by the third year. They will not be perfect in these tasks but it does not matter. If any student is facing problems he/she may cover the deficiency by practice. There are some children who will have continuous difficulty even after practicing, it means they have learning disability.

Keep notes of your concerns to share with your child's teachers. Keep work samples, and go over these with the teacher. If you suspect your child has a disability, ask the teacher, principal, or counselor about assessment to determine if your child has a disability. They will help you through the process of assessment and program planning for your child.

The teachers always face disciplinary problems in class due to a learning disable student who always create discipline problems in classroom (Mujib, 2000). Teachers should always handle these students carefully. If LD is diagnosed at Primary level then it would be easy for teacher to handle it as compared to diagnose at secondary level. Teachers should give due consideration to LD students at the time of arranging the class. Proper classroom management is helpful to control disruptive behavior of students.

Attention deficit disorder is usually difficult to handle because unavoidable sounds such as turning the pages, shuffling feet and whispered conversations catch their attention and draw their minds away from school work. LD students cannot do work independently that's why teachers cannot leave them on their own. Hyperactive students should be seated at the place where there is minimum opportunity to move around. According to Alpher 1992 it is found that LD students in regular schools spend their time with normal adults in leisure activities that's why they become mature earlier.

According to Rehana 2009, in regular classes there are always some students with special needs e.g. having cognitive, emotional or physical problems. This is challenge for classroom teachers to diagnose these students and accommodate them in regular classes along with normal students. Normally teachers instruct and evaluate LD students in the same manner as normal students. Different assessment techniques are helpful in identifying the problems of such students. Airasian emphasizes that teacher's observation plays important role in identifying students' needs. Common problems e.g. in communication comprehension, attention and behavior are best identified by classroom teacher's observation. A teacher is responsible to adjust the students with special needs in the class. However, it should not be done on the expense of quality of learning of the whole class. There should not be any discrimination between normal students and LD students in regular classes. Teachers

should make accommodations for facilitating the learning of such students. For example, for the students with visual or hearing difficulties may be seated on front desks, the students having learning difficulties may be given extra time for completing work, students with attention deficiency may be allowed to work in a separate place where disturbance is minimum and so on. McMillan (2007) and Airasian (2001) evidence Students grades are an evidence of what they have learned. In case of students with special needs, it is necessary to make accommodations in grading procedure, so that their disabilities do not affect the grading decision. Following types of accommodations can be made for grading students with special needs:

1. IEP based grading
2. Shared grading,
3. Multiple grading,
4. Contract grading,
5. Level based grading etc.

According to Robert Kaplin (2005) at the time of valid test administration, examinees disabilities should be considered. Disabilities in hearing, vision, speech or motor control may seriously make the test results unreliable. In case the examinee is physically disabled but examiner is not aware of it then this physical disability may affect the test results. Another important ingredient of valid test administration is sensitivity to disabilities in the examinee. Impairments in hearing, vision, speech or motor control may seriously distort test results. If the examiner does not recognize the physical disability responsible for the poor performance, a subject may be branded as intellectually or emotionally impaired when, in fact, the essential problem is a sensory motor disability. Persons with disabilities may require specialized tests for valid assessment. Failure to notice a hearing loss is particularly a problem with young examinees, who are usually poor informants about their disabilities. Young children are also prone to fluctuating hearing losses due to the periodic accumulation of fluid in the middle ear during intervals of mild illness. A child with a fluctuating hearing loss may have normal hearing in the morning but perceive conversational speech as a whisper just a few hours later. Detecting visual impairment is a straightforward matter with adults. However children are poor informants about their visual capacities, so testers need to know the signs and symptoms of possible visual impairment in a young examinee. Common sense is a good starting point. Children who squint, blink excessively, or lose their place when reading may have a vision problem. Holding books or testing materials up-close is another suspicious sign. Blurred or double vision may signify visual problems as may have headaches or nausea after reading.

The review of related researches presented above shows Pakistani researchers have paid very little attention to study various aspects of learning disabilities and their impact on the development of students as a whole. Present study is a modest attempt in this direction. It aims to investigate role of teachers in tackling learning disable students, problems faced by these teachers and how much progress these students achieve while studying with normal classmates, so that, in future, some major steps can be taken to provide proper help to learning disable students and their teachers so that both of them may progress in their fields.

Objectives:

The study aims to fulfill following objectives:

1. To investigate the role of teachers in handling learning disable students in a normal regular classroom at Primary level.

2. To assess the level of progress of learning disable students in a normal regular classroom.

3. To assess problems faced by teachers in handling learning disable students in a normal regular classroom.

Hypotheses:

Teachers at Primary level do not normally consider learning disabilities of students in a normal classroom.

Methodology:

Keeping in view the objectives of the study the descriptive survey method was chosen by the investigator for this study.

Sample and Sampling Technique:

The sample consisted of 80 teachers of Primary level educational institutions of Abbottabad (Pakistan). The sample was selected on the basis of random sampling technique.

Tool:

In order to assess the teachers' attitude with learning disable students of primary level, a questionnaire was developed with close ended and some open ended questions. Pilot testing of the instrument was also done to check the validity and reliability of the instrument in one school teachers and that school was not then included in sample.

Data analysis and interpretation:

For the analysis of data in the present study "mean" have been used. Interrelated questions are grouped together so that 4 tables emerged.

Table 1

No.	Items	Yes	No
1	Presence of LD students in a normal classroom	51	29
2	Recognition of learning disable students in a normal classroom by teachers	70	10
3	Guidance provided by the teachers to LD students	70	10
4	Classroom environment for learning disable students	80	0

Entries in table 1 show that according to 51 teachers, there are LD students at Primary level in a normal classroom. 81% teachers after spending some time with these students can recognize the learning disability of the children in their classes, if any. These teachers provide sufficient guidance to LD students to cope with their learning problems. Classroom environment is always kept by considering the problem of LD students e.g. seating arrangement.

It can be inferred that it is very common to have LD students in normal classrooms. Teachers can recognize the LD students irrespective of the time how much they take in recognition but actually it depends on their active role in classes. After the recognition of LD students, mostly teachers try their best to guide LD students in handling with their disability so that it cannot affect their academic achievements. This is the reason that classroom setting is always done by considering these LD students e.g. students having eyesight problem sit at front seats.

Table 2

No.	ITEMS	YES	NO
1	Unawareness of parents about their child's learning disability	70	10
2	Complete history provided by parents to school administrators	43	37
3	Cooperation of parents with teachers for their child's learning disability	43	37
4	Teachers guidance to parents in the treatment of learning Disable children	80	0
5	Progress report of children to their parents	80	0

The perusal of data prescribed in Table 2 makes it apparent that according to 81% teachers, parents of their children at

primary level do not know exactly the learning disability of their children. Mean score is 50 % for the cooperation of parents with teachers for handling LD students and to provide history of LD students by parents to school administration. All the teachers guide the parents in the treatment of their children. Every teacher gives progress report of LD students to their parents time by time. According to 53% teachers, parents provide complete history to schools about the disability of their children.

The mean score of table 2 shows that parents do not give due importance to the learning disability of their children at Primary level. They are even unaware about this fact. It is found that most of the parents prefer to conceal the learning disability of their children that's why they do not provide complete information to the school administration about the learning disability of their children. Parents even do not give importance to the suggestions given by the teachers of their LD children of Primary level.

On the other hand teachers guide the parents in the treatment of their LD children. Teachers also refer the parents and their learning disable children to psychological counselor for mental satisfaction.

Table 3

No.	ITEMS	YES	NO
1	Course coverage is easy with these students	0	80
2	Extra assignment for attention deficit and hyperactive students	58	22
3	These students are isolated in classes from social cohesion	15	65

In table 3 it is found that it is not easy to cover the syllabus in a specified time period because learning disable students need extra time to understand the concepts as compared to normal students. Teachers give extra class work to hyperactive and attention deficit students to keep them busy in constructive activities. 81% teachers are of the opinion that these students are not isolated in class from normal students.

Table 4

No.	ITEMS	YES	NO
1	Need of separate classroom for learning disable students	20	60
2	Use of different testing techniques by teachers for diagnosing the problems of LD students	18	62
3	Use of alternative assessment techniques for such children	8	72
4	Need of teacher training in the aspect of LD students	70	10

In table 4, according to 75% teachers there is no need to have separate classrooms for learning disable students at primary level, if they are in a normal school. More than 50 % teachers do not use neither any testing techniques nor alternative assessment techniques to diagnose and assess the learning disable students at Primary level. They are assessed just as normal students. All teachers are agreed that they need special training in the area of tackling learning disable students in a normal classroom.

Conclusion and suggestions:

The concept of learning disable students in a normal classroom is very common. Teachers and parents both should be responsible for the treatment of LD students. At Primary level, it is difficult for children to recognize and understand their learning disability so first parents and then teachers are to help them out. So, it must be taken care of tactfully and guide them. Present study is an attempt to analyze the role of teachers in the achievement of LD students in a normal classroom setting. The study concludes that:-

1. Presence of learning disable student is not uncommon in a normal classroom at primary level. Teachers recognize the learning disability of students but with the passage of time and then help them out.
2. Sensory disable students are very common in normal classes and teachers face difficulty in handling them instead of hyperactive students.
3. At initial stages of children, aged 4-9, parents do not concentrate on the development and growth of their children that's why they are unaware about the learning disability of children.
4. It is found that level of parents' cooperation with teachers and administration varies. Some parents are so keen about their children so they fully cooperate while some ignore their children disabilities.
5. There is need to conduct pre-service and in-service teachers' training program so that they can handle these students more effectively.
6. It is very tough to cover the syllabus in time so that some of the teachers are of the opinion that learning disable students should be taught in separate classes.
7. It is found that as teachers are not trained in handling LD students so that they normally do not use any testing technique for diagnosing the learning problems of students.
8. Teachers give feed back to the parents of learning disable students so that they may remain aware about the progress of their children.

It is suggested that:

1. It is found that teachers try their best to handle LD students but due to not having proper training in this context they cannot show their best results.
2. Teachers should give a visit to schools of handicapped on and off. In this way teachers will understand how to handle learning disable students in normal regular classes.
3. Principals may arrange lectures of persons specialized in special education.
4. Teachers should be very kind to these children and be patient.
5. Teacher should arrange special activities for these students.
6. Teachers who have LD students in class, Principals may announce incentives for those, if they show good results of LD students.
7. Teacher training institutes should include some topics relating to LD students in the syllabus of trainee teachers so that if they would have LD students, they will not face any difficulty.
8. At the time of admission at primary level, there should be condition of complete medical checkup.

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