Exploring Awareness of Learning Disabilities Among Children

¹Dr. Abdul Malik Abbasi, ²Dr. Imtiaz Husain, ³Ms. Ahlam Khan

¹Sindh Madressatul Islam University, Karachi, <u>amabbasi@smiu.edu.pk</u> ²Sindh Madressatul Islam University, Karachi <u>imtiaz@smiu.edu.pk</u> ³Sindh Madressatul Islam University, Karachi <u>ahlamkhan055@gmail.com</u>

Abstract

The study aims to explore the awareness of parents-teachers regarding linguistic disabilities among children. It further hypothesizes that both parents and teachers have no awareness in terms of learning disabilities among children. These disorders refer to dyslexia, dysgraphia, dyscalculia, auditory, and the autism spectrum. Children with these disorders struggle in learning basic skills such as reading, writing, mathematics, spelling, and speech that cannot be dispensed with mental handicaps, sensory shortfalls, and emotional disturbances. These children are generally classified as slow, behind, incapable, and failures. Most importantly, autism spectrum disorder has become the order of the day among children. This is a developmental disorder caused by differences in children's brain patterning. Additionally, the study focuses on to what extent parents, teachers, and school heads are aware and how they can help minimize these issues. For this, a mixed-method design was utilized to investigate learning disabilities among children and how these can be overcome. The primary data were collected founded on focused interview groups with parents and teachers coupled with the responses constructed on a questionnaire with multiple choices containing 30 statements. The sampling size (N=22) was taken from different universities in Sindh that were highly educated-cum-experienced parents, doctors, professors, and schoolteachers. The findings of the study reveal that the teachers and parents had inadequate awareness of children's learning disabilities. It has been recommended that parents and teachers should be educated through different platforms for the diagnostic analysis of children with learning disabilities to offer their children a right to learn linguistic skills.

Keywords: learning, linguistic, disability, awareness, parents, teachers

Introduction

Learning disability is a very common phenomenon among children that can harm their mental growth. The factors which can cause learning disabilities may be heredity, illness during birth and after birth, and stress during infancy. Accidents after birth including head injuries, malnutrition, toxic exposure, weakening illness, and injury in early childhood affecting brain development, such as road accidents, child abuse, very premature birth, and certain genes transmitted from parents, can affect the developmental stage of the brain.

The learning disability types are as follows: Dyslexia, a particular disorder that affects reading and language-based processing skills. Dysgraphia is a particular disorder involving handwriting and fine motor skills. Dyscalculia is a specific disorder affecting the ability to understand numbers and learn mathematical facts. Auditory processing order affects about 5% of school-age children. What they say, as most children do, cannot be processed. This is because they cannot completely align their ear and mind. Language processing order makes it difficult in understanding and makes sense of the words they hear. Non-verbal learning disability makes it hard to understand the words they hear and to make sense of them. In visual/perceptual motor

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deficit, the question is how the brain makes sense of what it sees. So far it has not been proven. Some researchers have discovered that it can occur because of extreme head injury, or some researchers have discovered that it can occur because of being premature.

Every child has a right to receive help in learning according to their capacity. Every nation and society must provide equal educational rights to every child, whether they are normal or abnormal children. Children having difficulty in learning are not special; they are normal but slow learners due to some learning issues; they are not quick learners. Two aspects are committed to equality of opportunity: fair access to school education and equal success in school. Children have great difficulty in learning especially in areas of different subjects. It is very important to understand that this type of disability can be very detrimental to a child's life and can affect him/her along with family, friends, and the educational system. It happens when the information is not processed properly, making it very difficult for a child to learn. The parents or the teachers know how to teach children who are going through this problem when the child with learning problems is sometimes surprised because his/her parents were also going through the same situation. These children have difficulties in only some areas of learning, though they have other different skills in other areas of their interests. This happens when the child's talent is not focused whereas only the disorderly situation of the child is focused.

It happens to children who have difficulty in learning since their teachers and parents do not understand how to figure out the specific area of difficulty and how to deal with that area. As a result, these children do not get the attention they deserve, then they become more prone to learning disability problems and are unable to move forward and succeed in reaching their destination. Lack of awareness among parents happens to be the number one problem. There is a great need to pay attention to identifying this area of learning disabilities by discussing with the parents and teachers and researchers concerned to solve the problem of children. It is important to investigate the confounding factors that affect children learning abilities causing disabilities to rise. According to one study, about 1.8 million Pakistanis have learning disabilities, of which 0.5 million lived in urban and 1.3 million in rural areas. People in rural areas have strong superstitious beliefs about the causes of learning disabilities and there are no learning facilities in rural areas whereas in urban areas there is a need to disseminate awareness among parents and teachers.

Objectives

The objectives of the study are as follows:

- To make parents and teachers aware of themselves first in the field of learning disabilities to save their children's future.
- To minimize the effects of disability, consider such remedial techniques that can be used • by teachers to build and save the children's future.

Purpose

The purpose of this paper is to create awareness among parents and teachers in Pakistan and to help them out for a better future.

Literature Review

This section will overview the prior work on learning disabilities. Key topics in the literature review and state procedure for identifying and assisting ESL learners and learners in general who face problems of learning disabilities. Furthermore, it also outlines the latest recommendations and procedures adopted by the 20 States with the highest population of English

learners. The study provides information to school officials who are establishing procedures to decide which children with learning disabilities can be included in special education classes rather than receiving other types of assistance.

Pre-school Biomarker for Literacy

Auditory Processing of Noise, this research indicates that neural processing of consonants in noisy environments is essential for language learning. Children who have difficulty listening in loud environments can fail to understand the language they hear daily, putting them at risk for literacy issues. Evaluating the neural coding of speech in noise may provide an objective neurophysiological marker for these at-risk kids, allowing for early and tailored strategies that could help them escape a life of failing with literacy.

Teaching children with intellectual disabilities in the twenty-first century with Assistive Technology, the paper briefs the importance, advantages, and intent of assisting children with intellectual disabilities with assistive technology. The paper further addresses the different forms of assistive technology systems that have been designed and used to support children with intellectual difficulties with written language, reading, hearing, memory, and mathematical problems. The difficulties in implementing assistive technology in developing countries were discussed.

Aladwani and Shaye (2013) researched the awareness of Kuwaiti primary school teachers' early symptoms of dyslexia and their lack of understanding of the problems involved with dyslexia children suffering. They concluded that Kuwaiti teachers were aware of this issue, but there was a lack of time, and being overwhelmed with day-to-day school schedules and responsibilities, discourage them from doing so (Aladwani & Shaye, 2013).

Malua (2010) measured the teacher's understanding and action for students with learning disabilities in comprehensive schooling in the Makarda Division. Analysis of the result was that teachers were aware of progressive schooling in their schools. Some various measures ensure comprehensive education, e.g., corrective methods, straightforward guidance, structured phonics, and the use of communication. The individual learning needs of the pupils and the teachers who are professionally trained to deal with students with learning disabilities in inclusive education (Malusa & Kamau-Kan'ethe, 2010).

Sharma and Samuel (2010) examined the knowledge that teachers have about studying disabilities, and the rules of the government and the CBSE Board. This was a cross-section study with a survey of 100 teachers from private English middle schools in Ludhiana, Punjab. They reported that while teachers appeared to know about Lucknow, but had only a slight idea of it, only a few teachers were aware of the government's provisions. Many of the teachers criticized the student's behavior and home atmosphere for the bad results of their tests (Sharma & Samuel , 2010).

Al-Khatib (2007) studied the awareness of learning disorders among Jordanian standard education teachers and whether this knowledge varied because of various variables. The survey included 405 daily classroom teachers who taught students in grades 1 through 6 in 30 schools spanning three Jordanian districts. Teachers took a 40-item test developed by the researcher that had positive psychometric properties. Teachers have a modest degree of understanding of intellectual disorders, according to the findings. Female teachers were found to be marginally more experienced than male teachers in four out of five cases. Teachers' awareness levels were irrelevant to their age, teaching experience, or academic credentials (Al Khatib, 2007).

Pitonyak (2005) states 'difficult habits are messages that can teach us important things about a person and the quality of his or her life' (Pitonyak, 2005). Though, recent several incidents (Cooper, 2012) have shown, facility reactions to demanding behavior often include seclusion, treatment, and locked doors. According to current studies, successful help necessitate a strongly individualized approach from multidisciplinary clinicians, administrators, and commissioners who are dedicated to spending time carefully listening to the concerns of people and their communities, well-informed in planning and providing effective local support, and capable of identifying and addressing bad practice as soon as it happens.

Research on supporting people with *Autistic Spectrum Disorders* (ASDs) and *Challenging Behavior*, according to research, a significant number of children with autism who have serious speech impairments use challenging actions as a means of verbal expression in their classrooms (Chiang, 2008). Children with intellectual disabilities and ASDs may benefit from early intervention to reduce the creation of severely demanding actions (Emerson, 1996).

In reviewing the literature on learning disability intervention studies, (Tunmer, Chapman, Greaney, & Prochnow, 2002) brought up a conceptual topic that has far-reaching implications "The inability to separate the issue of how children learn from the question of how children should be taught has hampered previous research on learning and learning difficulties." The first issue focuses on student characteristics, while the second is more concerned with intervention characteristics.

In the Challenge of Rich Vocabulary Instruction for Children with Developmental Language Disorder (DLD), the reactions of children with developmental language disorder (DLD) to rich vocabulary instruction were studied for this case study. Children with DLD took part in a language intervention that was mixed into a science camp. Rich vocabulary training benefits some children with DLD, but the gains are modest. The researchers recommend that more experiments be conducted with vocabulary approaches that are more specifically tailored to individual needs, and that more studies are performed with vocabulary interventions that are more precisely tailored to individual needs.

How myths around Learning Disabilities deprive many people of their ability to succeed and contribute to school and at work. Many individuals with learning disorders are deprived of things and participate in education and at work because of myths regarding learning disabilities. According to this paper, all children, including those with developmental disabilities, should have the skills and services they need to live better lives with the right intervention and support. As a result, even more people with developmental disabilities will be able to develop the adaptive capabilities required to seamlessly incorporate the use of assistive technologies and other services into their work. It compiles the most statistics, facts, and data on people with learning disabilities in the United States. Understanding learning and attention issues; addressing troubled students; promoting academic success; mental, cognitive, and behavioral challenges; adapting to life after high school; and proposed policy, and forms are the six main areas covered in the study. In areas including integration in general education classes, administrative events, and dropout rates for children with academic and focus problems, the study provides state snapshots that identify important data points and references to national averages.

Dysfunction of Rapid Neural Adaptation in Dyslexia, according to the report, individuals with the reading disorder dyslexia can have a wide variety of brain abnormalities. Using advanced brain imaging, scientists discovered that adults and children with dyslexia have a lower capacity

to respond to sensory input than individuals without the condition. And the distinctions were not limited to the brain's reaction to written words, as one would imagine. Dyslexics were even less adaptable in their reactions to images of faces and objects. According to research lead author Tyler Perrachione, they have *deficits* that are more common, affecting the whole brain. The results point to the underlying causes of dyslexia.

Theories of Dyslexia

The following hypotheses should not be considered rivals, but rather attempts to understand the root causes of a common collection of symptoms from various scientific viewpoints and backgrounds.

Cerebellar Theory

Ramus, et al. (2003) state that, another view is represented by the automaticity/cerebellar theory of dyslexia. Here the biological claim is that the cerebellum of people with dyslexia is mildly dysfunctional and that a few cognitive severities ensue. For starters, the cerebellum is involved in muscle coordination and, as a result, speech articulation. Deficient phonological representations are thought to result from delayed or dysfunctional articulation. Second, the cerebellum assists in the automation of previously mastered activities such as walking, typing, and reading. The learning of grapheme-phoneme correspondences, for example, would be hampered by a limited ability to automate. The cerebellar hypothesis is supported by evidence of dyslexics' low success in a variety of motor activities; dual tasks showing reduced equilibrium automatize, and time prediction, a non-motor cerebellar task. Anatomical, metabolic, and activation variations in the cerebellum in dyslexics have also been found (Ramus, et al., 2003).

Evolutionary hypothesis

Reading, according to this hypothesis, is an abnormal behavior performed behavior for a very short time in our evolutionary past (Dalby, 1986). Most western communities have only encouraged mass reading for less than a century, and as a result, the forces that form their behavior with no evidence that dyslexia is caused by pathology, but there is plenty of evidence for cerebral variation or variations. The artificial role of reading brings these important disparities to the test (Dalby, 1986).

Magnocellular Theory

There is a unifying hypothesis that tries to incorporate all the above-mentioned observations. The magnocellular hypothesis, which is a generalization of the visual theory, states that magnocellular dysfunction is not limited to visual pathways but affects all modalities (visual, auditory, and tactile) (Ramus, et al., 2003).

Phonological Deficit Theory

People with dyslexia, according to the phonological deficit hypothesis, have a particular deficiency in the representation, handling, and/or retrieval of speech sounds. It illustrates dyslexics' reading difficulties by stating that learning to read an alphabetic system necessitates learning the grapheme/phoneme correspondence, (Ramus, et al., 2003) described it as the correspondence between letters and constituent sounds of the voice.

Rapid the Auditory Processing Theory

The rapid auditory processing hypothesis is a counterargument to the phonological deficiency theory, which notes that the main difficulty is hearing short or quickly shifting sounds. Evidence that people with dyslexia perform poorly on a variety of auditory functions, including pitch discrimination and temporal order judgment (Ramus, et al., 2003), confirms this hypothesis.

Mathematical Learning Disabilities

The advances of modern technologies also experienced a relative increase in the use of digital handheld devices during and after the Covid-19 pandemic. Smart gadgets were used for learning purposes in terms of online education. Whereas mobiles emit radiofrequency electromagnet radiation, and the blue rays of the digital screens are the blue region in the visible light spectrum with high levels of short wavelength hurting brains as well as neurons activities as the first instance and later causing disability in learning and understanding of mathematical logic. An experiment was conducted on rats to observe the several neurological consequences that have been reported and behavioral and learning as well as memory loss in rats were reported (Aslan, 2017); (Hasan, Jahan, Islam, & Islam, 2022).

Mathematical understanding is based on the logic of brain cells as connected neurons for good performance of mathematical calculation. Whereas failure may cause a mathematical learning disability (MLD). (Soares, 2015) reported 11% of children with attention deficit hyperactivity disorder (ADHD). Another study showed dyslexia and dysgraphia are expected in up to 45 % of children with ADHD (DuPaul & Gormley, 2013). Most of the students and adults having dyscalculia face problems in solving mathematical puzzles and feel frustrated and bored. Furthermore, such individuals' brains need more teaching and learning experiences and more practice to develop their neural networks. (Morsany, van Bers, McCrmack, & McGourty, 2018) (Soares, 2015) (DuPaul & Gormley, 2013) noted that the children having dyscalculia also face dyslexia, a learning disability in reading among half of the studied children and the estimated prevalence of dyscalculia in the school population is around 3 to 6%.

Research Query & Hypothesis

R: How can parents and teachers help their children overcome their disabilities in learning?

H: Parents and Teachers have no awareness of their children's learning disabilities.

Methodology

A mixed-method design was utilized to investigate the problems of children with learning disabilities and to make teachers and parents aware of children with learning disabilities. The primary data were based on focused interviews with (N=22) parents-teachers along with a questionnaire based on 30 statements filled out by the selected parents, doctors, professors, and teachers. Whereas secondary data were collected from different websites and different research papers

Research Design

A questionnaire was developed consisting of 30 statements about learning disabilities in children filled out by the selected parents, doctors, professors, and teachers. The questionnaire contains multiple choice options- *Yes-No-Maybe*, *Agree-Disagree-Neutral*, *True-False-Don't know*.

Convenience Sampling

The sampling size was a total of (N=22) from different universities from Karachi, Sindh whose ages varied from 21 to 51, three respondents from the University of Karachi, eight respondents from educated parents, three respondents from Nasra School and Beacon House, Karachi, one respondent from IBA Karachi, one respondent from ILMA University Karachi, one from Sindh University, one from PAK KIET University, one from Biztek University, one from DOW University, one from Government officer, one from Hamdard University. Out of 22, (n=12) participants were female, and (n=10) participants were male.

Data Analysis and Results

The data were collected, and the results were put in an Excel sheet for interpretation of the results. The *Pie Charts* were developed given the responses of participating stakeholders. Figure 1 illustrates the statistical results. Figure 1 illustrates that 'learning disability, is a disorder found in children of normal intelligence who have difficulties in learning specific skills.



Figure 1 shows that 96% agree that children suffer from learning disorders in specific areas of learning. These processing issues can interfere with learning basic skills such as reading, writing, mathematics, speech, spelling, etc. It also interferes with high-level abilities such as coordination, abstract timing, long-or-short term memory, timely preparation, etc. **Figure 2** illustrates that 'it is also due to genetic and neurobiological causes that alter brain functioning in a manner which affects one or more cognitive processes related to learning'.

Figure 2. Statistical results



Figure 2 shows that 86% responded 'Yes' that it also happens due to genetic and neurobiological causes. Sometimes children have learning disabilities because they find that one of their parents also had this type of problem in childhood. Neurobiological problems sometimes

occur because of a severe accident in childhood or premature birth. It also occurs when a child is a victim of abuse at a very little age. While 9% responded 'Maybe'. **Figure 3** illustrates the result of the statement: 'Disability awareness programs at schools, have led young children to gain empathy and have positive attitudes.'



Figure 3. Statistical results

Figure 3 data revealed that 91% responded 'Yes'. This shows that 91% of people think that there must be institutional arrangements made for children with learning disabilities. There are large numbers of children who have learning disabilities, but there are no specific institutions for them. The National Centre for Learning Disabilities recommends that schools use multi-tiered systems of support (MTSS) to identify and support students who may have a learning disability. While 9% responded 'Maybe'. **Figure 4** illustrates the result for the statement: 'creating reachable goals for students suffering from learning disability includes main guidelines like Identifying the need, setting realistic objectives, and Monitoring progress regularly'.

Figure 4. Statistical results



Figure 4 illustrates that 82 agree that there should be several reachable goals set up for children having learning disabilities. First, the needs should be identified to provide an environment that ensures rapid development for students who require it is important. Without a

way to bring about accelerated growth, students can be vulnerable. Goals should be written to explain what parent-teachers expect the child to achieve and calculated by daily evaluations. Students with learning disabilities require enough time to improve their skills. Monitoring success and changing resources are essential to achieving progress. For children with intellectual disabilities, tracking of progress should be advised every week. Progress monitoring must be performed regularly enough to encourage educators to analyze student data and change the guidance, if appropriate. **Figure 5** illustrates the result of the statement: 'Learning disabilities have no cure, but early intervention can lessen their effects.'





Figure 5 shows that 77% responded affirmatively that teachers-parents must take some actions and preventive measures to overcome the problems of the children. All children need love, encouragement, support, and attention. A child with learning disabilities can develop ways to cope with their disabilities. Having guidance earlier increases the chance of achievement at school and later in life. While 9% contradicted the statement and 14% did not have an opinion on this statement. **Figure 6** illustrates the result for the question 'Is learning disability also connected to processing deficit?' as follows:





Figure 6 revealed the data that 82% responded 'Yes' to the question. This shows that 82 percent consider that processing deficit is connected to learning disabilities. When students have a cognitive deficit, it is difficult to make sense of sensory data. This makes it possible for a pupil to succeed in a typical classroom without any preparation guidance. These deficiencies are most

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commonly auditory or visual, which can make it difficult for students to identify and recall essential details required to succeed. While 9% responded 'No' and 9% responded 'Maybe'. **Figure 7** illustrates that 'ADHD is a disorder that includes difficulty staying focused and paying attention, controlling behavior, and hyperactivity'.



Figure 7. Statistical results

Figure 7 shows that 86% responded 'Yes' to this statement. ADHD stands for attention deficit hyperactivity disorder. It is a disorder that occurs apparently in some nursery and early school children. It is difficult for these children to monitor or pay attention to their actions. It is estimated that between 3 and 5 percent of children have attention deficit hyperactivity disorder (ADHD) or around 2 million children in the United States. This means that in a classroom of 24 to 30 children, at least one of them may have ADHD. While 14% responded 'Maybe'. **Figure 8** illustrates that 'Planning, organization, strategizing, attention to details and managing time and space are also called Executive functioning'.





Figure 9 shows the result for the statement that 77% responded 'Yes' for executive functioning in learning disabilities. They think those children who suffer from executive functioning may have trouble remembering what they hear or what they read, have trouble completing tasks, have trouble managing their time, and have trouble organizing their thought. Executive function is a mental skill that includes working memory, flexible thinking, and self-control. Generally, people use these functions in their daily routines to learn and work. Planning, organization, strategizing, attention, and managing time, and space all are included in executive

functioning. **Figure 9** illustrates that a 'Good attitude would not solve the problems associated with learning disability, but it can give child hope and confidence that things can improve and that they will eventually succeed'.



Figure 9. Statistical results

Figure 10 statement unveils that 86% responded 'Yes' that this problem is not solved by a good attitude, but it can help children with difficulties. Experts can help the children develop lessons by focusing on the children's strengths and discovering ways to compensate for their failures of them. While 10% responded 'Maybe' that they don't know if this is helpful for the children or not.

Discussion

Use of Technologies in Minimizing Learning Disabilities

This section overviews how technology helps students with learning disabilities succeed in school. Assistive technology is defined as an umbrella term that refers to any service-based product or technology that helps people with disabilities of varying ages to engage in activities in their everyday lives, school, job, or leisure time. Students with learning disabilities are not dumb or lazy. They are typically intellectual and on par with or above average. A learning disorder is a term used to describe a particular type of learning problem, such as students who have difficulties in writing, reading, hearing, and speaking. Kids with learning disabilities may be diagnosed at the primary school level. This is possible because students in primary school face these problems and teachers can recognize children with prominent linguistic/learning disorders at school whereas parents at home.

In addition, assistive devices can support students with disabilities in performing and meeting their goals. There is a plethora of technological options. Abbreviation expanders, for example, are software programs that allow a user to build, store, and reuse abbreviations for commonly used terms or phrases. Audio Books & Publications-Audio books are the books that have been registered therefore these can be listened to. Electronic Mathematical Worksheets are programming applications that can aid students with arranging and solving Mathematical problems. There is a range of technologies that support students in meeting their goals. Students with reading disabilities, for example, can have a technology that can translate textbooks by a device that can scan and read them, such as optical character recognition, and students with

impaired vision can use expanded text. There is an alternate keyboard, which has unique overlays that customize the look and purpose of a regular keyboard.

Students struggling with mathematics may benefit from an automated mathematical worksheet, which allows them to measure and solve mathematical problems. Students who struggle with writing can benefit from a speech recognition software application, which allows them to dictate a phrase through a microphone and make it appear on the computer screen as a letter. To summarize, there are many technological tools available today that can assist students in achieving academic achievement in terms of minimizing their learning disorders.

Data Interpretation and Output

This section attempts to cope with dyslexia affecting students while learning. In general, seven types of problems that dyslexic students face have been found based on the responses collected and authors' teaching observations at various educational institutes in terms of general aspects of dyslexic students.

SN	Reading Disabilities		
1	Incredibly slow reading speed		
2	Word blurring and distortion		
3	Photographic, catastrophic, interference, and controllable are examples of		
4	multisyllabic terms misread.		
4	Leaving out words like at, where, where, who, when, what, below, and against.		
5	Understanding complicated sentences		
6	Reading small print with a font size of 12 or 13.		
7	Reviewing photocopies of low quality.		
8	Uses white paper as a reading board.		
9	Mathematical symbol ambiguity		
Spelling Difficulties			
1	Importance: impotence, brown-drowning, cursing-cruising, and cake-baking.		
2	Liturgy, leathery, liturgy, and liturgy		
3	Doing a lot of erasures/cross-outs, makes writing seem sloppy.		
4	Misplacing letters or phrases and/or omitting them.		
Notetaking Difficulties			
1	Reading skill		
2	Taking notes while learning		
3	Writing legible notes		
4	Writing quickly enough to copy from the board		
Wri	Writing Difficulties		
6	Writing simply reflects thoughts		
7	Childish writing		
8	Weak sentence Structure		
9	Insufficient or absent punctuation		
10	Combining sounds with multisyllabic words		
11	Letter and/or number reverse		
Spea	Speaking Difficulties		

Table 1. Difficulties with Reading

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1	Oral inability to articulate thoughts accurately		
2	Quick and often cluttered speech		
3	Failure to talk clearly during interviews or oral tests		
4	Failure to speak about a given topic within a time frame during the interview		
5	Omitting terms (believed to have been said)		
6	Omitting terms (believed to have been said)		
7	Phrases that are repeated (believed not to have been said)		
8	Pronunciation difficulties of multisyllabic terms		
9	While listening, choosing the right word		
10	Substituting words		
Listening Difficulties			
1	In a loud environment		
2	Where the instructor uses foreign terms without providing visual support.		
3	Misunderstanding instructions.		
4	Eliminating critical details.		
Mat	Mathematical Difficulties		
1	Mathematics reading		
2	Arithmetic processing		
3	Mathematics understanding		
4	Scenario-based Language Processing		
5	Visual-Spatial Confusion		
6	Keeping procedures in proper order		
7	Basic mathematical perception		
8	Object Comparison		
9	Estimations		
10	Logical disability		
11	Magnitude (bigger, small; more, less)		
12	Pattern recognition		
13	Matching objects		
14	Symbolic intuition		
15	Pace from informal to formal mathematics		
16	Hierarchical connectivity in arithmetic		
Org	anization Skills Difficulties		
1	Forgetting duties and/or meetings		
2	Leaving books at home		
3	Missing documents		
4	Underestimating the amount of time taken to accomplish activities		
5	Being lost in an unknown building (or, sometimes, a familiar building)		
6	Contradictory left-right, west-east, and up-and-down.		
Deal	ng with Dyscalculia in the Class		

Dealing with Dyscalculia in the Class

To improve mathematics skills among the students, first, we need to identify their strengths and then acknowledge them by reconfiguring what is difficult. Most of the learners never had the connection between mathematics and meaning, so, it is helpful to encourage them to estimate their

answers before they begin to solve. Children may perform well in a group rather than in assigning tasks individually. Therefore, it is recommended to assign the task to a group. Whereas the use of graph paper may improve the understanding of the numbers. Clear instruction and selection of medium of instruction may also reduce the gap in the understanding of the subject. Furthermore, the use of metaphors during the explanation may also help them to make connectivity with the subject. MLDs often occur in combinations of difficulties like language processing problems, visual-spatial confusion, memory, and sequence difficulties as well as unusually high anxiety among younger children. An instructor may intervene to advocate such problems during class with manipulation, time for exploration, and discussion. The use of advanced teaching ads may also reduce the MLDs and improve the clear understanding of mathematics subjects.

Dealing with Dyslexia in the Class

Students with dyslexia must develop alternate learning methods. By the time a student enters university, he or she would have established tactics, most often without realizing it. Planning, writing essays, taking notes, and accurately reading the amount of knowledge needed, on the other hand, can be challenging and time-consuming. Exams and continuous revision can also be intimidating and exhausting.

Depending on the settings where the dyslexic individual is, several options for exclusive care of dyslexic pupils in the classroom may be proposed. In conjunction with the problems mentioned in the preceding section and in terms of university courses, here are some outlines to deal with. These solutions are split into two categories. The first seven solutions are discussed in the preceding section, whereas the second seven are more general as follows:

Table 2. Instructions for the Dyslexic Students		
Instructions for the Dyslexic Students		
Dyslexic students should be allowed to pre-read and take notes, and handouts should be		
circulated ahead of time.		
Notes and handouts should be written in big print on colored paper with a simple script.		
As far as possible, color headings and bullet points can be included.		
Paint may also be used to illustrate essential details.		
The importance of short and regular analysis sessions should be stressed.		
The instructor does not hurry an answer; he must allow them time to understand and choose		
the relevant phrase.		
The instructor should try to locate appropriate compliment points.		
Solutions		
Dyslexic pupils can be given more time in tests. The amount of additional time given (5,		
10, 15, or 20 minutes per hour) will be calculated by testing at Dyslexia Centers before		
they are formed in the university, which will be dependent on the effect of their dyslexia		
on their speed and accuracy in both reading and writing.		
Any dyslexic students may be allowed to take exams using a portable (laptop) computer.		
Students with extreme dyslexia can be provided with an amanuensis (a person who helps		
them copy what they say) or a reader for their tests.		
A university's faculty personnel may also choose to isolate dyslexic students by placing		
them in a separate class, but this practice may be complicated, particularly in the early		

Table 2. Instructions for the Dyslexic Students

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	stages, since it takes time to better diagnose dyslexic students. Any people cannot be
	diagnosed until later in their studies.
5	Following an assessment, all changes for psychiatric, functional, or viva voce tests can be
	made on an individual basis, in coordination with the Dyslexia Supervisor, course
	coordinators, and the Examinations Section.
6	There is no explanation that a dyslexic student should be taught separate lexical objects or
	grammatical constructs from the rest of the class. The only changes the teacher must make
	are to the instructional approach, not the material. The most important rule for teachers to
	remember is that steady improvement is the secret to effective instruction.
7	Every university in PAKISTAN should have at least a small center for coping with
	dyslexic students. Since experts from both disciplines would cooperate in the center, it is
	best that it is housed at the Department of Psychology and Education and managed in
	collaboration with the Department of English Language.

Summary

Linguistics/learning disabilities can include a variety of several different problems, behaviors, and difficulties. The essence of learning disorders means that the ability of a child to make safe choices about themselves or others is more likely to be affected. In support of their decision-making/capability assessment, great caution should be taken to listen and interacting with a person with a learning disability. Extra time and extra tips should be designed: Reliable decision-making capacity cannot be reached after a single conversation. When children with learning disabilities practice their preferences in certain areas, they can conflict with the biases and anxieties of others. It is also important to work with the individual and their parents and practitioners to ensure that their 'best interests can be genuinely decided and delivered.

The way parents behave and respond to challenges has a huge influence on children. Only a positive mindset cannot fix the issues associated with learning difficulties, however, it can give a child motivation and trust that things will change and that they will ultimately flourish. Parents and teachers must understand the problem and the behavior of children who have learning disabilities. Parents and teachers should focus on their strengths, not only just on their weaknesses. Learning disability represents one area of vulnerability, but there are also other areas of strength.

Learning disability awareness in schools is incredibly relevant and educates children to become better citizens. Researchers also found that school autism recognition services have helped young children to develop sympathy and constructive attitudes. This attitude grows in an individual, making them better citizens as they mature.

Conclusion

To conclude a very significant study that develops the idea that people realize the importance of children who have linguistic/learning disabilities and understand their behavior. For children with learning disabilities, such constructive motivation help ensure that they emerge with a good sense of self-worth, confidence, trust, and the determination to keep working even though things around them are challenging. All children need love, affirmation, and guidance. Parents and teachers should look for opportunities to support children with learning disabilities by asking for ways to help themselves. As a parent, (Shefketi, 2020) the job of a parent is not to cure it, but to support a child with the social and emotional instruments by which they need to work through difficulties. In the long term, facing a challenge such as a learning disability it will make your child

grow stronger and more resilient. This awareness will be helpful for teachers and parents to understand the behavior of children with learning disorders.

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