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Learning to Achieve

A PROFESSIONAL'S GUIDE TO EDUCATING ADULTS WITH LEARNING DISABILITIES

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For more information go to: <http://lincs.ed.gov/publications/pdf/L2AProfessionalGuide2010.pdf>

Part I

Introduction

There are two things you must understand that are extremely important when working with people with learning disabilities: patience and care. People with learning disabilities tend to get frustrated very easily, and a lot of times do not have high self-esteem. The teacher needs to make them feel that they are equal to everyone else. Often, this means more hands-on-learning with the individual. The teacher must take the time to find out what the individual's strengths and weaknesses are, and how long one's attention span is. The sooner an educator figures out what a student's capabilities are, they can teach them to be better learners.

People with learning disabilities normally have a minimum vocabulary, so teachers must be sure to ask the student if they comprehend what has been said. While a word may seem common to the average person, it is not the case for everyone. Simple misunderstanding of the meaning of a word, or not even knowing it at all, can be the difference between understanding an assignment and completely failing. This is why I say that hands-on-learning is so important. Good communication with students is key to making sure they fully understand. Educators should be very specific when teaching and very clear. The more specific you are, the more likely it is that an assignment or topic will be understood. If you (the teacher) are reading something to a student, you may want to ask the student if they want you to read it again. Every time you come across a big word that you think the student may not know, you may want to ask the student if they know what that word means. A student may not be bold enough to admit they don't understand, but they will accept the additional explanation if given the opportunity.

I have always been relatively interested in history. I remember that I had a hard time at school comprehending all of the information about a place and time. While I enjoyed learning in school about history, it wasn't until I actually visited a country that it sunk in. I have been fortunate enough to travel a bit, and my parents made sure that our trips included sightseeing and tours of historic sites. While not everyone is able to travel, visuals can also be a good tool in helping people to understand what's being taught.

Taking notes always may seem like a lot of work, but whenever you are using a chalk board to explain the student what you are talking about, tell them to take notes. The catch here is to remember that people process information at different speeds. When they are taking notes, always make sure that the student is caught up with your writings and teachings. People with learning disabilities may need more time to take notes. Again, be patient. I remember when I was in boarding school, particularly in my biology class, the teacher moved so fast that sometimes I wouldn't even get a chance to finish what he wrote on the board. He would also ask me a question while I was in the middle of taking notes, and I would have no idea what he

was talking about. I felt terrible because I didn't know the answer and couldn't keep up. If the teacher had simply slowed down and made sure I had the information before moving onto another topic, I would have been much better off. I realize now that it wasn't my fault, it was his. If he had been given the proper tools to teach me, we both would have been more successful in that class.⁴

The Formula

A student feeling embarrassed is the worst thing you want in your class when you are teaching people with learning disabilities. Embarrassment = low self-esteem; low self-esteem = feeling stupid; feeling stupid = not wanting to come to school and that = no education; no education = a good chance of turning to drugs or living on the streets. The point here is that if students don't feel embarrassed by their learning abilities, they are less likely to fail. Teachers have the ability to make sure the students do well and leave with a good understanding of what was taught. Given the right amount of help, every student can succeed.

Feeling Embarrassed

I remember when I was in a teenager, attending a school that was specifically for kids with LD, I was sure I was in an environment that was going to be good for me. I thought I could ask any question at this, "school for the gifted," and not have to worry about being embarrassed. Well I was wrong. I asked a question and the teacher told a student to kick me! I guess the teacher thought my question was dumb. I was appalled. I couldn't believe the school would have any tolerance for that kind of behavior; a teacher telling a student to kick another student. I was scared and embarrassed, which is a little bit of the same thing. An experience like this leaves you feeling uncomfortable participating in class. Then I felt like that my grades were going to drop, and it would get worse from there. Embarrassment can happen from simply not knowing the answer to something, and not being confident enough to ask for help. If the teacher can recognize when a student needs more encouragement and makes sure they get positive reinforcement, it will make all the difference. If not, things like this can lead to negative thoughts for young adults because they feel that they aren't doing anything right. There were times when I thought, "what is the point of trying?"

The right approach to handling this is trying to figure out what the student is having trouble with and why he is having trouble with it. We want to help students succeed so they can end up helping the world and the people of the world. If we let them feel sorry for themselves, and possibly give up, that is a step further away of the people and the planet being helped.

When I was in college, I had a psychology teacher who worked with me one-on-one. Sometimes, I would feel like the work was too much and just want to quit. My teacher encouraged me to try and finish my work so that I would not have more to do the next day. Afterward, I felt good that I had stayed and completed my work. It meant I would not feel overwhelmed the following day. Students with learning disabilities can be easily overwhelmed, because everything seems so hard at times. Managing the workload is helpful. When you can convince a student to finish their work, they may be tired but they are going to feel much better at the end and proud of the accomplishment. When they feel that they are succeeding in their work, they will want to try harder. It worked for me.

Teaching a student with learning disabilities or any child is easy, but making it fun for student to learn is amazing. When I was in my math class, I had a very hard time at the beginning. The teacher noticed that I really didn't understand anything he was teaching. Luckily, this teacher was also a guidance counselor, and he was willing to work with me. He recognized that I needed extra attention and let me know he was there to help. By the end of the year, I was given an award for mathematics, a subject that seemed unmanageable at the beginning. It's not that I wasn't capable of learning the subject, I just needed extra help. I graduated with honors, far better than anyone thought I would be able to do.

When a student is getting frustrated with their studies, a quiet place is always nice to have. I am fortunate enough to have a place like this. It is my place of Zen to go to when I am feeling down or frustrated. I was recently working on a documentary about kids with learning disabilities. There was a student who needed to be alone whenever he got frustrated, so he went into the school Principal's office and just walked around a table for a while. It helped him calm down. Little things like this are very important. Talk to the students and see what their needs are. Figure out solutions to their learning difficulties, and they will become more ready to learn while you are teaching.

Everyone is capable of being successful. It is the job of educators to find ways to make sure everyone does as well as they possibly can. Patience is the best thing a teacher can give a student. Taking time to work with students and find out how to help them can mean the difference between them learning to read or to do math, or not learning at all. Teachers should look for clues as to whether the students are keeping up with the lessons. If a student doesn't know the answer, find out why. The sooner you learn what works, the more successful the class will be.

Quinn Bradley,
Adult Learner

LEARNING TO ACHIEVE: A PROFESSIONAL'S GUIDE TO EDUCATING ADULTS WITH LEARNING DISABILITIES

Chapter 1

Definition and Legal Issues

Setting the Context

What does it mean to say that a person has a learning disability? This condition is easily misunderstood, and is one professionals are still working to define clearly. One reason for this difficulty is that the identification of specific learning disabilities (LD) as a distinct disabling condition is relatively recent. This term was introduced to educators in the 1960s based on the realization that some individuals who fail to achieve in school do not match standard patterns of exceptionality such as intellectual limitations or emotional disabilities. Another reason for differing definitions is the interdisciplinary nature of the field. Practitioners in the fields of medicine, psychology, speech/language, and education use different vocabulary (e.g., perceptual disorder, minimal brain dysfunction, asphasia) to describe and define what it means to have LD (Hardman, Drew, & Egan, 2008, p. 163). Finally, the hidden nature of LD compared with physical and sensory disabilities (e.g., cerebral palsy, blindness) means that LD may go undiagnosed, making it difficult for individuals with the condition to determine the causes of the resulting problems they face. This "hidden" disability can lead others to misinterpret the individual's performance problems. Thus, individuals with LD face challenges in both self-understanding and the misperceptions of others.

Individuals with diagnosed LD have legal rights, which can translate into services in preschool through high school (P-12). Upon school exit, individuals with LD may still be able to access disability-related services, but the conditions for accessing services change, and the need for self-advocacy increases. Individuals with undiagnosed LD do not have the benefit of these legal protections. When undiagnosed adults suspect that they have LD, they must decide whether to seek (and usually pay for) a diagnosis.

Many individuals who enroll in adult education and training programs have either diagnosed or undiagnosed LD (Kirsch, Jungeblut, Jenkins, & Kolstad, 1993; Ryan & Price, 1993; U.S. Department of Labor, 1991). The National Assessment of Adult Literacy, which surveys a national sample of U.S. adults, indicates that 6 percent of the individuals surveyed reported having LD. The challenging effect of their LD is evidenced by their lower prose, document and quantitative literacy skills compared with adults without self-reported LD (Kutner et al., 2007, p. 30). It is not surprising that adult education and training programs serve a high percentage of adults with LD (Corley & Taymans, 2002). For example, welfare-to-work programs report serving a large number of individuals with low literacy levels; 25 percent to 35 percent of their participants are considered to have LD (National Governors Association, 1998).

There is no single common profile for an adult education student with LD; age, formal diagnosis and high school completion are documented sources of variability. A recent study of adult education program participants found that middle-aged

individuals (ages 46 to 55) were more likely to identify themselves as learning disabled than were younger participants (Mellard & Patterson, 2008). Younger adult students are more likely to have a formal diagnosis than are older students because of the trend toward improved identification during the P–12 school years. Programs serving dropouts can expect youth with LD, because their dropout rate is two to three times that of their non-disabled peers (U.S. Department of Education, 2008; U.S. General Accounting Office, 2003). In the past, lax graduation standards allowed many individuals with LD to exit high school with diplomas despite having significant literacy needs. Today, this is less likely because of increased accountability and more rigorous graduation standards. This increased accountability may lead some to drop out. Regardless of specific individual circumstances, living with a learning disability has the potential to be a major life stressor (Mellard & Patterson, 2008). Even though formal learning environments can be stressful, many adults with LD seek out adult education programs as a means to improving their lives.

What are Learning Disabilities?

Individuals with LD are an extremely heterogeneous group. One can point to well-respected professionals who are highly successful and competent but are slow readers and poor spellers compared with their peers. One can also find individuals who can barely read and write but are eloquent in their oral expression. There are individuals who excel in reading and struggle in math. The combinations of strengths and needs and how individuals use their strengths to compensate for their areas of need are almost endless. This great variability makes it difficult for educators to understand when a learner's struggles are based on this organic condition or when they are based on other factors, such as a lack of prior schooling or emotional problems. To complicate matters, for some the challenges are a result of more than one issue.

Disability definitions, including LD, are social constructs that reflect current understandings and beliefs. Thus, definitions may change as understanding of the disability develops (NRCLD, 2007, p. 5). The U.S. Department of Education's Office of Special Education Programs (OSEP) developed the Specific Learning Disabilities (SLD) Initiative to address the scientific and broader political issues of definition and identification. As part of the SLD Initiative, OSEP convened 10 organizations that represented parents, state and local practitioners, researchers and policy developers to construct consensus statements to describe the nature of LD. The group provided an overall defining statement regarding the definition (Figure 1).

This definition can be divided into six consensus statements that describe the nature of LD.

Figure 1. SLD Consensus Statement

Strong converging evidence supports the validity of the concept of 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 mental retardation, behavioral disturbance, lack of opportunities to learn, or primary sensory deficits.

Source: NRCLD (2007), p.2

Consensus Statement 1: The Concept of Specific Learning Disabilities Is Valid and Is Supported by Strong Converging Evidence

Simply stated, LD are real. Researchers across areas of specialization in LD research attest to a strong evidence base supporting the existence of LD (Bradley, Danielson, & Hallahan, 2002). Although there is lack of consensus on how to define and measure LD, it is well documented that an individual with LD faces great challenges in learning, and for many this is associated with lack of success in both secondary and postsecondary education. Students with LD are the largest group of individuals with identified disabilities served by special education, comprising almost 50 percent of students with disabilities and about 5 percent of the total school-age population. One attribute of LD is that areas of weakness can be remediated, but those areas will remain a relative weakness compared with areas of strength (Bradley, Danielson, & Hallahan, 2002). Thus, the prevalence rates for school-age children provide some indication of the prevalence in adults.

Consensus Statement 2: SLD Are Neurologically Based and Intrinsic to the Individual

Although difficult to measure, it is widely accepted that LD have a neurological base. This means that the way a person's brain functions sets up a predisposition for one or more weaknesses related to key learning processes that comprise reading (word recognition and spelling, comprehension, fluency and automaticity), math (computation and problem solving) and

written expression (handwriting, spelling and composition) (Fletcher, Lyon, Fuchs, & Barnes, 2007). These weaknesses result in performance problems that affect how an individual functions in learning situations. For example, neuro-imaging research is providing a growing evidence base indicating differences in brain structure and function between dyslexic and skilled readers. In addition, LD are now thought to have a genetic basis. LD often run in families. If there is a family history of LD, the probability of having LD is significantly increased (Shaywitz, Morris, & Shaywitz, 2008).

Consensus Statement 3: Individuals With SLD Show Intra-Individual Differences in Skills and Abilities

Intra-individual differences are a hallmark of LD. This means that there is a noticeable difference between what one would expect an individual to achieve based on his or her general ability and what the individual is actually able to do. LD is also evident in marked differences across areas of performance important for school, work and independent living. The Rehabilitation Services Administration, an office within the U.S. Department of Education, has defined specific areas of functioning that can be assessed as part of LD identification (Figure 2). The Rehabilitation Services listing is much broader than what current researchers recommend for outlining areas affected by LD (see Figure 3). Whatever the indicators chosen, an adult diagnosis of LD must be based on a distinct profile of significant differences across areas of functioning.

Consensus Statement 4: SLD Persist Across the Life Span, Though Manifestations and Intensity May Vary as a Function of Developmental Stage and Environmental Demands

LD are a lifelong condition. Even when identified and remediated, they will continue to cause uneven development and be a source of relative deficit compared with areas of performance not affected by the LD. LD can be identified at any point along the developmental continuum. Infant, toddlers and preschoolers with persistent delays in development may be referred for screening and evaluation in order to provide early intervention. Although it is too early to diagnose LD at that age, it is possible to begin to identify children who have persistent delays despite early intervention. As these children move into elementary school, some will eventually be identified as having LD (NJCLD, 2006).

Figure 2. Manifestations of SLD Defined by the Rehabilitation Services Administration

Attention	Writing
Reasoning	Spelling
Processing	Calculation
Memory	Coordination
Communication	Social competence
Reading	Emotional maturity

Source: U.S. Department of Education (2005)

Other children appear to progress normally until they face the academic demands of elementary school. As they fall behind in reading or math they may be referred for targeted interventions or diagnostic testing. For some, this will result in an LD diagnosis. Other children, who have learned how to cope and compensate for their areas of need, are able to make their way through elementary school but are unable to continue compensating for the added content-learning demands of secondary school. For others, problems in postsecondary education and employment bring forth the possibility that performance problems may be rooted in LD. Thus, when and how individuals learn that LD are a source of their learning, work or daily living problems can vary widely.

The key to any diagnosis is the self-insight it can produce. A good diagnostic process results in clearly presented information and recommendations that offer a profile of the individual's strengths and needs as well as recommendations for learning and work. This identification of strengths is key to successful living for any adult but is particularly important for adults with LD, who must learn how to compensate for the areas of functioning negatively affected by the disability.

Although genuine LD are a lifelong condition, the difficulties and stress experienced by school-age students with LD may lessen over time. Adulthood can bring a welcome relief from the rather narrow range of academic behaviors important in secondary school. Adult life holds a far greater range of ways to be productive and successful. Yet, adult life is complex and demands working with information in various forms across a range of circumstances. Thus, successful individuals with LD find a way to match their home, education and work demands to their profile of strengths and needs (Reiff, Gerber, & Ginsberg, 1997).

Consensus Statement 5: SLD May Occur in Combination With Other Disabling Conditions, But They Are Not Due to Other Conditions

Individuals may experience LD in combination with other disabilities. For example, it is possible to have LD and attention-deficit/hyperactivity disorder. It is also possible to have LD and mental health issues or physical disabilities. Likewise, some individuals enter adulthood with academic deficits resulting from attending failing schools, irregular attendance patterns, or limited experience with academic English. By definition, LD cannot be caused by these “exclusionary” factors. One issue is that current identification procedures are not perfect in distinguishing causation from co-occurrence, creating a situation where individuals may be erroneously included in or excluded from the LD category on the basis of co-occurring conditions. This situation is further complicated because many of the “excluded” conditions are correlated with the lack of development in cognitive and linguistic skills associated with LD (Fletcher et al., 2007).

Figure 3. Research-Recommended SLD Profiles

An individual with SLD would show discrepancies either within one profile or across profiles.

SLD reading disabilities: Problems in one or more of the component skills necessary for competent reading:

- Word recognition and spelling
- Fluency and automaticity
- Comprehension

SLD writing disabilities: Problems in one or more areas necessary for competent writing:

- Handwriting
- Spelling
- Composition

SLD math disabilities: Problems in one or more areas necessary to use math:

- Computation
- Problem solving

Source: Fletcher, Lyon, Fuchs, & Barnes (2007)

Consensus Statement 6: SLD Are Evident Across Ethnic, Cultural, Language and Economic Groups LD can occur in any cultural or economic group. Cross cultural research indicates that individuals exhibit characteristics associated with LD across the world (Paulesu et al., 2001; Sideridis, 2007). Neuroscience research shows that learning to read in either an alphabetic (e.g., English) or symbolic (e.g., Chinese) language is based on adequate functioning of language-based skills. Children identified with dyslexia across languages have a common difficulty manipulating the sounds in words, as evidenced by problems in rhyming or counting the number of syllables in words. These problems are based on the under-activation of brain functions that support reading associated with reading disabilities (Goswami, 2008). Along with the realization that LD exist across languages is the concern that assessment procedures can be culturally biased (Sideridis, 2007). This concern is exemplified by learning disability prevalence rates for school-age children identified through special education assessments in the United States. Among children ages 6 through 21, American Indian/Alaskan Native students and black students are more likely than expected to be identified as having LD, while white (non-Hispanic) students are less likely, on the basis of overall percentages of each ethnic group enrolled in school (Skiba et al., 2008). This concern about assessment is also reflected in cross-cultural research indicating that cultural, linguistic and economic factors can influence who is identified as having LD (Sideridis, 2007). Countering this concern is research on identification of individuals with LD at the community college level suggesting that assessments can be developed that do not result in disproportional representation in terms of race, age or gender (Mellard, 2003). In summary, these 6 consensus statements identify areas of agreement in how to define LD. Yet, one major issue for adult education is the identification and assessment of English language learners.

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