

CHAPTER I

INTRODUCTION

“The best brain of the Nation may be found on the last benches of the classroom”

- Dr. A P J Abdul Kalam

“Education is not the learning of facts, but the training of the mind to think”

- Albert Einstein

Learning disability can be explained as having difficulty in comprehending the contents of the learning process, academically. It is a difficulty with psychological processes that affects the areas of learning such as reading, writing and mathematics. The psychological process includes trouble with perception, memory and expressive language.

Learning disability ranges from mild to severe. For some individuals with learning disability, they are capable of being independent in taking care of themselves whereas in severe cases, they need assistance and care (*Learning Disabilities*, 2021).

Since Learning Disability is a term with varied definition and often confused with ADD or ADHD, the prevalence of the disorder is hardly accurate and the statistical incidence rate could be biased for many reasons. Hence, the statistical details shared here are for references and for further conclusion the definition given by the author to be considered.

Detecting learning disability is challenging for various reasons like it is extremely difficult to identify learning disability at birth. To study the prevalence and estimation of the number of cases helps to understand the complexity of learning disability prevailing in the general population (Gates, 2003).

Prevalence of Learning Disability

Earlier, the prevalence of learning disability was 3-4 people among 1000 of the general population, which was considered to be universally common. Predominantly, these people with learning disability had an IQ of around 70 which is considered moderate intellectual level. But it is also common to find people with learning disability to have multiple disability like physical or sensory impairments as well as behavioural difficulties (Gates, 2003).

Learning disability prevalence is higher in developing countries, higher in women than in men, children from poor backgrounds and also among ethnic minority people (*Learning and Developmental Disabilities Research and Resources*, 2019).

According to *National Center for Education Statistics* (2021), around 14% of public school students (7.3 million) received special education services under Individuals with Disabilities Education Act (IDEA) during the year 2019-20. Within the special education services received, the most prominent category was specific learning disability (33%). The report further says that among the children with specific learning disability, the highest percentage was secured by American Indians / Alaska Native Students (18%). Out of the 6 to 21 years old, female students (44%) received special education under IDEA for specific learning disabilities than male students (33%).

According to Canadian statistics, 3.2% of Canadian children have learning disability and transition from home to school accounts for 25% increase in the prevalence rate. Around half a million adults suffer with learning disability and face problem in getting into higher education in Universities and Colleges. In the age group aged above 15, the increase in learning disability is 40% between 2001 to 2006, which accounts for one of the fastest growing types of disabilities in Canada that is not due to aging (*Learning Disabilities Association of Canada*, 2021).

In US, 2.5 to 2.8 million children receive special education services for learning disabilities. Among the various learning disabilities, dyslexia are very common (20%). One third of students with learning disability also have ADHD (Peterson, 2019).

Learning Disability was one of the fastest growing special education category between 1976 to 2000 but after 2002 there is a decline in the prevalence rate in U.S. The reasons for the decline in the rate of learning disability is attributed to the following reasons

- * Availability of early screenings and early childhood education
- * Progressive delivery of reading instructions which has contributed to less prevalence of reading difficulty

Revision made in the regulation of 2006 version of IDEA from its previous 2004 version which has led to the development of learning disability identification. This had led to the many ways of identifying learning disability as well as intervention strategies that assist the students struggling with learning difficulty and henceforth reduce the need for

special education. Since 2006 there has been a decline in the prevalence of learning disability in every state in USA (Cortiella & Horowitz, 2014).

India is a diversified country with many languages and variety of cultures. In this country, the term learning disability is very new and the efforts are taken to include many professionals from the field of Education, Psychology, Paediatrics, Speech and Hearing and Psychiatry. With many languages spoken at varied levels, each state has their own language with Hindi and English as their official language. This builds up multilingual platform for the citizens of the country. The school system also is different with two kinds: English medium schools and regional language medium schools. Inside families and social networking too, a child gets exposed to multiple languages (Ramaa, 2000).

According to Nalanda Institute Report (2002), the incidence of children with learning difficulties have increased tremendously. In a study by National Institute of Mental Health and Neurosciences, Bangalore, the prevalence rate of learning disability among 4 to 16 years old children was 12%. And as per the survey result by L.T.M.G Hospital, Mumbai, around 640 children were diagnosed with learning disability out of 2,225 irrespective of socioeconomic status (*Learning Disability - Indian Scenario*, 2019).

As per the survey by the Medical College at Kalamassery, the children studying in class IV and VII, 15.60% reported disability in written expression, 12.57% in reading and 9.93% in mathematics (Sreemol, 2020).

According to Kuriyan et al. (2018), the mean prevalence of children with learning disability accounts to 10% and they are highly vulnerable to low self-esteem, anxiety and depression. The prevalence rate of learning disability in Gujarat is approximately 9.6% with 7.4% children with dyslexia, 8.6% with dysgraphia and 7.1% with dyscalculia (Shah & Buch, 2019). The overall picture is alarming and according to Goel, 2021, a class has 5 students with learning disability in a school.

Out of 2064 children in the age group of 0 – 16 years, the prevalent rate of specific learning disability was 12% in India, according to the study conducted by Srinath et al. (2005) at National Institute of Mental Health and Neurosciences (NIMHANS), Bangalore. In the study by Mogasale et al. (2012), the prevalence of specific learning disability children in South Indian City was 15.17% (n=165) among which 12.5% (n=135) had dysgraphia, 11.2% (n=121) had dyslexia and 10.5% (n=114) had dyscalculia. Overall around 7% (n=76)

children had all types of specific learning disability i.e. dyslexia, dyscalculia and dysgraphia. Additionally, the author shares that in a multi linguistic country like India, there is always a demand for more prevalence study.

Chacko and Vidhukumar (2020) selected children studying in Central Board of Secondary Education from class IV to VII in Ernakulam, Kerala, South India were administered by NIMHANS Index for specific learning disability and Malin's Intelligence Scale for Indian Children (MISIC). To consider the influence of bilingual effect, the children were assessed for reading and writing using Malayalam text book at level below 2 classes from their current academic level. After statistical analysis, out of 1480 children, 429 children had specific learning disability and the prevalence rate was 16.49%. Out of 244, 75% had impaired reading and writing, 54.92% had impaired written expression and mathematics, 44.67% had combination of impairment in reading, writing and mathematics. It was found that children studying in state board syllabus were highly affected than CBSE syllabus, as later is privately tutored with regulated admission process which could be a reason.

Chordia et al. (2020) studied the prevalence of specific learning disability among children in the age group of 5 to 7 years in Puducherry by cross sectional using triphasic approach. In the first phase, 480 children were screened using SLD-SQ (Specific Learning Disability – Screening Questionnaire). Out of 480 students, 109 children were screened as positive for SLD. In phase two, 109 children were assessed for vision, hearing and intelligence quotient and 12 children were excluded because of impairment in vision, hearing and subnormal intelligence. In Phase three, 97 children were administered by NIMHANS SLD Index and the results revealed that 7.5% (n=36) had SLD, 9.6% boys and 4.9% girls. The risk of developing SLD was higher among government school students (12.1%) than private school students (2.2%). The study emphasized on the importance of early intervention and to increase awareness on SLD among teachers and parents. The author also cautions that if SLD remains undetected, it could lead to poor academic performance, affect the quality of life of the child which in turn reduces the self-esteem of the child, dysfunctional family atmosphere and poor social interaction.

According to Directorate of Education, New Delhi, the children with learning disability increased from 19,685 (2018-19) to 37,312 (2019-20). In the 2018-19, Delhi Government launched Project Smile to help students with learning disability (Mission

Buniyaad) and identified by assessments. The project is aimed to provide remedial assistance to the children and the project was included in the budget allocation (2020-2021) by Delhi Government. Due to pandemic, the entire assessment was done through online mode and remedial teaching in Hindi language was provided through online mode. But it is shocking to know that around 46.2% children have been assessed to have learning disability problem considering both the year 2018-19 and 2019-20. The reason behind this increase is unknown (Chettri, 2021).

Definition of Learning Disability

Learning Disabilities (Learning Disabilities Association of Canada, 2015) result from impairments in one or more processes related to perceiving, thinking, remembering or learning. These include, but are not limited to: language processing; phonological processing; visual spatial processing; processing speed; memory and attention; and executive functions (e.g. planning and decision-making)

Marks (2021) defined learning disability, MedicineNet, is a childhood disorder characterized by difficulty with certain skills such as reading or writing in individuals with normal intelligence. Learning disabilities affect the ability to interpret what one sees and hears or the ability to link information from different parts of the brain.

Learning Disabilities Association of America (2019) stated that Learning Disabilities range in severity and interfere with the acquisition and use of one or more of the following: *oral language*– listening, speaking, understanding; *reading*– decoding, phonetic knowledge, word recognition, fluency and comprehension; *writing* – written expression, spelling, fluency; *mathematics*– computation, problem solving, math fluency. It is necessary that any evaluation for suspected Learning Disabilities thoroughly assesses all areas of potential skill deficiency as well as the underlying cognitive and psychological processes contributing to learning.

According to *National Joint Committee on Learning Disabilities*, 1991, learning disabilities is a general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical skills. These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction, and may occur across the life span. Problems in self-regulatory behaviors, social perception, and social interaction may exist with learning disabilities

but do not, by themselves, constitute a learning disability. Although learning disabilities may occur concomitantly with other disabilities (e.g., sensory impairment, mental retardation, serious emotional disturbance), or with extrinsic influences (such as cultural differences, insufficient or inappropriate instruction), they are not the result of those conditions or influences.

Types of Learning Disabilities

Learning Disability expresses itself in many forms and types. The major types of learning disability are

Dyslexia

Dyslexia is a form of learning disorder in which a person has difficulty understanding written words. It is also known as reading disability or reading disorder (*What Is a Learning Disability?*, 2021). Individuals with dyslexia find trouble with reading, spelling, writing and speaking. Symptoms of Dyslexia vary at different stages of schooling.

Symptoms of Dyslexia

Most of the preschoolers with dyslexia have difficulty in processing the language and usually take longer time to respond to a language. Some of the signs shown by preschoolers with dyslexia are remembering the letters of the alphabet, wrong pronunciation of a word, difficulty to recognize letters and identify rhyming words.

At elementary school, children with dyslexia have hard time to learn and respond to higher order linguistic pattern of reading, writing and speaking. Some of the signs shown by them are slow reading, backward letter writing or mirror writing, difficulty to comprehend the passage while reading, slow writing, trouble with spelling and difficulty to follow a series of instructions.

Dyslexic children from middle and high school withdraw from social gatherings and find difficult to converse with their peers. Some of the signs are difficulty to write clearly, consuming long hours to complete home assignments, troubled with messy handwriting and difficulty to read aloud.

Adults with dyslexia are troubled with reading, spelling, note taking, understanding ordinary jokes, learning another language and being organized (Pathak, 2020).

Dyscalculia

An individual with dyscalculia is troubled with mathematics and computational analysis. They face difficulty in solving an arithmetic problem and grasping mathematical concepts. Children with dyscalculia have a tough time with comprehending a mathematical problem, understanding the basic mathematical operations such as addition, subtraction, multiplication, difficulty to understand fraction, troubled with time and money concepts and remember the phone numbers (Miller, 2021).

Dysgraphia

It is otherwise known as writing difficulty. An individual with dysgraphia finds it hard to write letters, words and write within space. Students with dysgraphia show signs of poor handwriting which is unclear, irregular and inconsistent. They also have difficulty to copy down notes. The symptoms of dysgraphia are sore hand due to hard grip over the writing material, poor spatial planning and alignment of sentences while writing, untidy notebooks with eraser marks, poor spelling, abnormal wrist or paper position while writing (Miller, 2020).

Similarity between Specific Learning Disability and Learning Disability

American Psychiatric Association (2021) differentiates Specific Learning Disability as a medical disorder and it can be diagnosed whereas Learning Disability is used in educational and legal set up.

Specific Learning Disability (Individuals with Disabilities Education Act: *IDEA*, 2018) means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia

National Dissemination Center of Children with Disabilities have given a list of skill areas in which children with SLD face trouble includes reading (dyslexia), writing (dysgraphia), listening, speaking, reasoning, math (dyscalculia).

According to Oklahoma's State Department of Education, suggested that individuals with Specific Learning Disability have difficulty with difficulty reading out loud, poor reading comprehension, struggling to write papers and essays, trouble understanding

lectures, difficulty holding a pencil (*A Guide to Specific Learning Disabilities*, 2021).

Difference between Learning Disability and ADHD

ADHD (Greene, 2021) is not a learning disability based on DSM-5, the characteristics of specific learning disorder includes difficulties in reading, writing and arithmetic skills during school years and below average academic performance. The difference is that ADHD is mainly due to difficulty in concentration and hyperactivity that the ADHD children finds learning is difficult.

Identification of Learning Disability

Prabhu et al. (2014) shares the identification of learning disabled children are verbal IQ equal or greater than normal range, normal sensory functioning (after correction), retardation in learning areas such as reading, writing and arithmetic. Minimum 2 years of retardation when compared to relative chronological age, average or above average in socioeconomic status, not suffering from serious emotional disturbances, exhibits symptoms of perceptual deficits, adequate educational opportunity, the child's special abilities should also be ascertained by means of other psychological tests, the scholastic history of the child should be properly studied and his day today individual group behaviour should be carefully evaluated.

In many remedial centers in India (Ramaa, 2000), few exclusion and inclusion criteria for learning disability are not having sensory problem, serious emotional problem, brain damage and intellectual retardation; 8 years or above, regularity in school attendance, serious academic difficulty (more than 2 years of mental retardation), receives help at home for home work, motivation to achieve academically, normal in auditory reception, and oral comprehension.

Specific Learning Disability has many co-occurring disorders. The disorders associated with Learning Disability are ADHD, communication disorder, developmental coordination disorder, autism spectrum disorder, anxiety disorders, depressive and bipolar disorders (Patricelli, 2021).

Signs of Learning Disability

According to National Institutes of Health (2021), the signs of learning disability are different for different people. The common signs observed in a child with learning disability are problems reading and/or writing and mathematics, poor memory, problems in paying

attention, follow directions and staying organized; clumsiness and trouble in telling time.

There are other signs that deserves prominence are impulsiveness, difficulty in concentration and expression of thoughts, poor academic performance, childlike talk, poor attention in listening, problems in understanding words or concepts.

Assessment of Learning Disability

The common test used to diagnose learning disability includes intelligence, achievement, visual motor integration and language tests. According to Individuals with Disabilities Education Act (IDEA), the diagnosis of learning disability is not done based on a single test.

Intelligence Tests

Intelligence tests used to diagnose learning disability are Wechsler Preschool and Primary Scale of Intelligence (WIPPSI), Wechsler Intelligence Scale for Children (WISC), Stanford-Binet Intelligence Test, Differential Ability Scale (DAS), the Woodcock Johnson Test of Cognitive Abilities and the Comprehensive Test of Nonverbal Intelligence (CTONI) (Logsdon, 2020) and Raven's Standard Progressive Matrices.

Achievement Tests

The common achievement test to diagnose learning disability includes the Woodcock-Johnson Tests of Achievement (WJ), the Wechsler Individual Achievement Test (WIAT), the Wide Range Achievement Test (WRAT) and the Kaufman Test of Educational Achievement (KTEA). These achievement tests focus on reading, writing and mathematical ability of a child with learning disability. Schonell Reading Test and Spelling Test can also be used to diagnose learning disability (Jethwani & Subhashini, 2019)

Visual Motor Integration Tests

Visual Motor Integration Tests helps to understand the visual-motor coordination of learning disabled child.

Language Tests

A language test includes Clinical Evaluation of Language Fundamentals (CELF), the Goldman Fristoe Test of Articulation and the Test of Language Development (Logsdon, 2020).

Assessment tests for learning disability in India

The tests available in India to measure learning disability are Dyslexia Screening Test, Diagnostic Test of Learning Disabilities (Swarup & Mehta), Behavioural checklist for screening the learning disabled (Swarup & Mehta), Grade Level Assessment Device for Children with Learning Problems (Narayan), Arithmetic and Diagnostic test for Primary School Children (Ramaa), NIMHANS battery diagnostic tool recommended by Government, Dyslexia Assessment for Languages in India (National Brain Research Centre).

Transition from childhood to adolescence

For any child, moving from one adapted environment to another will be challenging. For a child with learning disability, the transition could lead to anxiety and depression especially if the day time activities at school are not compensated (Young-Southward et al., 2017). Transition is many times coupled with bullying and low rates of enrollment into education, employment and social participation, which in-turn leads to low self-esteem and anxiety disorders. Learning disability students also faces challenges with transition when it comes to independence, experience to participate in the community than their non disabled peer group (Young-Southward et al., 2017).

Children with learning disability need multiple support systems to deal with transition. Their transition involves not just going from school to higher education or employment but also their ability to socialize and to take care of personal self. Since family environment plays a significant role in the transition period for a learning disabled child, the health status of a family is important. It has been observed that dysfunctional family could lead to symptoms of psychopathology in a learning disabled child and that family factors are involved in building risk factors for mental health problems (Allcock, 2018).

Some of the familial problems that give raise to mental health problems among learning disabled children would be siblings moving away from home for education or career, grandparents getting old and these also add extra burden to parents. The entire family atmosphere is different for the child with learning disabled and they need to explained pertaining to the changes. These can be handled better with proper planning, coordination and applying decision making strategies by school staff, families and community agencies (Leonard et al., 2016).

The strategies that can be applied to build capacities for the people with learning disabilities such that they understand the transition, both the one they are leaving and the one they are taking charge of the role. The suggested intervention strategies given by Allcock (2018) for coping mechanism to promote resilience, advice the signs and symptoms of mental illness, shares mental health literacy to alleviate mental health problems. Learning disabled children is troubled with communication skills such as following a task, listening and completing a task. They need proper planning which needs to be addressed through individual education and needs training in enhancing social competence. Social skills are very important and they also contribute towards good academic performance as well as to succeed at community level. Poor social skills leads to complicated problems like unemployment, livelihood problems etc.

Transition from middle school to high school

The shift from middle school to high school will be very challenging and traumatic for a child with learning difficulties. Some of the challenges that an adolescent face are physical changes, trying to be independent from family, new intellectual strategies and emotional issues. Apart from these, there will be problems related to change in schools, change in locality, community which might require adaptable skills in an adolescent. Due to these transitions, normal children might struggle to achieve good academic scores, experience low self-esteem and long for support through family or friends. Students with learning disability face worse scenarios.

According to National Longitudinal Transition Study, 8,000 Special Education Student in the age group of 15 to 23 from secondary school enrolled in grade IX and X found that school programmes were exhausting due to overload of subject contents. It had led to low grades and failures in huge numbers led to school dropouts. Hence, it is important to include transition programme at higher secondary level. Normal transition programmes such as the process of registration, talk by the principal, peer panels, high school visits and pairing with senior students (Letrello & Miles, 2003).

Forgan and Vaughn (2000) explained the effects of transition in the students with and without disabilities from sixth grade to seventh grade academically and socially. They shared that for general students, school transition leads to low academic competence, low self-concept and other school related behaviours.

Test et al. (2009) deliberated on the correlation of improved post-secondary school outcomes and 16 predicted categories among learning disabled students. The 16 predicted categories includes career awareness, community experiences, exit exam requirements, inclusion in general education, interagency collaboration, occupational courses, paid employment/work experience, parental involvement, programme of study, self-advocacy/self-determination, self-care/independent living, social skills, student support, transition programme, vocational education and work study.

Students with learning disabilities need assistance not just in academics but also in skills related to self-determination and self-advocacy skills. Self-determination skills prepare learning disabled student towards transition and adaptability leads towards academic success (Weiss & Faggella-Luby, 2019).

Transition from adolescence to adulthood

Transition from adolescence to adulthood in the age group of 14 to 25 years (Ribenfors, 2021) includes career to self-sufficiency which is difficult for learning disabled student. Many agencies come forward to enable the smooth transition process includes health and social care, youth services, leisure, careers guidance, housing, education, benefits and employment services. Some of the difficulties that are experienced in the transition from adolescence to adulthood include leisure roles and occupational roles like volunteerism, employment or attendance at college or university. There are several programmes that cater to the transition needs of adolescents with learning disability. These programmes can be split into two categories such as those that are exclusively for learning disabled students and those that are inclusive wherein adolescents with learning disability are trained along with non disabled students. Both the programmes support the learning disabled youth to get inside vocational training programmes that promotes job opportunities (Pandey & Agarwal, 2013). The challenges of transition from adolescence to adulthood by learning disabled students includes increased anxiety, substance misuse, risky behaviour, interpersonal relationship difficulties, school dropouts, unemployment. Hence it is important to deliberate with them the topics related to being responsible, independent living, time management, balancing life and work and develop self-discovery (Wade, 2019).

Vukman et al. (2018) focused on training the secondary vocational study programme for 417 first year high school students, out of which 105 students were learning disabled were selected and administered by social self-efficacy scale and LSAA social anxiety. The

findings showed lower perceived social self-efficacy and higher social anxiety among learning disabled students.

Pallisera et al. (2016) gathered experiences and perceptions of young people with learning disabilities. In their qualitative study, data was collected in 3 stages like educational pathway, social support networks and free time, construction of a personal plan for the future. Based on results, they recommended that family members and learning disabled youth should be informed about the local services available regarding transition process, to establish good cooperation with professionals, parents and learning disabled students to promote the need for a social network, to emphasize the responsible role of the young people with learning disability towards social and educational policies and practices.

Educational Policies and Schemes for learning disabled in India

In India, due to inadequate laws and policies, only 0.1 percent children with learning disability are identified for the disorder at elementary level. Some of the policies and programmes on Specific Learning Disability are

- a. The Right to Free and Compulsory Education Act (2010)
- b. The Rights of Persons with Disabilities Bill (2012)
- c. Government programmes such as Sarva Shiksha Abhiyan (SSA 2003), Inclusive Education for Disabled at Secondary Stage (IEDSS 2009)
- d. Examination Bye-Laws
- e. Rehabilitation Council of India
- f. Children with Specific Learning Disabilities (Identification and Support in Education) Bill, 2018
- g. Right of Persons with Disabilities Act (2016)

The Right to Free and Compulsory Education Act (2010)

According to this act, any child in the age group of 6 to 14 years has the right to free and compulsory education to provide “special training”. If the child has not completed elementary education also deserves admission (clause no. 4 and 9g). The Person with Disability Act (PWD) of 1995 discussed about seven disabilities and specific learning disability is not one among them. The children with specific learning disability are included under “general population” and are not provided due concern towards education. Hence, the Rights to Free and Compulsory Education Act helps children with specific learning disability.

The Right of Persons with Disabilities Bill (2012)

The revised Persons with Disabilities Bill by the Ministry of Social Welfare includes Specific Learning Disability/Learning Disability. It has also provided a definition for “Specific Learning Disabilities” as a heterogeneous group of conditions wherein there is a deficit in processing language, spoken or written, that may manifest itself as a difficulty to comprehend, speak, read, write, spell, or to do mathematical calculations. It includes perceptual disabilities, dyslexia, dysgraphia, dyscalculia, dyspraxia and developmental aphasia.

Government Programmes

Since the revised PWD bill is yet to be passed at the parliament, the policy for specific learning disability is not yet available in India. But there are various other programmes offered by the Government of India such as Sarva Shiksha Abhiyan (SSA 2003), Inclusive Education for Disabled at Secondary Stage (IEDSS 2009) are provided at National level. Both these schemes cover disability under PWD act, yet to be introduced. So SSA programme cover specific learning disability partially only. Since PWD Act 1995 does not cover specific learning disability, IEDSS does not cover SLD and SSA partially covers SLD. According to SSA, no child should be deprived of education. It also supports a wide range of strategies that includes children with special needs.

Identification, functional and formal assessment, Individual Educational Plan preparation, training teachers, research, resource support, removing architectural barriers, evaluation and monitoring and a special focus on girls with special needs are some of the interventions under SSA.

Under SSA, the training manuals are available with guidelines for the assessment of Specific Learning Disability. Children with Specific Learning Disabilities come under inclusive education in SSA and hence funding options are not available yet. As a result, the disability is identified but monitoring the education of the child is not available.

Examination Bye Laws

Few examination boards offer relaxations for children with specific learning disabilities in the context of examination through the bye-laws. Individuals under the category of blind, physically handicapped, dyslexic, autistic and candidates with disabilities as provided by PWD Act, 1995 are permitted to use amanuensis while appearing for

secondary school examination or senior school certificate examination. Few facilities provided are extra time up to one hour if it is a three hour paper, an option to opt one language only instead of two, a choice to choose any four subjects only out of the subjects offered by the board.

Rehabilitation Council of India

Rehabilitation Council of India is a statutory body that provides training and license to the persons working on individuals with disabilities. There is a course on learning disability at Bachelor's level and Masters level provided by RCI. The RCI governs the rules and procedures for identification and assessment, certification and educational interventions for SPLD (Gupta & Whitehead, 2014).

Children with Specific Learning Disabilities (Identification and Support in Education) Bill (2018)

According to this bill, the government (central, state and local) should conduct an annual survey aimed to identify number of individuals with learning disabilities. The bill also covers the nature of facilities and assistance provided to them and the extent of benefit they receive through these steps. Few of the role of the government organizations includes conducting awareness campaign on causes and prevention, treatment and remedial measures. Other roles include setting up institutions that train teachers and conduct teacher training programmes in inclusive education and early detection of specific learning disability.

The bill also iterates the

- essentiality of every school to be equipped with a resource room and a special education to train learning disabled
- To set up adequate number of learning disability detection and remediation centers in every district
- To offer courses to parents to deal with learning disabled children
- Distribution of learning materials such as special text books and teaching aid to specific learning disabled children
- The central government to provide leadership public awareness and focus on research and innovative practices in specific learning disabilities through National Centre for Specific Learning Disabilities

- To lay down the qualification towards certification by the Central Government
- Provision of concessions to the deserving students during examination. The concessions includes
 - 25% extra time to complete the exam paper, Facility for scribe, Oral test along with written test up to class IX with promotion based on the average of both, Relaxation in mathematics paper, use of calculators
 - Disregard the errors due to interchange of signs and number reversals
 - Second language exemption, Provision of alternate subjects like home science, electronic etc. Disregard of spellings, grammar errors and incorrect sentences, directions in geography, exemption from diagrams, charts and graphs, schemes to provide employment for individuals with specific learning disabilities that includes training, relaxation of upper age limit and schemes for promoting self-employment.

Right of Persons with Disabilities Act (2016)

It also known as Divyangjan Adhikaar Kanoon, the types of disabilities have been increased to 21 from 7 disabilities provided in the previous act. Hence, the following disabilities are covered in this act: Blindness, Low Vision, Leprosy Cured Persons, Hearing Impairment, Locomotor Disability, Dwarfism, Intellectual Disability, Mental Illness, Autism Spectrum Disorder, Cerebral Palsy, Muscular Dystrophy, Chronic Neurological conditions, Specific Learning Disabilities, Multiple Sclerosis, Speech and Language Disabilities, Thalassemia, Hemophilia, Sickle Cell Disease, Multiple Disabilities including deaf blindness, Acid attack victims and Parkinson's disease (*DivyaGyan, 2021*).

Enrollment into Higher Education in Indian Institutions

According to Kumar (2018), at higher education level, students with learning disability faces challenges pertaining to employment needs. The available policies and programmes in India have little scope towards higher education. Few reasons that restrict the entry of learning disabled students into higher education includes

- Availability of outdated programmes with inflexible structure, deficiency of trained manpower, funds, training facilities and research processes, high cost of higher education.

Few suggestions for the accessibility to learning disabled students at higher education will be

- Provision of proper medical attention, special education and rehabilitation facilities, Provision of higher education through open universities, distance education and vocational training institutions, usage of ICT tools to enhance learning and learning styles, Provision of scholarship to promising students

Needs

Due to lack of awareness, a problem of a learning disabled child goes undetected. Children with learning disability also possess hidden talent which varies from one child to another. Instead of identifying this talent and empowering the children, the children become isolated due to stigmatized vision. Many schools in India lack the facilities to teach learning disability children, to assess towards identifying their difficulties and learning styles. Considering the high prevalence rate of learning disability in India, it is essential that teachers gain training toward Individualized Educational Plan to train children with learning disability. Though policies are available to cater to these students, they are inefficient in addressing the specific demands and needs faced by every child with learning disability. Most of the policies are addressed to include children in the educational realm but offers little details towards teacher training, provision of ICT tools at school (Banchariya & Pandey, 2019).

Requirements to certify learning disability

Specific Learning Disability has been included in the Persons with Disability Act, 2016 in the 18th position out of 21 but the amendment from PWD Bill 2011 is still in process towards inclusion of SLD.

Certification of SLD

Some of the challenges to certify an individual with SLD are that the regulations differ from one state to another and board of examination to another. Since there is diluted version of assessing specific learning disability and difference from one state to another, there exists a lack of guidelines that are not accessible by students with learning disabilities.

SLD is complex in its own version in India with a multicultural and multilingual society to narrow down the assessment procedures with little awareness and training programmes for teachers (Unni, 2012).

Role of policies at post secondary education

At present, only few states in India have recognized learning disability as a category of disability (Eichhorn, 2015). States such as Maharashtra, Karnataka, Kerala, Goa and

Delhi have their own regulatory measures to include students with learning disability in the mainstream. There is an indispensable need for the amendment of policies at the National level towards the education for students with learning disability (Goswami, 2021).

The following will address the suggestions to include in the policy based on the current needs and demands are

- Providing transitional plans to students with learning disability from secondary education to post secondary education, provision of mentors to students with learning disabilities entering higher education, Implementation of Universal Design for Learning (UDL) and Enhanced Anchored Instruction (EAI) at all colleges and universities, promoting usage of alternative assessments, provision of alternative options while selecting a course, inclusion of the opinions of former students with learning disability while framing a policy (Eichhorn, 2015).

Department of Empowerment of Persons with Disabilities introduced UDID project that focuses in building integrated system for issuing Universal ID and Disability Certificates for Persons with Disabilities with their identification and disability details (*Unique Disability ID*, 2022).

The advantages of UDID includes

- The UDID card holder need not carry all their documents of proof towards their disability; currently, the disability card issued by one state is not accepted by another. But UDID cards are universal and can be accepted by all states and countries, which will benefit the individual for any higher education prospectus; the information on the card is easily accessible by card reading device; the data cannot be duplicated as it is a computerized information, through the UDID cards; the benefits received by the individual can be tracked such as
 - Scholarships schemes for students with disabilities, concession in railway fare, reservation in government jobs, free travel in state transport buses, loan for starting own business, unemployment allowances, toll concession with free fast tag

In order to avail the certificates, a person must have minimum 35% mental handicap or disability (*DivyaGyan*, 2021).

Role of Teacher

Teacher's lack of knowledge over learning disability and over the students with learning disability is a major barrier towards the provision of higher education to these students. Through Sarva Shiksha Abhiyan, the Central Government aims to include all children in the education system to promote "Education for all" movement. But to educate diversified learners in a classroom is a challenging task for a teacher. This necessitates teacher training programme for children with special needs.

School Counsellor

Lack of information regarding learning disability, stresses the parents and they normally enroll their children for tuitions. It is still a stigma among parents to send their child for remedial centers. Students with SLD are also challenged with many psychological issues such as isolation, anxiety, depression and stress. It is the role of the school counsellor to explain the nature of the disability to parents and refer for remedial education. A school counsellor must also convey to the parents of a learning disabled child that learning disability is a life time disorder and must provide with coping skills.

School Authorities

School Principal and Management also play a major role in the life of a student with learning disability. Provision of resource room to execute inclusive education and to provide specialized instructions to the students with learning disability, by the management of the school is essential (Karande et al., 2011).

Counselling needs for Learning Disability

Counselling is a profession through which strategies and therapies are offered to individuals who are in need of help, support and cure. Initially it is difficult for anyone to differentiate a normal child with learning difficulty and a child with learning disability. Few signs that could help would be the struggle by the child towards reading, writing speaking at the earlier stage. Later, by administering tests and the outcome of study habits can be considered. Plenty of tests are available like IQ tests, diagnostic and screening tests for learning disability. Through these testing and screening process, proper remedial and study regimen will be provided to the child with learning disability (*What's Worrying You?- Learning Difficulties*, 2022).

According to Fangwi (2020), counselling can be coordinated with educational services, medical and remedial specialists, family members and the students for children and adolescents with learning disabilities. This will benefit the children and adolescent with learning disability when counselling is given along with support services.

Counsellors play an important role to provide professional and ethical responsibility to assist the adolescent with learning disability to explore their potential. Hence, it is recommended that a counsellor working with learning disabled adolescent has the experience to identify the disability and to provide knowledge to the individual.

Earlier counselling services to the individuals with learning disability were limited due to reasons like

- Counsellor's lack of confidence and training to counsel these individuals, counsellors have incorrect information about their client and often end up with bias and prejudice view, many of the counselling services are provided by the special education teacher itself and hence counsellors felt that their skills are not required.

But, counsellors and counselling can help these individuals with learning disability in many ways. Few of the requirements needed to counsel adolescents with learning disability include

- Counsellors must disclose their feelings and attitudes towards working with adolescents with learning disabilities, Counsellors must strive to attain for correct information about the learning disabled individual, they must also have knowledge and expertise in the area of special education to identify the disorder and suggest remedial for adolescents with learning disability

Counselling Children with Specific Learning Disability

It has been proven through studies that students with learning disability are troubled with low self-esteem, low self-concept and their adaptability to societal context are poor besides their academic difficulty, difficulty with executive functioning etc.

Role of a counsellor towards children with specific learning disability

- Counselling to provide remedial teaching to individual with learning disability promotes their success especially when counselling caters to the psychological needs of students, counsellors can also strengthen the therapeutic relationship with the

learning disabled students to enable them to adapt to the system of education and societal expectations, they can include teachers in the counselling session as they play a vital role in the development and growth of the student with learning disability, they also plays an important role in linking the general teacher as well as the resource specialist to promote inclusive education for the student with learning disability, they can consult a teacher for any clarification in the teaching realm i.e. towards techniques in teaching mathematics and instructions to provide while reading, they play a major role in deciding on the essentiality for introducing classroom modification, if required, to promote social skills in a child with learning disability, they can request a teacher to be a role model in modelling the social roles of a student with learning disability, they can also organize peer pairing, work groups and classroom social skills programme.

Therapeutic approaches

The therapeutic approaches recommended for learning disabled child with low self-esteem, low self-concept and poor social skills are

- Child Psychotherapy deals with the child's repressed emotions and desires that affect the current thought, attitudes and behaviour of the child with learning disability. The counsellor helps in resolving the issues that the child is troubled with through the therapy and resolves the problem.
- Child Cognitive Behavioural Therapy changes the disturbing thought pattern of the child to a rational one through therapeutic approach
- Solution focused therapy solves the child problem based on their abilities
- Family Therapy reduces parent's stress due to the problem that their child is facing. The counsellors can enrich the bond between the family members and help them to understand the potentials of the child. This enables a positive understanding among the family members about the child's growth and development.

Family Counselling

A baby born in a family is a joy to the entire family. Upon identifying that the baby has difficulty in some form that interrupts the development and growth process, the entire family feels devastated. Therefore, counselling helps in letting the family understand survival means and offer strategies to handle the child with disability.

According to Fareo (2015) the role of counselling in a family are to cope with the demands of children with special educational needs, establish parent child relationship, emphasize the role of parent for a child with learning disability, counselling helps the child to develop social, cognitive, educational skills, it teaches the family members the ways to be assertive, solve problem, make decisions etc.

Counselling intervention techniques includes counselling, social services, family education, skill training, advocacy activities, developing individualized educational plan, providing access to social network, providing parental rights and advocacy.

Parent Support Services

According to Yadwinder (2010), parents and family support can be grouped into eight categories

- a. Connecting NGOs with the families of learning disabled children and empowering deprived families
- b. Providing strategies and motivation for the family members to interact among themselves
- c. The presence of a child with learning disability affects the sibling profusely. The varied emotions like anger, frustration, anxiety and stress experienced by the sibling will be focused and attended through counselling
- d. Education on personal hygiene, healthy nutrition to the families for a healthy family will be provided through counselling
- e. Educating and imparting on the disability of the child that helps to lessen the stress and ignorance of the family members. This will provide adequate knowledge on special education and schemes that are available to help a child with learning disability
- f. Providing frequent medical checks ups and other special education facilities to the family with special need child
- g. Recommending stress relieving exercises that focus on physical health as well as positive thoughts and positive attitudes towards life
- h. Providing access to books, video and audio information to manage disabilities, strategies to overcome difficulties and cope up with the disability.

In general, parents need to support for sharing their stories to a counsellor, recognized for their courage and love towards their child with disability, seeking advocacy benefits to reach for professional help, participation in school events and programmes.

Operational Definitions

Emotional Intelligence

The ability to monitor one's own and other's feelings and emotions, to discriminate among them, and to use this information to guide one's thinking and action (Mayer & Salovey, 1997).

Social Competence

Social competence refers to getting along well with others, being able to form and maintain close relationships and responding in adaptive ways in social settings (Orpinas, 2010).

Attention

It is defined as the set of evolved brain processes that leads to adaptive and effective behavioural selection (Krauzlis et al., 2023).

Working Memory

Working Memory is the small amount of information that can be held in mind and used in the execution of cognitive tasks (Cowan, 2014).

Academic Achievement

Academic Achievement is the progress made towards the goal of acquiring educational skills, materials, and knowledge, usually spanning a variety of disciplines (Bolt, 2011).

Quality of Life

WHO defines Quality of Life as an individual's perception of their position in life in the context of culture and value systems, in relation to their goals, expectations, standards, and concerns (*The World Health Organization Quality of Life (WHOQOL)*, 2024).

The study on "Efficacy of Expressive Arts Therapy to enhance Academic Achievement among Learning Disabled Adolescents" envisions addressing 6 P's of change in a child with learning disability. They are

- Progress
- Passion
- Purpose
- Persistence
- Pragmatism
- Perspective

It can be explained as, “progress in the growth of the children with learning disability by promoting passion in the children to learn with a purpose and persistence that defines the perspective of growth to lead a pragmatic life”.

The entire study caters to the importance of assessment, the impact of transition, role of parenting, requirements to meet higher education and the necessity to provide social security to the students with learning disability. These dimensions are channeled towards the holistic growth of the student with LD and it aims to provide the child to enjoy learning and development just like any other child of the same age.

Need for the Study

Learning Disability (LD) is an umbrella term with difficulties not just in academics but also in the psychological and social aspects of a child. The disorder is preventable if identified at a young age and this signifies the need for early screening at elementary school level. When a child has been identified for learning disability at elementary school level, remedial can be provided which enhances the lifestyle of the child academically, psychologically and socially.

But not many students with learning disability goes through the process of screening for learning disability. Plenty of students remain undiagnosed for LD and they get promoted to higher classes. At higher classes, the poor performance in academics adds to the development of low self-esteem, low self-concept and poor social skills. The cumulative accumulation of these difficulties has a severe effect on the personality built up on the child when they step out of school to face the real life as an adult.

Learning disability is problematic not just to the student with LD but also to the caretakers. Parents and other family members of a child with LD face intense stress and trauma. They find it difficult to accept that their child has a disorder. Predominantly, child with LD has average intelligence but academic performance is poor. Parents believe that as

the child grows older, they will perform well academically. But to their disappointment, the child with learning disability continue to perform poor in academics as well as with additional complications due to psychological and social issues. At this stage, parents look out for help through teachers and assistance from institutions. Though there are provisions available for children with learning disability through policies and acts, their reach to the concerning person is limited. To avail the relaxations at school level and seat allocation at college level is still a mammoth task. All these hurdles affect the quality of life of the entire family with a LD child.

Through this study on “Efficacy of Expressive Arts Therapy to enhance Academic Achievement among Learning Disabled Adolescents”, the focus will be to help a student with LD to enhance the academic skills, social skills, quality of life and well-being through intervention techniques, find out child and parent relationship regarding transition plan, to provide guidance on the relaxations available for higher education and other provisions offered by government of India, enumerate on the significance of inclusive education. By providing holistic approach, the student with LD, parents and teachers will be equipped to face the society courageously. Overall, the study aims to meet the sustainable goals provided by the UN stating that “development that meets the needs of the present without compromising the ability of the future generations to meet their own needs”.