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RESEARCH ARTICLE

TO STUDY THE CAUSES OF LEARNING DISABILITIES AT PRIMARY LEVEL

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ABSTRACT

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Key Words: Learning, Learning Disability, Dyscalculia, Dyslexia, Verbal, Non-Verbal, ADHD, Dyspraxia, Intelligence, Environmental. Learning abilities is a condition giving rise to difficulties in acquiring knowledge and skills to the level expected of those of the same age especially when not associated with a physical handicap. In our society students with the learning disability are mostly ignored by teachers and parents because most of the untrained teachers are not able to find out their disabilities and because of it children become slow learner and cannot achieve good scores. Students having learning disabilities are also suffering from different combination and severity of problems. Sometimes students in preprimary level are not recognize by teachers as well as parents that cause worse situation with many other diseases. Students, who are at primary level needing extra care cause every disease is easily treated in its initial stage, and if any action wouldn't be taken so it will cause alarming situation. Thus, the causes of learning disabilities at primary level are important to be identified. For this purpose comprehensive structured questionnaire discrimination was used as a tool to collect the data. The collected data was processed and then its analysis was made through frequency tabulation method. The questionnaire is used in this research.10 students from each different departments of University of Karachi were selected through random sampling technique. In this way the sampling of this study was based on 100 students in total. A questionnaire was prepared which covered the aspects of the problem under study.

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INTRODUCTION

Kirk defined learning disability as follows

"A learning disability refers to retardation, disorder, or delayed development in one or more of the processes of speech, language, reading, writing, arithmetic, or other school subject resulting from a psychological handicap caused by a possible cerebral dysfunction and /or emotional or behavioral disturbances. It is not the, of mental retardation, sensory deprivation, or cultural and instructional factors."⁽¹⁾

So we can say that a learning disability is a neurological disorder. In simple terms, a learning disability results from a difference in the way a person's brain is "wired." Children with learning disabilities are as smart as or smarter than their peers. But the may have difficulty reading,

(1) Kirk, S.A. Behavioral diagnosis and remediation of learning disabilities. In Conference on the Exploration of the Perceptually Handicapped Child. Evanston, IL: Fund for Perceptually Handicapped Children, 1963, pp.1-7

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writing, spelling, and reasoning, recalling and/or organizing information if left to figure things out by them or if taught in conventional ways. A learning disability can't be cured or fixed; it is a lifelong issue. With the right support and intervention, however, children with learning disabilities can succeed in school go on to successful, often distinguished careers later in life.

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Background of the Problem: Pakistan is the large country with vast culture and history. Pakistan claims to be a Islamic republic, but with adoption of modern culture, traditionalist and radicals are differ as it claims. Pakistan also included in 'Third World Country' due to its economic state, health, education, life expectancy, women's rights and opportunities. But still some Pakistanis are having stable economic state and having modern style full of electronic gadgets, living in rural areas, but still major population of Pakistan are living in urban area with low economic state. Theoretically, all Pakistani children have a right to education, whether able-bodied and able-minded or not. In practice, half of Pakistan's children begin primary education, and half of these children drop out before completing the cycle.

Among the non-starters, girls and children with disabilities are disproportionately represented. The educational 'right' to which all Pakistani children, able-bodied or disabled, ordinary or special, girls or boys, are entitled in practice and which almost all do receive, is that of socialization and activity within their extended family network, their immediate neighborhood and the religions and cultures of Pakistani society. Expectations, choices and opportunities vary greatly between all these children, sometimes as a result of disability or difference, sometimes through gender, social and economic class, urban or rural situation, regional location, or other factors. Yet these wide variations are a traditional feature of life, and are not necessarily perceived as problematic or 'unfair'. .Data from Akbar (1989), Richter (1996) and government sources suggest the following growth of formal educational services for children with disabilities:

The number of children benefiting (or at least, attending) in 1988 was thought to be 10,373 and 12,475 in 1996. In Federal Government special schools, some 2,760 are currently enrolled; and the programmers of the Directorate General of Special Education consume a slender 0.3% of the national education budget (Khan, 1998). A school survey (Miles, 1985) found that 825 (1.9%) children with appreciable impairments were pointed out by school staff without any special training or sensitization, in 103 ordinary primary and secondary schools in the North West Frontier Province having a total enrolment of 43,416 pupils.

During the past 15 years, no significant factors are known that would have reduced the proportion of disabled children casually integrated; so taking a more conservative 1% level among some 20 million Pakistani children currently in ordinary schools, there would be 200,000 children with noticeable impairments. Thus the number of disabled children casually integrated in ordinary schools is likely to be at least 16 times (and might be 30 times) greater than the number in special schools, with virtually no extra help or resources made available to them or to their teachers. As against this, there are very roughly 40 million children of school age, among whom there will not be less than a conservative 2.5% having some moderate to serious impairment, i.e. at least one million such children. Thus it appears that the great majority do not attend school of any sort (along with some 19 million non-disabled school-age children who are not in school). When young disabled people pass the age for schooling, there are even less services or facilities available to them. Against this background of sparse formal services, the secretary of People's Pakistan's Disabled Federation reported that

"The parents and relatives consider the disabled as an economic liability and curse of God. Government functionaries take them to be nincompoop parasites. For the general public they are a nuisance. The disabled themselves are unaccepted by society, lose confidence in their faculties, lose self-respect and consider themselves fit for dependence upon others and beggary"⁽²⁾ (Malik, 1988).⁽²⁾

A large number of children have minor issues in development of cognitive, attending, fine motor and communication skills etc. Due to these developmental issues they are unable to join the mainstream schools. Since these inabilities are very less in severity therefore it is also not advisable that they should be put in special schools with low functioning and children with severe issues. These children fall just on border line with lot of learning potentials. These children are mere slow learners, their weaknesses can be improved with consistent effort and providing more attention while teaching any skill. Unfortunately this task cannot be achieved in any mainstream school since the staffs over there is neither trained for dealing with their problems nor can manage it due to large number of students in a class. In view of these facts I feel the need to know and understand learning disabilities, their causes, symptoms, signs and factors.

Learning: Learning is defined as "Learning is the acquisition of new behavior or strengthening or weakening of old behavior as a result of experience". ⁽³⁾ Learning is the acquisition of habits, knowledge and attitudes. It involves new ways of doing things, and it operates in an individual's attempt to overcome obstacles or to adjust to new situations."⁽⁴⁾

Definition of Learning disability

According to Learning Disabilities Association of Canada: "Learning Disabilities refer to a number of disorders which may affect the acquisition, organization, retention, understanding or use of verbal or nonverbal information. These disorders affect learning in individuals who otherwise demonstrate at least average abilities essential for thinking and/or reasoning. As such, learning disabilities are distinct from global intellectual deficiency."

Types of learning disabilities: According to learning disability association of America, filling learning disabilities exit in a child.

Auditory Processing Disorder: Adversely affects how sound that ravels unimpeded through the ear is proceed interpreted by the brain. Also as Cereal processing individuals with Auditory Processing Disorder (APD) don't recognize subtitle in between sounds in words even when the sound is loud and enough to be hear. They can also find it difficult to tell where sounds are coming from, to make sense order of sounds, or to block out competing background noise.

Signs and Symptoms

- Has difficulty processing and remembering languagerelated tasks but may have trouble interpreting or recalling non-verbal environmental sounds, music, etc.
- May process thoughts and ideas slowly and have difficulty explaining them
- Misspells and mispronounces similar-sounding words or omits syllables; confuses similar-sounding words (celery/salary; belt/built; three/free; jab/job; bash/batch)
- May be confused by figurative language (metaphor, similes) or misunderstand puns and jokes; interprets words too literally
- Often is distracted by background sounds/noises
- Finds it difficult to stay focused on or remember a verbal presentation or lecture
- May misinterpret or have difficulty remembering oral directions; difficulty following directions in a series

⁽⁴⁾Crow LD and Crow A- Educational Psychology

⁽²⁾Malik, S. (1988). Situation of physically Disable in Pakistan. Report of DPI Asia/ Pecific. Leadership training seminar for women with disability Islamabad. November 1989 Islamabad

⁽³⁾ Hergenhahn BR and Olson Matthew H: An introduction to Theories of Learning, Prentice Hall of India, N. Delhi

- Has difficulty comprehending complex sentence structure or rapid speech
- "Ignores" people, especially if engrossed Says "What?" a lot, even when has heard much of what was said

Dyslexia: This disease affects reading and related languagebased processing skills. The severity of this specific learning disability can differ in each individual but can affect reading fluency; decoding, reading comprehension, recall, writing, spelling, and sometimes speech and can exist along with other related disorders. Dyslexia is sometimes referred to as a

Language-Based Learning Disability

Signs and Symptoms

- Reads slowly and painfully
- Experience decoding error especially with 'the Order of letters
- Show wide disparity between listening comprehension and reading comprehension of some text
- Has trouble spelling
- May difficulty with handwriting
- Exhibits difficulty in recalling known words
- Has difficulty with written language.
- May experience difficulty with math computations
- Decoding real is better than nonsense words
- Substitutes one small sight word for another: a, I, he, the, there, was

Language Processing Disorder: Affects attaching meaning to sound groups that form words, sentences and stories. A specific type of Auditory Processing Disorder (APD). While an APD affects the interpretation of all sounds coming into the brain (e.g., processing sound in noisy backgrounds or the sequence of sounds or where they come from), a Language Processing Disorder (LPD) relates only to the processing of language. LPD can affect expressive language (what you say) and/or receptive language (how you understand what others say).

Signs and Symptoms

- Has difficulty gaining meaning from spoken language
- Demonstrates poor written output
- Exhibits poor reading comprehension
- Shows difficulty expressing thoughts in verbal form
- Has difficulty labeling objects or recognizing labels
- Is often frustrated by having a lot to say and no way to say it
- Feels that words are "right on the tip of my tongue"
- Can describe an object and draw it, but can't think of the word for it
- May be depressed or having feelings of sadness
- Has difficulty getting jokes

Non-Verbal Learning Disabilities

Has trouble interpreting nonverbal cues like facial expressions or body language and may have poor coordination. Non-Verbal Learning Disability (NVD or NVLD), is a disorder which is usually characterized by a significant discrepancy between higher verbal skills and weaker motor, visual-spatial and social skills

Signs and Symptoms

- Has trouble recognizing nonverbal cues such as facial expression or body language
- Shows poor psycho-motor coordination; clumsy; seems to be constantly "getting in the way," bumping into people and objects
- Using fine motor skills a challenge: tying shoes, writing, using scissors
- Needs to verbally label everything that happens to comprehend circumstances, spatial orientation, directional concepts and coordination; often lost or tardy
- Has difficulty coping with changes in routing and transitions
- Holds pencil too tightly; often breaks pencil point/crayons
- Struggles to cut or paste
- Misaligns letters; may have messy papers, which can include letters colliding, irregular spacing, letters not on line

Attention Deficit Hyper Activity Disorder (ADHD)

Affects focus, attention and behaviour and can make learning challenging. A disorder that includes difficulties in staying focused and paying attention and difficulty in controlling behavior and hyperactivity. Although ADHD is not considered a learning disability, research indicates that from 30-50 percent of children with ADHD also have a specific learning disability, and that the two conditions can interact to make learning extremely challenging. Attention Deficit Hyperactivity Disorder is a condition that becomes apparent in some children in the preschool and early school years. It is hard for these children to control their behavior and/or pay attention.

Dyspraxia: Problems with movement, coordination, language and speech. A disorder that is characterized by difficulty in muscle control, which causes problems with movement and coordination. language and speech, and can affect learning. Although not a learning disability, Dyspraxia often exists along with Dyslexia, Dyscalculia or ADHD.

Signs and Symptoms

- Exhibits poor balance; may appear clumsy; may frequently stumble
- Shows difficulty with motor planning
- Demonstrates inability to coordinate both sides of the body
- Has poor hand-eye coordination
- Exhibits weakness in the ability to organize self and belongings
- Shows possible sensitivity to touch
- May be distressed by loud noises or constant noises like the ticking of a clock or someone tapping a pencil
- May break things or choose toys that do not require skilled manipulation
- Has difficulty with fine motor tasks such as coloring between the lines, putting
- puzzles together; cutting accurately or pasting neatly
- Irritated by scratchy, rough, tight or heavy clothing

Executive Functioning: Affects, planning, organization, strategizing, attention to details and managing time and space.

Inefficiency in the cognitive management systems of the brain that affects a variety of neuropsychological processes such as planning, organization, strategizing, paying attention to and remembering details, and managing time and space. Although not a learning disability, different patterns of weakness in executive functioning are almost always seen in the learning profiles of individuals who have specific learning disabilities or ADHD.

Learning disabilities in pakistan: Last few years have been phenomenal in improving the status of Pediatric health in Pakistan. An imperative avenue which has remained neglected, however, is the Pediatric Mental Health. Though country wide surveys are not available in literature, estimates gauge the prevalence of childhood mental disabilities in Pakistan to around 17% (8% mental retardation and 9% behavioral, emotional and pervasive developmental disturbances). 1,2 Early identification and intervention has been implicated to improve clinical and social outcomes in most of these disorders.3,4 The multidimensional manifestations of these disorders make them liable to be picked in three different settings i.e., home, school and primary health care setting.(reference; journal of Pakistan medical association). There are different learning disabilities existing in our society . 1f these learning difficulties persist in the earlier age it will hinder the success in later career. It is diagnosed as specific learning difficulties, which is defined as: An IO score greater than 80 and deficits in at least one area of academic achievement (reading, spelling, and mathematics) associated with specific cognitive impairments such as short term memory problems, poor auditory discrimination ability, Visioperceptual problems, and the like. It is one of the major problems of the exceptional children especially with learning disabilities in Pakistan that they are not properly diagnosed. They are not even treated according to their specific difficulties in specific areas. The children with specific learning difficulties cannot perform well in verbal tasks in accordance with their nonverbal ability tasks. They perform general ability tasks in a good manner. But their performance in academic assignments is not excellent. The teacher perceives their problems, as they are causing trouble in doing assignments. Teachers are assessing their performance without knowing their real deficiencies in verbal and nonverbal areas of achievement. They treat and even punish them harshly. Ultimately their actual problems have been neglected. It is due to the lack of awareness of the real problem of the children. The child is with the problem in the interpretation of the words after seeing it from the board, notebook or from any other source.

Environmental factors: The role the environment plays in causing learning disabilities is not excluded. Extremely poor parenting or teaching can put learners at risk to develop learning difficulties (Hallahan *et al.*, 1999). Socio-economic circumstances and the quality of schooling may have an impact on a learner's ability to learn (Fletcher *et al.*, 2007:3). Specifically in South Africa, the Education White Paper 6, Department of Education (2001) considers a number of environmental factors which can contribute to learning disabilities, including inaccessible schools, the curriculum, learning materials and also the language in which a learner is taught.

Medical factors: Medical factors that may play a role in the development of learning disabilities include premature birth, diabetes, meningitis, cardiac arrest and pediatrics aids (Hallahan *et al.*, 1999). Alcohol and drug abuse during pregnancy may be contributing factors, as well as lead poisoning and a low birth weight (Tuttle and Paquette, 1993). It is possible that if any of these factors are a cause of a learner's learning disability, parents may feel more responsible, thereby causing more guilt. This would have to be explored in the support given to parents whose child has been diagnosed with a learning disability.

Intelligence as a factor: According to Siegel (2003) no reliable evidence can be found indicating that IQ level plays a causative role in the development of reading skills. On the contrary, evidence from a number of sources indicates that reading is not strongly related to intelligence, where intelligence is measured by IQ scores. IQ scores account for only about 25 percent of how well people do in school, and even less for their success in adult life (Hultquist, 2006). Other factors in an infant's environment may play a role as well. These can include poor nutrition and exposure to toxins such as lead in water or paint. In addition, children who do not receive the support necessary to promote their intellectual development early on may show signs of learning disabilities once they start school.

MATERIALS AND METHODS

In this present study "The role of electronic media to improve the quality of education at university level" the researcher has selected the closed form of questionnaire, as it called foe short, restricted checked responses. It requires answers only in "YES", "NO". It is easy to fill, take less time, is objective and is easy to tabulated and make analysis. The questionnaire is used in this research.10 students from each different departments of University of Karachi were selected through random sampling technique. In this way the sampling of this study was based on 100 students in total. For this purpose, a questionnaire was prepared which covered the aspects of the problem under study. To avoid ambiguity, the questions were constructed in simple and clear words. The students were required to tick mark the relevant one. It was finalized after a detailed discussion, consideration and re-arrangement and after checking its relevancy to the topic.

RESULTS AND DISCUSSION

Above table shows that 66% respondents were agreed on the fact parents are able to identify their children's learning disability while 34% were disagreed. 75% respondents were agreed on the fact that the children with learning disability at primary level need extra care while 25% was disagreed. 60% respondents were agreed on the fact that poor instructions are also the cause of learning disability while 40% was disagreed. Hence null hypothesis is rejected and it is concluded inappropriate instruction at primary level causes learning disabilities. Above table shows that 80% respondents were agreed on the fact that the children with learning disability show harsh behavior with peer while 20% were disagreed. 85% respondents were agreed on the fact that think students with learning disability always show negative behavior while 15% was disagreed. 67% respondents were agreed on the fact learning disable children have less power of tolerance while

33% was disagreed. Hence null hypothesis is rejected and it is concluded that electronic media help a lot during study and it is also conclude that learning disabilities have the result of low teacher in order to clarify their miss concepts and contradiction if they have.

Table 1. Inappropriate Instruction At Primary Level May Cause Learning Disabilities

ITEM NO	STATEMENT	Yes	No	Total
1	Do you think parents are able to identify their children's learning disability?	66 66%	34 34%	100 100%
2	Do you think children with learning disability at primary level need extra care?	75 75%	25 25%	100 100%
3	Do you thinkpoor instructions are also the cause of learning disability?	60 60%	40 40%	100 100%

Table 2. Learning disabilities may be the result of low level of tolerance such as negative and harsh behavior with peer group

ITEM NO	STATEMENT	Yes	No	Total
1	Do you think children with learning disability show harsh behavior with peer?	80 80%	20 20%	100 100%
2	Do you think students with learning disability always show negative behavior?	85 85%	15 15%	100 100%
3	Do you think learning disable children have less power of tolerance?	67 67%	33 33%	100 100%

Table 3.	Learning	Level May	Cause Low	Level Of Intelligences

ITEM NO	STATEMENT	Yes	No	Total
1	Do you think students with learning disability have low intelligence?	55 55%	45 45%	100 100%
2	Do you think students with learning disability cannot get high rank in education?	75 75%	25 25%	100 100%
3	Do you think students with learning disability makes a child mentally weak?	74 74%	26 26%	100 100%

level of tolerance such as negative and harsh behavior with peer group. Above table shows that 55% respondents were agreed on the fact students with learning disability have low intelligence while 45% respondents were disagreed. 75% respondents were agreed on the fact that students with learning disability cannot get high rank in education while 25% was disagreed. 74% respondents were agreed on the fact that students with learning disability make a child mentally weak while 26% respondents were disagreed. Hence null hypothesis is rejected and it is concluded that learning level causes low level of intelligences.

Conclusion and Recommendations

The ability to learn is the innate quality of human being bestowed by Allah for the best survival of the society. The success is how efficiently on can learn to cope with in and difficulties of life at any stage and point in life. We concluded that lack of proper teaching environment; behaviours of teachers, students, student's personal capacity (i.e. cognitive and behavioural/emotional deficits) are the core problems of the primary education in our schools. The proper support system is lacking as children faces difficulty regarding learning in spite of knowing the actual causal factor. There must be a trained psychologist appointed in the school to help the children in any case of difficulty (behavioural, emotional or intellectual); all these difficulties play significant role in developing any kind of disability.

Further, being a child it's a great challenge when he/she is going to compare his/her performance with other children in same circumstances. This is the responsibilities of educates and policy makers to scrutinized children having learning disability, devised a less challenging course plan for them, guide teachers to deal with children having disabilities. Burden must be equally shared by the society and government to tackle such general issues to be a more civilized society. Economic level of the family also matter a lot in building emotional problem that consequently become a cause of learning disability in children. Class difference within the same class can also create a sense of negativity in the students, which turn into shyness and student face difficulty to ask for help from the

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