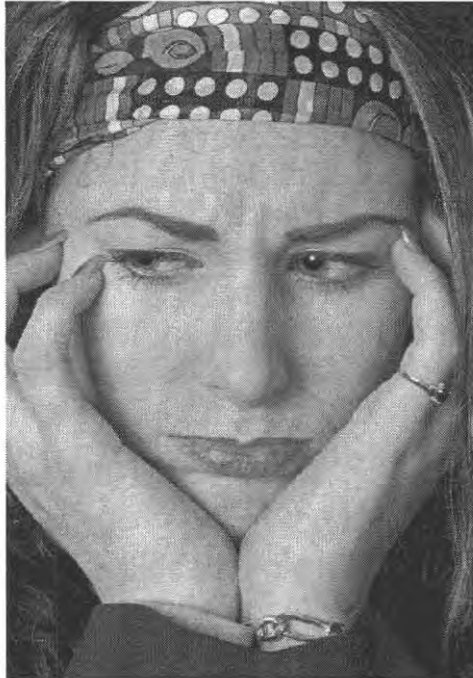


SECTION 3:
LEARNING DISABILITIES &
SOCIAL and EMOTIONAL
HEALTH





SOCIAL & EMOTIONAL HEALTH

Many individuals with LOs also have a disability in the area of social skills, which may be a greater barrier than their academic challenges. Social skills are crucial in life, but because they do not come naturally for many with LDs and ADHD, they must be taught. Basic manners and skills like 'reading' situations, body language, and facial expressions become new areas of learning. Having an ability to understand innuendos/sarcasm/exaggerations, to listen or take directions must be developed. Personal controls for anger, expression of feelings, and thinking before acting must be practiced by those with LDs. Learning to accept consequences or deal with peer pressure and problem-solve are also on the learning agenda.

Some individuals with LDs can be impulsive. They may make inappropriate social comments or exhibit behaviour that others find irritating or unacceptable, and may not realize others are upset with them. As a result, they may have few friends and can't figure out why, or know how to make and keep them. Peer pressure is a concern as they want to be accepted, but often choose the wrong peer models. Seeming to lack common sense or 'street smarts,' they can be incredibly naive, unable to understand consequences of their actions. "Adults with an LD and/or ADHD often exhibit an inability to stick to simple schedules, repeatedly forget things, lose or leave possessions, and generally seem 'personally disorganized'"(Bender 2004).

For others who may not have difficulty in these areas but experience constant academic failure, the experience can increase anxiety and depression (PACFOLO, 2007) Self-esteem is a major concern for those with learning issues as they are 'success deprived'. There is a higher than normal incidence of school failure, substance abuse, addiction, suicidal thoughts, and unemployment within the LD population.

Teachers need to be aware of possible emotional issues when dealing with adults with LDs, as many have faced rejection, pain, or numerous obstacles from childhood. Intervention and personal counseling, social skills training, and help with personal management skills (e.g. time) may need to be included.

It is not enough to identify a learning disability. We must do a better job of counselling on personal learning styles and teaching social skills in different environments. Once students realize that they are bright, but have a unique learning style, they can learn how to cope in different situations.

"Studies have shown succeeding with a learning disability correlates most strongly with self-awareness and a positive attitude---not with grades or socioeconomic status. Success outcomes depend on self-awareness and reframing your learning disability in a positive way" (Howard Eaton, Globe and Mail, May 2006).

A positive, respectful learning environment is critical to reducing emotional problems. Effective intervention needs patience and compassion. Instruction offered at a student's level reduces resentment and fear of failure. If the curriculum is not relevant or seen as a waste of time, students are likely to shut down from boredom or frustration. Expectations that are too high or too low for a student's ability can lead to loss in motivation. Teachers must adjust expectations to fit a student's level of ability so that improvement is always possible and challenging. If the task is not accomplished the student's self-worth could be affected.

Programs must strive to foster independence and choice. Students need freedom to demonstrate their learning style preferences and interests. Positive reinforcement and routine structure needs to be in place, so they will have a better chance at success if managed consistently. Knowing the rules of the 'game' is key. Inconsistent routine is one factor that is almost certain to increase a student's frustration. Remember, if they are identified as having an LO, they are entitled by law to certain accommodations in school, university, and in the workplace.

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WEB RESOURCES:

www.cmha.ca Canadian Mental Health Association

www.nidline.com National Institute of Mental Health (US source)

Section III Readings- LD & Social and Emotional Health

[Social and Emotional Problems Related to Learning Disabilities \(LDAC\)](#)

[Positive Self Esteem: A Roadmap for Success \(LDAC\)](#)

[Success Attributes across the Life Span \(LDAC\)](#)



Social and Emotional Problems Related to Learning Disabilities

Dealing with social and emotional challenges is part of every day, but it can be particularly challenging for any individual with learning disabilities (LD). Learning disabilities can affect many skills including listening, thinking, speaking, reading, writing, mathematics and reasoning – skills that individuals must use every day to fulfill their roles as students, family members, employees and citizens. Learning disabilities may occur with, and be complicated by problems in social skills. Children with learning disabilities grow up to become adults with learning disabilities.

The consequences of their learning disabilities, however, changes. While the setting shifts from school to work and community, the implications are equally significant. The child with learning disabilities may rely on family and school for support. The adult with learning disability often struggles to find a support system and this puts many at increased risk of mental health problems. If not supported, these may lead to more severe mental illnesses.

As a consequence of struggling day in and day out at school, many individuals with LD perceive themselves as less competent. Professionals need to recognize the logical consequence of increased feelings of helplessness, hopelessness, lower self-esteem and lack of assertive skills that arise as the result of living day in and day out with a learning disability. In particular for adults who were inadequately or not identified and even less likely to have been treated.

Anxiety is the most frequent emotional symptom reported by individuals with learning disabilities. Individual with LDs become fearful because of their constant frustration and confusion in school. These feelings are exacerbated by the inconsistencies of learning disabilities. Because they cannot anticipate failure, entering new situations provokes extreme levels of anxiety ..

Anxiety causes human beings to avoid whatever frightens them. The individual with LD is no exception. However, many teachers, parents and spouse misinterpret this avoidance behavior as laziness. In fact, the individual with LD's hesitancy to participate in activities such as homework or work related activities is related more to anxiety and confusion than to apathy.

Frustration and anger

Many of the problems caused by learning disabilities occur out of frustration with school or social situations. Researchers have frequently observed that frustration produces anger. This can be clearly seen in many individual with LDs.

The obvious target of the individual with LD's anger would be schools and teachers. However, it is also common for the individual with LD to vent his anger on his parents. Mothers are particularly likely to feel the individual with LD's wrath. Often, the child sits on his anger during school to the point of being extremely passive. However, once he is in the safe environment of home, these very powerful feelings erupt and are often directed toward the mother. Ironically, it is the child's trust of the mother that allows him to vent his anger. However, this becomes very frustrating and confusing to the parent who is desperately trying to help her child.

This anger is particularly evident in adolescents. By its very nature, learning disabilities causes children to become more dependent on the adults in their environment. They need extra tutoring and help with their homework.

As youngsters reach adolescence, society expects them to become independent. The tension between the expectation of independence and the child's learned dependence causes great internal conflicts. The adolescent individual with LD uses his anger to break away from those people on which he feels so dependent.

Because of these factors, it may be difficult for parents to help their teenage individual with LD. Instead, peer tutoring or a concerned young adult may be better able to intervene and help the child. The individual with LD's self-esteem appears to be extremely vulnerable to frustration and anxiety. Research shows that if children succeed in school, they will develop positive feelings about themselves and believe that they can succeed in life.

If children meet failure and frustration, they learn that they are inferior to others, and that their efforts make very little difference. Instead of feeling powerful and productive, they learn that their environment acts upon them. They feel powerless and incompetent.

Researchers have learned that when typical learners succeed, they credit their own efforts for their success. When they fail, they tell themselves to try harder. However, when the individual with LD succeeds, he is likely to attribute his success to luck. When he fails, he simply sees himself as stupid.

Research also suggests that these feelings of inferiority develop by the age of ten. After this age, it becomes extremely difficult to help the child develop a positive self-image. This is a powerful argument for early intervention.

Depression

Depression is also a frequent complication in learning disabilities and individuals with LD are at higher risk for intense feelings of sorrow and pain. Perhaps because of their low self-esteem, individual with LDs afraid to turn their anger toward their environment, instead turn it toward themselves.

However, depressed children and adolescents often have different symptoms than do depressed adults. The depressed child is unlikely to be lethargic or to talk about feeling sad. Instead, he or she may become more active or misbehave to cover up the painful feelings. In the case of masked depression, the child may not seem obviously unhappy. However, both children and adults who are depressed tend to have three similar characteristics:

- First, they tend to have negative thoughts about themselves, i.e., a negative self-image.
- Second, they tend to view the world negatively. They are less likely to enjoy the positive experiences in their life. This makes it difficult for them to have fun.
- Finally, most depressed youngsters have great trouble imagining anything positive about the future. The depressed individual with LD not only experiences great pain in his present experiences, but also foresees a life of continuing failure.

Family Impact

Like any handicapping condition, learning disabilities has a tremendous impact on the child's family. However, because learning disabilities is an invisible handicap, these effects are often overlooked. Learning disabilities affects the family in a variety of ways. One of the most obvious is sibling rivalry. Non LD children often feel jealous of the Sibling with LD, who gets the majority of the parents' attention, time, and money. Ironically, the child with LD does not want this attention. This increases the chances that he or she will act negatively against the achieving children in the family.

Specific learning disabilities can run in families. This means that one or both of the child's parents may have had similar school problems. When faced with a child who is having school problems, individual with LD parents can react in one of two ways. They may deny the existence of learning disabilities and believe if the child would just buckle down, he or she could succeed. Or, the parents may relive their failures and frustrations through their child's school experience. This brings back powerful and terrifying emotions, which can interfere with the adult's parenting skills.

Helping individual with LD feel better about themselves and deal effectively with their feelings is a complex task. First, teachers must understand the cognitive and affective problems caused by learning disabilities. Then they must design strategies that will help the individual with LD, like every other child, to find joy and success in academics and personal relationships. Second, counselors and LD advocates must:

1. Educate yourself about learning disabilities and their impact on day to day living.
2. Recognize and accept that children with a learning disability grow up to be adults with a learning disability.
- 3 Listen carefully to what your clients are saying
4. Not assume that all individuals with histories of learning disabilities will experience emotional problems but recognize that all will be affected to some extent.
5. Understand that adults with learning disabilities can and do experience more life and vocational problems than others.
6. Help your client to find out what their strengths are. Many individuals with LD use other strengths to compensate for their disabilities and develop a variety of coping strategies, allowing them to function in everyday life.
7. Listen carefully when taking a history. An undiagnosed learning disability may, in some individuals, represent a Significant variable to explain the course of reported emotional problems.
8. Not be afraid to act. Be prepared to put in some time into the process of obtaining a diagnosis whether it be that of a learning disability or of a mental illness.
9. Offer support and empathy.
10. Provide counseling to help the individual accept and understand how their learning disability affects their life and teach strategies and techniques to work around their disability.

With increased community acceptance and recognition that learning disability are lifelong, medical, mental health and educational professionals are going to find themselves supporting many more individuals with learning disabilities.

Source.' Adapted with permission from Fact Sheet # 49 International Dyslexia Association and from Dr. Sam Goldstein, July 2000 - SamGoldstein.com monthly article.



Positive Self Esteem: A Roadmap for success

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For individuals with and without learning disabilities (LD), self-esteem is a powerful predictor of success. Positive self-esteem is as important to success in school and on the job as the mastery of individual skills. Learning disabilities, however, often pose formidable hurdles to positive self-esteem, and in turn contribute to a hard-to-break cycle of self-doubt, frustration and failure which in turn can lead to mental health issues and to possible severe mental illnesses.

What is Self-Esteem?

Self-esteem can be described as how we view ourselves in the context of our surroundings. It is shaped by how well we get along with peers and family members, and by how we judge ourselves in comparison to those around us. Whether at home, school or the work place, self-esteem also is shaped by how well we understand and respond to ever-changing interpersonal demands. But it is precisely this area – the area of interpersonal relationships - in which individuals with LD may have the greatest difficulty, thus contributing to feelings of inadequacy and low self-esteem.

Not all people with LD have problems with social competence and self-esteem, but many do, and struggling daily with the challenges posed by a learning disability can erode enthusiasm and confidence. Knowing one's assets and liabilities and feeling good about one's self can be invaluable in negotiating the sometimes tumultuous path to achievement in school, success in the workplace, and acceptance at home and in the community at large.

How Does Social Competence Affect Self-Esteem?

Building social competence is an important step in becoming a self-reliant and confident person. Socially competent people know how to easily move from person to person, or group to group, seemingly relaxed and at ease, regardless of whether they are talking or listening

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They also know how to:

- Initiate and maintain positive relationships with peers and others
- Interpret social situations, judging how to interact
- Interact without drawing negative attention to themselves
- Sustain attention on the speaker
- Contribute to conversations
- Control their impulses to draw attention to themselves, even in well-intended ways.

It is these traits that often pose the greatest challenges to individuals with LD.

What Are the Threats to Self-Esteem for Individuals With LD?

Research has shown that being diagnosed as having specific LD does not, in and of itself, negatively impact self-esteem. However, there are a number of characteristics, frequently observed in people with LD that contribute to feelings of low self-worth.

Communication style and social awareness:

- May unintentionally appear to be overly egocentric and disinterested in the opinions of other speakers (when nothing could be farther from the truth)
- Has difficulty judging when it is his or her turn to participate in a conversation
- May misinterpret others' feelings
- Unaware of when his or her behaviors are bothersome or annoying
- May have problems with visual-spatial planning and self-regulation, resulting in difficulties in judgment: they may misjudge how close to stand to someone during conversation, how to assume and maintain a relaxed posture or when it might be appropriate to touch.

Self knowledge:

- Is unsure how to understand his or her personal strengths and weaknesses, or how to explain them to others
- Has trouble evaluating and reflecting on his or her behavior in social interactions

Language

- Has limited vocabulary, or has difficulty retrieving the right words for the situation
- Has trouble with topic selection
- Talks around a topic, providing extraneous, less critical information in response to a question
- When asked to expand on something, is more likely to repeat rather than clarify his or her point
- In conversation, is more likely than peers to rely on gestures
- Is unsure when to end a conversation
- Slow to process information and to be able to follow conversation in a big group.

Self-perceived social status

- Has difficulty knowing how he or she fits in to a peer group, which often results in "hanging back," being passive or "sticking out" in a crowd or trying too hard to belong
- Has limited success getting noticed in positive ways within a peer group
- Is perceived as less popular and therefore more frequently rejected or ignored by peers – sometimes resulting in further self-imposed isolation.

Self-perceived ability to effect change

- Believes that outcomes are controlled by external influences (luck, chance, fate) rather than as a result of his or her own efforts
- Assumes a posture of "learned helplessness:" believes that because he or she struggled with something in the past, there is little they can do to change a negative outcome in the future, so they stop trying and hope for the best.

What Role Do Others' Expectations Play on Self-Esteem?

Unfortunately, individuals with LD are commonly confronted with low expectations from others. They are frequently, though not intentionally, the target of spoken and unspoken messages of disappointment from peers, parents, supervisors, etc. Others' low expectations may influence the expectations individuals with LD have of themselves, thereby serving to erode self-esteem.

What Are Some Strategies for Helping Individuals With LD Build Self-Esteem and Confidence?

In their book, "The Power of Resilience: Achieving Balance, Confidence and Personal Strength in Your Life," Dr. Robert Brooks and Dr. Sam Goldstein offer parents guideposts to help children and adolescents develop the strength and skills they need to cope successfully with the challenges they face. Here are some key findings, adapted from the book that parents can do to help:

- Be empathetic. See the world through your children's eyes.
- Communicate with respect. Don't interrupt or put them down; answer their questions.
- Give undivided attention. Children feel loved when we spend on-an-one time with them.
- Accept and love children for who they are. This will allow them to feel more secure in reaching out to others and learning how to solve problems.
- Give children a chance to contribute. This communicates your faith in their abilities and gives them a sense of responsibility.
- Treat mistakes as learning experiences. Children whose parents overreact to mistakes tend to avoid taking risks, then end up blaming others for their problems.
- Emphasize their strengths. A sense of accomplishment and pride give children the confidence to persevere when they face challenges.
- Let them solve problems and make decisions. Avoid telling children what to do; encourage them to come up with solutions to problems.
- Discipline to teach. Do not discipline in a way that intimidates or humiliates your child.

The Bottom Line

Throughout one's life, positive self-esteem and confidence are critical, and often elusive, ingredients for happiness and success. Individuals with LD are especially vulnerable to attacks on their feelings of self-worth; but with help and support, they can build the self-esteem it takes to achieve future success in any arena.

Additional resources:

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Success Attributes Across the Life Span

Children with learning disabilities grow up to be adults with learning disabilities (LD). Many of the difficulties experienced in childhood continue into and through adulthood. In spite of these challenges, some individuals with LD are able to lead successful lives while others are barely able to 'keep their heads above water' emotionally, socially or financially.

Why, despite similar backgrounds and learning disabilities, does one individual end up with a rewarding career, longterm friendships, while another, experiences a life of loneliness, isolation and financial stress?

Research has shown that a set of personal characteristics, attitudes, and behaviours help lead persons with learning disabilities to successful life outcomes. Successful persons with learning disabilities are much more likely to have these characteristics than unsuccessful individuals.

What is success?

According to the Frostig Centre in California, the agency that conducted over 20 years of research in this area, success means different things to different people, at different times in a person's life. However, there seems to be a number of things that most people include when they think of success. These include good friends, positive family relations, being loved, self approval, job satisfaction, physical and mental health, financial comfort, spiritual contentment, and an overall sense of meaning in one's life.

The Frostig Centre has identified the following 'success attributes' and offers recommendations for how to help children develop them. These success attributes include: self-awareness, the presence and use of effective support systems, emotional coping strategies, pro-activity, goalsetting, perseverance.

Self Awareness

Successful people with learning disabilities understand their learning disabilities, are aware of the impact of their disabilities, including academic problems like reading and writing, academic-related problems such as attentional or organizational difficulties and non-academic difficulties such as motor deficits, social skills, or emotional/behaviour problems. They are open and specific about their difficulties and understand how they affect their lives and are not afraid to use strategies and coping skills. They are able to see their LD as only one aspect of themselves. They recognize their talents along with accepting their limitations. In addition they are also able to find jobs that provide the best 'fit' or 'match' with their abilities.

Presence and Use of Effective Support Systems

Guidance, support and encouragement come from family members, friends, mentors, teachers, therapists and co-workers. As successful individuals move into adulthood, they attempt to reduce their dependence on others. However, they take the initiative and seek the support of others rather than wait for someone to come to their aid. They are willing to accept help when it is offered. In many instances, they are able to switch roles with people who had provided them with support in the past, finding themselves assisting and encouraging those who once helped them.

Emotional Coping Strategies

The daily struggle of living with learning disabilities and coping with its symptoms often result in individuals experiencing stress in their lives. In some cases, the stress can be so significant that it can lead to psychological difficulties such as anxiety and depression. However, successful individuals appear to have developed effective means of reducing and coping with stress, frustration, and the emotional aspects of their learning disabilities. Researchers have identified three components of successful emotional coping:

1. Awareness of the situations that trigger stress;
2. Recognition of developing stress;
3. Availability/access to and use of coping strategies.

These coping strategies can include:

- seeking counseling,
- asking others to do unmanageable tasks on the job,
- finding a mentor
- changing activities periodically so stress does not build up,
- expressing feelings,
- asserting oneself,
- utilizing peer support and encouragement,
- learning to ask for help,
- planning ahead for difficult transition,
- keeping away from negative or critical people,
- working out differences with friends, family and/or co-workers,
- using meditation/yoga,
- doing physical activities or exercises.

Pro-Activity

Successful adults with learning disabilities are generally actively engaged in the world around them. They believe that they have the power to control their own destiny and affect the outcome of their lives. They often step into leadership roles at work, in the community, and in social and family settings. They demonstrate creative self advocacy and initiative and have a willingness to consult with others while making decisions. When acting upon these decisions they also assume responsibility for their actions and resulting outcomes. They generally take responsibility for the outcome and do not blame others when things don't work out.

Goal Setting

Successful individuals set goals that are specific, realistic and attainable yet flexible so that they can be changed to adjust to specific circumstances and include a strategy to reach their goals. They have an understanding of the step by step process for obtaining their goals.

Perseverance

Many persons with learning disabilities show great perseverance and keep pursuing their chosen path despite difficulties and may be heard saying 'I am not a quitter' or 'I never give up'. However, successful individuals demonstrate an additional important ability - knowing when to quit. They may change the way they go about achieving their goal, thereby improving their chances of success. Often they try several strategies until they find one that works. Successful persons with learning disabilities appear to learn from their hardships and mistakes which they found to be necessary for growth.

How Can A Child Develop Success Attributes?

Fostering these six success attributes is one of the ways that parents can help their children with learning disabilities grow up to be more successful throughout their lives. These attitudes, behaviours and characteristics require exercise, practice and review just like any other skill children learn. At different life stages, new developmentally appropriate challenges may require parents to recycle and revisit with their children the success attributes they had worked on earlier.

To date no research tells us exactly how to teach these attributes. However, research does suggest a number of key components and areas that need to be considered in fostering success attributes at a young age.

Unfortunately, we concentrate our efforts primarily on the academic/educational areas, paying little attention to the development of these attributes in promoting positive life outcomes in persons with learning disabilities. **If** we remind ourselves that research has shown that learning disabilities persist into adulthood, and that children with learning disabilities must function in settings beyond school, then it is reasonable to direct greater efforts toward fostering the development of these success attributes, at least to the same degree that we strive to improve academic skills. Although the extent to which these attributes can be taught to, or learned by students with learning disabilities, is not completely clear, we do know that they are critical to attaining life success.

To obtain a free copy of '*Life Success for Children with Learning Disabilities: A Parent Guide*' please visit the Frostig Centre website at <http://www.ldsucceess.org/> The guide includes checklists and suggested activities to foster successful attributes **in** children with learning disabilities. The specific approach to developing these attributes is dependent upon the age, abilities, experience, interests and living environment of a given child.

Also available is a guide for teachers designed to help teachers of students with LD understand the six success attributes, provides seven guiding principles for fostering the success attributes in students and offers checklists to help determine the presence or absence of the success attributes in students. Activities and resources to assist in developing success attributes are also offered.

Adapted with permission from the Frostig Centre www.frostig.org in California, a non-profit organization that specializes in working with children who have learning disabilities in the area of research, teacher training, direct instructional services.



**LEARNING DISABILITIES
& SOCIAL and EMOTIONAL
HEALTH**

**Dr. Bill Morrison
and Patti Kirby**

Learning Disabilities
&
Mental Health

**Health and Education Research Group
University of New Brunswick**

*Dr. Bill Norrisnn
Patti Kirby
Michelle Bourgoin*

session Overview

- Mental Health... Mental Health concerns
- Emotional-Behavioural Disorders: Key Considerations
- Case Study #1: A Parent's Perspective
- Case Study #2: A Practitioner's Perspective
- Implications for Intervention and Support
- Mental Fitness

Mental Health is...

- Your sanity ...are you stable...how well you are doing in your thoughts (16)
- Whether you are sick inside...not just your body ...how you feel in your mind (12)

Mental Health is...

- A state of emotional and psychological well-being in which an individual is able to use his or her cognitive and emotional capabilities, function in society and meet the ordinary demands of everyday life.

Mental Health Concerns ...

What do mental health concerns look like?

- You can tell by their face...you can tell also how they act (12)
- At school. ... they (other youth) can't concentrate, stressed out, ...not always connected with others ...may lack motivation (16)

Mental Health Concerns ...

- A *mental disorder* is conceptualized as a clinically significant behavioral or psychological syndrome or pattern that occurs in an individual that is associated with distress or impairment in one or more important areas of functioning.

Learning Disorders (DSM IV)

Associated Features ...

- Low self esteem
- School drop out
- Difficulties in social adjustment (work/school)

(10-25%)

- Conduct Disorder
- Oppositional Defiant Disorder
- Attention-Deficit / Hyperactivity Disorder
- Major Depressive Disorder

Emotional Behavioral Disorders

Externalizing features represent extroversive behaviours including aggression, overactivity, impulse control problems and opposition. (e.g. ADHD, ODD, Conduct)

Internalizing features represent problems of an introverted nature, i.e., problems with self that include worries, fears, somatic complaints, and social withdrawal. (e.g. Anxiety, Depression)

Emotional/Behavioural Conditions ...

- **Often persist over time..** Many definitions of emotional/behavioural disturbance stipulate that that an individual's condition be present over a long period of time (chronicity) and to a marked degree (severity, frequency) .
- **Impact functioning and adaptation** The goal of such stipulation is to exclude temporary or moderate behaviour problems that *may* be reactions to situational stress Of normal developmental difficulties

Emotional/Behavioural Condition

May intensify ...

- During periods of transition
- When significant environmental stress is experienced
- When minimal interpersonal support is perceived or experienced
- When learning accommodations are not provided

Emotional / Behavioural Conditions...

- May **co-exist** with each other and be interrelated.
- Individuals with more than one **co-existing disorder** are more likely to have longer lasting and more severe problems than those with only one diagnosed disorder.

A Parent's Perspective

- Comorbidity
- Challenges
- Lessons Learned

A Practitioner's Perspective

- Comorbidity
- Challenges
- Lessons Learned

Implications for Intervention/Support

- **Early identification and intervention contribute to increased opportunity for successful adaptation, personal and social growth.**
- **Accommodations should address learning needs and areas of emotional and behavioral vulnerability.**
- **Advanced planning and preparation should be undertaken prior to changes or anticipated transitions in daily routines or relationships.**

Implications for Intervention/Support

- **When possible, reduce situational stress.**
- **Problem-solving skill development should be encouraged and be applied to address areas of concern. Collaboration with others, supportive guidance or mentorship may be beneficial in this regard.**

Implications for Intervention / Support

- Recognize the misconception and misuses of labels

A common misconception is that a classification of mental disorder classifies people when actually what are being classified are the disorders that people have

- Key Helper attitude that should be evident include: a genuine interest and unconditional acceptance

Emotional / Behavioural Conditions...

- May **co-exist** with each other and be interrelated.
- Individuals with more than one **co-existing disorder** are more likely to have longer lasting and more severe problems than those with only one diagnosed disorder.

Implications for Intervention/Support

- **Case plans should include small-step changes, ensure sufficient support and be adapted as needed.**
- **Case plans should include recommendations for implementation of healthy eating and activity routines.**
- **Explore areas of strength, interest and preference. Provide opportunity for expression of these in case plan, school and Work activities.**

Implications for Intervention/Support

- **Small steps successes should be recognized and celebrated.**
- **Be prepared to regroup and re-plan. (Grace and Hope).**

Mental Fitness

- The absence of a recognized mental disorder is not necessarily an indication of mental health ...
- **Mental Fitness** *refers to an individual's capacity to be **self-determined**, that is, his/her potential to reflect upon, formulate, and act on personal decisions that contribute to emotional and physical growth.*
- Mental fitness is fostered in environments and relationships that address important psychological needs.

Mental Fitness Needs

- **Relatedness** refers to our need for affiliation and closeness with family, peers and other significant individuals, fulfillment of this need is met through interaction with people, our memberships on groups and the support and affirmation we receive from others
- **Competency** refers to our need for understanding and using our personal gifts and strengths. Fulfillment of this provides individuals with a sense of personal achievement and accomplishment, and is met when our strengths and potential are recognized by self and others in daily activities and experiences.
- **Autonomy** refers to our need for personal freedom to make choices or decisions that affect our personal life direction and activities. When autonomy needs are met in conjunction with other need areas, freedom and choice are expressed in ways in which respect is demonstrated for self and others.