

## Case Study: Specific Learning Disability

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ED 425  
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December 13, 2013

The following case study was performed at a public middle school of approximately 900 students in grades six through eight. The school is located in a mostly Latino, working class, neighborhood in Los Angeles, California. For this case study, I analyzed a seventh grade student who has been given the pseudonym Mary. Mary has been diagnosed with a Specific Learning Disability (SLD). SLD is one of the most common diagnoses in public school, thus this case study provides an opportunity to shed light on a disability that most new teachers will encounter.

#### *Pertinent Information on SLD*

According to the Individuals with Disabilities Education Act (IDEA 2004):

Specific learning disability 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. (U.S.

Department of Education, 2013)

In other words, SLD is a problem involving the brain's ability to receive, process, store, and produce information (National Center for Learning Disabilities, 2013). It is generally believed that when a person has SLD, the brain processes information differently, but the level of intelligence is not affected (NICHCY, 1). For these reasons, the definition according to IDEA is very broad and the prevalence of SLD is very high. According, to the Department of Education (2010), 45.5% of students who received special education services under IDEA in 2005 were diagnosed with SLD (p. 61). Moreover, approximately 4.1% of school age (ages 6-21) children in America receive special education services under IDEA for a learning disability (U.S. Department of Education, 2010, p. 64).

Despite the wide prevalence of SLD, its causes are still largely unknown and its expression varies from person to person. Researchers hypothesize several potential causes such as brain damage, heredity, biochemical imbalance, or environmental factors, but nothing has been conclusive to date (Heward, 2006). Special education teachers caution against the brain damage hypothesis, as it is often cited as an excuse for not teaching children with SLD or for bad teaching. Because the causes are unknown, prevention is impossible, but physicians always recommend refraining from the use of alcohol, drugs, and cigarettes during pregnancy.

According to NICHCY (2011), the characteristics and signs of SLD generally include difficulties with language and math (p. 2). Students might develop language skills late and with limited vocabulary. This includes difficulty with the alphabet and with relating sounds to letters. Children with SLD may also have difficulty reading for understanding and reading aloud. Writing can be a great challenge mechanically, as students might have difficulty holding a pencil and may write with limited legibility. There are cognitive blocks to producing language as well, in that students may not be able to organize language or recall specific words needed for writing or conversation. Students generally have difficulty differentiating between symbols, which makes spelling and math confusing. Difficulty with sequencing makes recounting stories, following directions, and progressing through tasks problematic. Finally, students may appear to ignore social norms of conversation such as proper body placement and interruption (NICHCY, 2011, p. 2).

*Case Study: Mary*

Mary was diagnosed with SLD before the age of five. The exact cause of her disability is predictably unknown, though her special education teacher believes it could be linked to gestational diabetes. When she wasn't hitting her major developmental milestones (i.e. walking and talking) on time, Mary's parents believed their daughter had a physical disability. They consulted their pediatrician who initially diagnosed Mary with a developmental delay. Later, after administering a battery of tests, the medical doctor diagnosed a cognitive impairment. The exact tests administered are unknown at this point, however the initial diagnosis of cognitive impairment was amended to SLD when Mary began to read and write in elementary school.

*Services Available at Mary's School*

Mary has received special education services since preprimary school, and fortunately, there are also many services available for students with SLD at Mary's middle school. According to her Individualized Education Program (IEP) provided by the Los Angeles Unified School District (LAUSD), Mary is specifically prescribed services to help her in Math and English Language Arts (ELA). Each day she is required to receive 200 minutes of direct services from either the resource teacher or a collaboration of resource and general education teachers. Her schedule currently provides three periods of pull-out instruction: one, 52-minute period in the Learning Resource Center (LRC), one 52-minute period of modified writing tutoring, and one 52-minute period of modified math tutoring (LAUSD, 2013, p. 19). She spends four periods in the general education classroom.

Mary's present level of performance is described on her IEP (LAUSD, 2013). Her health does not impede her academic performance, but her SLD is impeding her progress through the general education curriculum. According to her test scores, Mary is at an early advanced level in

speaking, writing, and listening, but her reading level is below basic and is clearly where her SLD is giving her the greatest difficulty. Mary is currently three grade levels behind in vocabulary development, but five grade levels behind in reading comprehension. In writing, Mary writes legibly, but has difficulty spelling, expressing detail, and organizing multiple sentences in longer essays. Mary's SLD also hurts her ability to do mathematical calculations and apply mathematical concepts to daily tasks like reading an analog clock or counting money (LAUSD, 2013, p. 3)

Mary's IEP does not recommend a specific behavior support plan, but does recommend several instructional accommodations to help with the difficulties described on her present level of performance. These accommodations include:

Small group, individualized, or one-on-one instruction whenever possible; peer tutors; use of visual models, manipulatives, and graphic organizers such as outlines, guided notes, or other maps or organizers; simplification, repetition, and clarification of instructions; modeling of tasks; extended time to complete writing tasks and verbal responses; checking for understanding. (LAUSD, 2013, p. 18)

According to her IEP, when testing for math or ELA, Mary receives four variations and three accommodations. The variations include "directions that are simplified or clarified, testing in a small group setting, noise buffers, and highlighting or marking in the test booklet outside of responses to questions" (LAUSD, 2013, p. 7). The accommodations include, "questions read aloud or presented from audio CD, supervised breaks during testing, and provision of a scribe to transfer written answers to an official answer document" (LAUSD, 2013, p. 7).

There are several other services available at Mary's school, but she does not receive all of them regularly. These include speech language pathology, access to the LRC, counseling,

Healthy Start, special day classes, assistive technology (ordered on an as-needed basis), occupational therapy, and physical therapy. Mary's special education teacher informed me that Mary's most utilized resource is the LRC. She goes to the LRC for her pull-out classes, and also for extra help during lunch or afterschool hours.

### *Effective and Strategies and Accommodations*

According to the literature there are many effective educational and behavior strategies and accommodations that can be used when working with children with SLD. NICHCY (2011) provides an extensive list of accommodations, many of which were echoed by Mary's special education teacher. Some of these accommodations include, providing extended time to finish work or tests, providing written and oral instructions for students who struggle with listening or reading, utilizing tape recorders or adaptive computer technology for students who struggle with listening or writing, and specifically teaching strategies for academic success like good organization and study habits (NICHCY, 2011, p. 5). Mary's special education teacher also emphasized the importance of modeling tasks, repeating and simplifying instructions, and checking for understanding.

Anderson (2004) describes six particularly effective teaching strategies in his extensive literature review of academic accommodations for SLD. These strategies include: mnemonic instruction, graphic organizers, guided notes, peer tutoring, coached elaboration, and inquiry teaching. Some of these accommodations were reiterated by Mary's special education teacher, namely peer tutoring. Peer tutoring provides not only a more personal and manageable academic setting for children with SLD, but also an opportunity to improve social skills (Anderson, 2004, p. 27). Mary does not typically receive peer tutoring, but she does benefit from individual instruction during her pull-out periods at the LRC.

Finally, certain behavior support systems can be very beneficial for students with SLD. Morrissey (2010) analyzes positive behavior support systems and concludes that it is better to “teach and acknowledge appropriate behaviors on a prevention-oriented basis” (p. 27), instead of through punitive systems. Students with SLD, would likely require a “tier 3” positive behavior support system, which encompasses an individualized program across multiple environments (Morrissey, 2010, p. 28). Mary’s special education teacher echoed Morrissey’s ideas, mentioning the benefits of offering students with SLD preferential seating in the classroom, providing scheduled free time, allowing students to engage in preferred activities (i.e. painting, drawing, etc.), and administering tokens or certificates in recognition of desired behavior. Mary’s school has a school-wide positive behavior support system that employs tokens and her special education teacher finds it to be a powerful motivation for Mary.

#### *Local Resources*

There are several local resources in this area of Los Angeles that might benefit a child with SLD. Foremost, the LRC at Mary’s school appears to be a tremendous help to her and could be to other students with moderate disabilities who need help progressing in the general education classroom and with the general education curriculum. An LRC provides individualized attention and an opportunity to slow down the pace of work, which gives students with mild or moderate SLD the necessary time to better process and retain material. Beyond the LRC, students can also make use of their school’s or a private speech language pathologist. Because SLD often affects speech production, speech therapy can be beneficial for communication and for building self-esteem.

Often overlooked, mental health counseling specifically related to learning disabilities could also be beneficial for students like Mary. Coping with the academic, social and

physiological changes that occur in middle school is stressful for any student, and going through it with an SLD can exacerbate the situation greatly. Counseling will not only ease the middle school transition, but will also give that child a head start on the impending transition to adulthood. Healthy Start is a comprehensive local resource that works within LAUSD and can help provide health, academic, and basic needs support to student like Mary and their families. Mary's special education teacher informed me that Mary and her family take advantage of the Healthy Start office in her school.

### *Conclusion*

In conclusion, the growing knowledge of SLD has helped students like Mary get the support they need to be successful in school. The diverse resources, adaptations, and teaching strategies mentioned in this case study can be found in many schools, and their proper combination and employment can be tremendously successful. In closing, the most essential and most durable support for children with SLD is self-advocacy. One day, Mary came into the LRC and told her special education teacher that she needed to take a test in the resource center. Mary had been trying to finish the exam in the general education classroom, but was reverting back to old, bad habits and couldn't work. Over several years, Mary has worked with her teachers to develop an understanding of what prevents her from learning and how to circumvent those blocks. It is precisely this self-awareness that will allow Mary to succeed through high school and adulthood. We as teachers should be using our tools to help guide students with SLD toward this ultimate goal.

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