

## Learning Disability Truths and Fallacies

### Brain Research and Neuroscience

**TRUTH:** According to Rosner (1993), children with ‘normal’ IQs may still display LD symptoms if they experience certain negative neurological contributing factors including a disturbed home life, abuse, and extreme anxiety.

**FALLACY:** Individuals with LD are mentally retarded. According to Stevens (1996), those with LD have what is referred to as “normal” intelligence. In other words, to be officially considered LD, a person must have an average to above-average IQ, but also a certain deficiency in an ability to learn in a standard sense.

### Educational Factors

**TRUTH:** Stevens (1997) points out that the United States’ current educational system focuses on the development of classroom abilities that are in direct opposition of the abilities of an LD student. I couldn’t have paraphrased this better: “The choice of whether or not to adjust an LD/ADD student’s schoolwork is basically a question of whether the focal point of education should be the system or the individual child.”

**FALLACY:** According to Stevens (1996), LD symptoms, including directional confusion, extreme difficulty with sequencing, difficulty with time and time relationships, difficulty with retrieval, attention problems, and disorganization, are *not* directly related to school, as many believe. In other words, those with LDs often suffer from their symptoms in most or all aspects of their life, not just in terms of education.

### **Socio-cultural Factors**

**TRUTH:** According to Cronin (1997), parents of LD children in the United States have certain rights in accordance with their local district Office of Special Education, including a right to a free and appropriate public education (FAPE), certain rights to assessment and reassessment, and rights to an Individualized Education Program (IEP).

**FALLACY:** It is widely believed that we learn the most in school, yet Porterfield (1999) points out that most of the important learning we experience happens before we attend school. This important learning includes learning to sit up, walk, talk, and otherwise communicate so as to survive in the world. Porterfield relates this to learning disabilities by showing that learning to communicate is referred to as “language development,” which “doesn’t just happen—it is learned.” And these complex learning activities “can break down at a number of points along the way from start to finish” leading to learning disabilities.

### **Linguistic Factors**

**TRUTH:** According to Frank (2002), the disability to process language, including spelling and writing, are the most commonly known problems that dyslexics face.

**FALLACY:** ADD students are not learning disabled. Stevens (1997), points out that, especially in the area of written language, ADD and LD student’s symptoms are very similar. Often both display issues with handwriting, spelling, organization, description, and explanations.

### **Gender Factors**

**TRUTH:** According to Stevens (1997), males have a more difficult time mastering the process of transferring written symbols into spoken language, while females often display more difficulties in terms of reading comprehension.

**FALLACY:** ADHD has the same effects in both men and women. According to Walker (2005), women with ADHD are more inclined to show signs of depression or being unfocused, while men tend to convey more outward signs, such as loudness and rowdiness.

## References

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