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## Understanding Children's Hearts and Minds: Emotional Functioning and Learning Disabilities

By: Jean Cheng Gorman (1999)

### Emotional aspects of learning disabilities

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Abrams (1986) stated, "The vast majority of children with learning disabilities have some emotional problem associated with the learning difficulty" (p. 190). Traditionally, however, educators have placed priority on the diagnosis and remediation of learning disabilities (Hiebert, Wong, & Hunter, 1982). Empirical data suggest the critical need to treat emotional aspects of learning disabilities. Here are startling findings:

Learning disabilities have been found to occur in approximately 4.7 % of children and adolescents. (Fristad, Topolosky, Weller, & Weller, 1992). However, Peck (1985) found that 50% of children under age 15 who committed suicide in Los Angeles County over a 3-year period had been diagnosed as learning disabled.

As mainstreaming and inclusion become increasingly pervasive, it is especially important for all teachers to understand the interaction of emotional concerns and learning disabilities and the impact of that interaction on children's functioning. Indeed, Sabornie (1994) suggested, "Educators' lack of concern for social- affective problems among pupils is analogous to educational neglect" (p. 268).

### Need for purposeful strategies

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Promoting wellness in children requires purposeful attention and intervention in both educational and emotional arenas. Although it is not always possible to determine which of the two factors is responsible for a child's performance, it is important to keep in mind the types of possible interactions to best determine intervention strategies.

### Discerning interactions

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The interaction of emotional functioning and learning disabilities is complex and not always clearly discernible in a given situation. Regarding the well-documented link between depressive illness and learning difficulties, Livingston (1985) stated that it is difficult to discern whether depression causes or worsens learning difficulties, whether learning difficulties put children at risk for depression, or whether an overarching brain dysfunction increases the likelihood of both. Although it may be impossible to definitively state any directional relationship, it is essential to identify the possible interactions.

At the risk of oversimplification, one can conceptualize five main ways in which emotional concerns and learning disabilities interact.

- Learning disabilities may lead to emotional distress.
- Learning disabilities may raise or exacerbate existing emotional concerns.
- Emotional issues may mask a child's learning disability.
- Emotional issues may exacerbate learning disabilities.
- Conversely, emotional health may enhance the performance of children with learning disabilities.

The purpose of this article is to review research regarding each of these types of interactions and to draw implications for teachers of children who may have learning disabilities. Case examples illustrate the interaction of emotional functioning and learning disabilities in the classroom. Following each example are suggestions for interventions and remedial efforts.

### **A five-way interaction to watch for**

1. Learning disabilities may lead to emotional distress.
2. Learning disabilities may exacerbate existing emotional concerns.
3. Emotional and behavioral displays may mask emotional and behavioral displays.
4. Emotional problems may magnify learning disabilities.
5. Emotional health can actually enhance the performance of children with learning disabilities.

### **Learning disabilities may lead to emotional distress**

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Much research has demonstrated that students with learning disabilities experience emotional distress related to their difficulties. Students with learning disabilities tend to have higher levels of emotional concerns, such as depression, loneliness, and low self-esteem, than do their peers without disabilities.

### **Low academic self-concept**

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Sabornie's (1994) literature review confirms that students with learning disabilities have poor self-concepts related to their school functioning, but not necessarily to their global self-concept. Other researchers have also found that students with learning disabilities, as early as in Grade 3, have negative academic self-concepts that may be generalized from low self-views in specific academic subjects (Hiebert et al., 1982). In his study of middle school students with and without learning disabilities, Sabornie found that students with learning disabilities expressed more loneliness, felt less integrated in the schools, and were victimized (e.g., physically assaulted, had their possessions removed) more often than were other students. These findings suggest that the emotional effects of learning disabilities make life in school more difficult for children with learning disabilities than for their peers without disabilities.

### **Anxiety**

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Learning disabilities have also been linked to greater anxiety in children. For example, Margalit and Zak (1984) found that children with learning disabilities have higher levels of anxiety than do their peers without disabilities. Specifically, they tended to feel more often that events beyond their control were happening to them. Increased levels of anxiety are also reflected in more frequent somatic complaints by students with learning disabilities (Margalit & Raviv, 1984).

### **Depression**

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Researchers have consistently linked depression to children with learning disabilities. Fristad et al. found the presence of learning disabilities among a sample of clinically depressed hospitalized children to be seven times higher than in the general population. Other researchers have also noted the high "comorbidity" of learning disabilities and depression (Bender & Wall, 1994; Livingston, 1985; Peck, 1985). Fristad et al. suggested that the "additional difficulties experienced by [depressed] children [with learning disabilities] in the classroom may be due to the stress and frustration caused by their learning disabilities" (p. 57).

### **Attempts to cope**

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The mechanisms by which emotional issues arise are not clear, but researchers have postulated some causal means. Chandler (1994) suggested that some emotional adjustment disorders result from "attempts to cope with a difficult learning process and the resultant failure, frustration, and feelings of incompetence that those attempts engender" (p. 162). For some, "school achievement has become equated with self-competency, and the loss of competence has led to feelings of inadequacy, depression, withdrawal and an uncaring attitude" (p. 163). For others, "poor school performance [leads] to dependency and learned helplessness as a maladaptive style of coping" (p. 163).

A case example of a child who has difficulties with spatial organization and poor graphomotor skills illustrates the negative effects that learning disabilities may have on emotional functioning.

### **Joel's "carelessness"**

Joel, a fifth grader, was consistently turning in "sloppy and careless" work. Although his reading was above grade level, the quality of his written work was well below that expected of children his age. He lost points on math tests

because he misread the numbers he had written on his worksheet. This wasn't surprising, because the numbers were hardly recognizable. Joel's written assignments were often unfinished when handed in, or else were much too short, a four-line book report, for example.

Also, his teachers complained that Joel was very restless and inattentive in class. When questioned, he grumbled about school being boring. Joel's parents had noticed that he had become moody and generally uncooperative at home, too. (Adopted from Novick & Arnold, 1995, p. 145)

Analysis. By the fifth grade, Joel had undoubtedly struggled many times with the untidy appearance of his work. He was possibly teased by his classmates because of his difficulties and apparently was reproached by teachers for his work. After years of receiving such negative feedback, it is understandable that Joel felt badly about his abilities and thought negatively of school. His restlessness and inattention could be indicators of anxiety or frustration experienced as a result of his difficulties. Fine motor coordination disorders like Joel's can produce ongoing distress if not properly addressed.

What's a teacher to do? In this case, as with other children who experience emotional distress as a result of their learning difficulties, teachers can play a helpful role:

- Employing teaching strategies that cater to different learning styles, such as using multisensory methods, is important.
- Specific educational interventions to remediate learning disabilities should also be implemented. For example, regarding math instruction, Fleischner and Manheimer (1997) suggest using concrete representation (e.g., manipulatives) and pictorial representation when introducing new topics to help students with learning disabilities translate their understanding of new concepts to more abstract forms.
- Educational accommodations that facilitate task completion (e.g., permitting assignments to be word-processed) may also reduce some of the emotional sequelae of learning disabilities.
- Simple psychological interventions can have a positive effect. Teachers can take the time to talk with a student about his or her frustrations or anxiety.
- Teachers can praise a child's efforts and persistence despite his or her struggles.
- Activities that boost self-confidence, such as serving as a peer mentor or special teacher's assistant, begin to address the child's need for a sense of self-efficacy.

As the analysis of this case shows, teachers can try several strategies to address the student's negative feelings about himself or herself.

## **Learning disabilities may exacerbate existing emotional concerns**

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Many researchers have suggested that learning disabilities may negatively affect a child's social or emotional functioning because the disabilities influence the child's ability to develop positive interpersonal relationships. "Deficits in cognitive processing, which are sufficient to cause major learning problems in academic areas, are probably sufficient to cause major learning problems in nonacademic areas as well" (Bender & Wall, 1994, p. 323).

## **Ineffective social behavior**

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Students with learning disabilities often demonstrate more problems in social competence than do their peers without disabilities. Sabornie (1994) found that general education teachers consistently rated the social behavior of students without disabilities as higher than that of students with learning disabilities. Similarly, Hiebert et al. (1982) reported that teachers rated students with learning disabilities as "behaving in less socially acceptable ways" than their peers (p. 340).

## **Resulting sadness and anxiety**

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Undoubtedly, this reduced social competence, whether actual or perceived, results in emotional concerns for these children. For example, whether they lack friends, get into fights, or feel they are misunderstood, children with learning disabilities most likely will experience additional confusion, sadness, and anxiety that may already be present as a result of the learning disabilities themselves.

The example of Margaret, a 9-year-old girl, illustrates the potential for learning disabilities to exacerbate existing emotional concerns .

### **Margaret's "stumbling"**

Margaret had been plagued with social and academic difficulties ever since nursery school. At that time, her teachers voiced concern about her comprehension of spoken language. When asked a question or told to do something, her response was often "What?" or an inappropriate action. In first grade, she had unusual difficulty learning her classmates' names. She also tended to describe a person rather than giving him or her a name (e.g., "the lady in the art room" instead of "Ms. Smith, the art teacher"). Margaret often spoke hesitantly, stumbling over words and saying, "You know what I mean." She misused pronouns and prepositions, saying "him" for "her" and "under" when she meant "over." Margaret's first-grade teachers also had concerns about her difficulty following directions and her slowness in mastering basic reading and spelling skills.

In second grade, Margaret showed slow progress in reading and spelling. She was still struggling with basic reading and subtraction the following year. In fourth grade, her spelling was still rudimentary, and she was having trouble understanding what she read. Most of all, she hated having to express her ideas either orally or in writing.

In school, Margaret increasingly become a loner and was not well-liked by either peers or staff. In part, this seemed to be due to her difficulty communicating. Margaret's parents seemed particularly concerned over her lack of close friends, as Margaret was never invited to any of her classmates' birthday parties. (Adapted from Novick & Arnold, 1995, p. 163.)

Analysis. Margaret's language-based learning disabilities not only affected multiple areas of her academic functioning, but they also spilled over into her social interactions and relationships. As a young child, it is likely that she was frustrated at not being able to communicate her needs and desires to her parents. In school, her disability had similar effects and strained her interpersonal relationships. These continued social difficulties most likely exacerbated her existing emotional issues. Not wanting to speak out, she was further unable to express her needs and continued to be socially isolated.

What's a teacher to do? Teachers may be able to intervene in situations like Margaret's in several ways:

- Provide opportunities for children with learning disabilities to be involved and demonstrate competencies that are not compromised by their learning disabilities.
- Involve the child with other children in pantomime or group art activities.
- Increase the student's adaptive skills by building social skills (e.g., interpreting ambiguous social situations). Improved social skills may provide the student a buffer against the exacerbation of existing emotional issues.

For further reading on promoting prosocial and adaptive skills in the classroom, see the "Resources" boxes.

### **Emotional issues may mask learning disabilities**

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Often a child's learning disabilities go unnoticed because other aspects of the child are more salient, such as acting-out behaviors or personality features. Teachers may be focused on a child's demeanor or actions and consequently may not realize that learning difficulties are present.

### **Physical ailments or complaints**

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For example, Margalit and Raviv (1984) studied the expression of minor somatic complaints in learning disabled children. They assert that minor somatic complaints, such as stomach aches, "communicate feelings of stress and inadequacy [and are] designed to prompt adult support and guidance" (pp. 227-228). Therefore, expression of such complaints can be considered a coping strategy for children with learning disabilities.

Students who frequently complain of minor physical discomfort but do not have physical illness may be using the somatic complaints to avoid situations or may be manifesting unrealized anxiety in a physical manner. Teachers who have known students who continually complain of minor discomfort may initially feel more annoyed than suspicious about the possibility of learning disabilities.

### **Acting out**

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More frequently, it is more serious acting-out behaviors that mask learning disabilities. Abrams (1986) believes that failure experienced by students with learning disabilities may result in excessive anger, which can be turned on others

or back onto the child. For example, the child may feel she is "stupid," and may turn her hatred onto herself, continually misbehaving and provoking reproach. In addition, failure may serve as a defense, "failing in order to rid oneself of the anticipation of failure" (p. 190). Children who display acting-out behavior are often seen as having behavioral problems. They may act out in class, get into fights with other children, display defiance toward teachers, and exhibit other disruptive behaviors.

## Distracting the teacher

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Some children may intentionally or unintentionally distract their teachers from their learning difficulties by their disruptive behaviors. For example, Abrams (1986) recounted the experience of one child who "'willed' herself to think about a million different things' whenever it was time for a reading lesson and the inevitable pain of failure" (p. 193). Her teacher saw her as merely "hyperdistractible."

Whether a child is unintentionally or deliberately acting out, it is easy for teachers to note the behavioral problems, particularly if there are external circumstances that can account for emotional disturbance, and not to consider the possible role of learning difficulties. The case example of Edward illustrates that the salience of emotional factors may overshadow a child's cognitive difficulties.

### Edward's "acting out"

Edward was the middle child in a family of three boys being raised by a young single mother. He lived in a run-down inner city apartment building that was known to have frequent drug activity. When he attended a half-day preschool, he seemed to enjoy playing by himself more than with others. At home, this was also true in relation to his brothers or neighbors. In fact, he was able to occupy himself quietly and happily for hours on end. However, everything about first grade was a disaster. Edward hated his teacher and tended to ignore her, sometimes even threatening her when she asked him to do something he did not feel like doing. His attitude was that school was "stupid." Edward became the class bully early on and often got into fights. As a result, he was frequently sent out of the classroom, but this did not seem to significantly affect his behavior. By the end of the year, Edward was reading at the third- grade level, but his math had not advanced beyond kindergarten skills. (Adapted from Novick & Arnold, 1995, p. 71)

Analysis. Because Edward seemed to do well in preschool but began to have noticeable difficulties in first grade, it is tempting to believe that emotional factors (e.g., separation anxiety) may be the cause of his difficulties. His trying home situation may also be thought to account for his unacceptable behavior in school. In cases such as these, any academic problems may be seen as resulting from emotional concerns. The large discrepancy between Edward's reading and math abilities, however, suggests that he had a learning disability that was not given sufficient attention. It is possible that Edward learned to avoid situations where his learning problems would be manifested.

What's a teacher to do? Although it is difficult to know whether children who act out are doing so because of learning difficulties or because of emotional concerns, teachers can take steps to try to distinguish between the two factors:

- Behavioral analysis may reveal a pattern of behavior, such as acting out during math time.
- Timely alterations in routine could further identify suspected problem areas.
- Comprehensive psychoeducational testing also serves to clarify these issues.

## Emotional concerns may intensify learning disabilities

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Abrams (1986) stated, "Constant failure and frustration may lead to strong feelings of inferiority, which in turn, may intensify the initial learning deficiency" (p. 189). For example, anxiety experienced as a result of having difficulty with certain academic tasks may decrease a child's ability to attend and concentrate.

## Escaping school

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A child may escape into fantasy to avoid the painful experience of failure. This not only results in failing to learn new skills, but reinforces the child's sense that the disability is too great to handle. Furthermore, if a child's efforts are unsuccessful, but he sees peers receive praise for their work, it is highly likely that the child will become unresponsive to school-related events (Hall & Haws, 1989) and may abandon effort.

## Trouble at home

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External factors may raise levels of emotional distress to such a degree that a child's ability to deal with school is compromised. Indeed, a child's life situation or surroundings may be so unstable or chaotic that they disrupt the child's

ability to learn. Hall and Haws (1989) posit that "if a child is depressed, his/her academic performance would decline" (p. 359). Clearly, strong emotional concerns lessen a child's resources for learning and for dealing with challenging school experiences.

## Organic interactions

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The possibility that emotional concerns may affect a child organically has also been raised. For example, Brumback and Stanton (1983) postulated that depression may aggravate a learning disability because it intensifies the underlying neurological dysfunction. Bryan, Mathur, and Sullivan (1996) reported that "negative affective states have been found to produce low-effort processing of information and the use of less complex semantic processing strategies and lower cognitive processing effort" (p. 154). The case example of William highlights the possibility that emotional factors can exacerbate a child's learning disability.

### William's "laziness"

Twelve-year-old William was getting poor grades, particularly in math, largely due to "careless" work. His teachers maintained that this was merely a sign of William's laziness, his not taking school seriously enough, and his lack of desire to succeed. But his parents knew that William spent hours on the simplest homework assignment. He impressed them as a child trying very hard to do his best. Often, he would redo an assignment multiple times in order to "make it look right." On these occasions, William appeared to be absurdly perfectionistic, despite his typically disappointing results. (Adopted from Novick & Arnold, 1995, p. 72)

Analysis. William's perceptual learning disability made math particularly demanding because mastery of math requires spatial organization. This difficulty, however, was exacerbated by his perfectionistic traits, which did not allow him to complete an assignment until he had aligned all the numbers and problems perfectly. The amount of effort William put into making his homework and schoolwork "look nice," perhaps in an effort to conceal his learning disability, reduced the amount of energy he had for dealing with other academic consequences of his disability.

Alternatively, a child's emotional concerns may affect the teacher so that the teacher's ability to deal with the child's learning disability is lessened. For example, a child may repeatedly act out, may whine and complain, or may sulk and withdraw. Abrams (1986) observed that "the same frustration and anger that have been experienced by the parent in his relationship with the child may also be felt by the teacher, and as with the parent, may serve to bring about an inflexible approach to the child that will lessen the teacher's effectiveness" (p. 189). This may be seen in the form of reduced patience, inability to think of alternative ways to interacting or teaching, and reduced attention to the child in general.

What's a teacher to do? The possibility that the child's emotional responses affect the teacher's functioning must be explored, because this interaction may seriously affect a child's ability to deal with learning difficulties. Talking with other teachers and school staff about personal frustrations with specific children can be helpful in increasing the teacher's coping abilities.

## Emotional health can enhance school performance of students with learning disabilities

In contrast to the negative relationships between emotions and learning disabilities, there is growing evidence that emotional states may positively affect the performance and relationships of children with learning disabilities.

### Effect of positive feelings

Bryan et al. (1996) reported that positive "affective states" have been found to increase performance on various tasks, such as memory, computation, and discrimination tasks. In addition, their research indicated that inducing positive feelings in children facilitated the learning of new information. The authors postulated that "positive affect results in a more efficient utilization of cognitive material than neutral or negative moods," and that "positive affect may influence cognitive organization such that cognitive material is more integrated and related" (p. 160). The positive mood induced in the children had demonstrable effects across a 2-week time span, suggesting that the benefits of positive mood on learning and performance are significant.

## Learning about learning disabilities

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Some researchers have suggested that an increased understanding of what a learning disability encompasses may add to a child's ability to deal with his or her learning disability. Specifically, Hall and Haws (1989) found that younger children with learning disabilities had greater depressive indicators than did older students. They postulated that older children may be better able to identify and deal with anxiety-provoking school situations, such as separation from peers, and may thus be less negatively affected.

## A "can-do" attitude

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Further, Meichenbaum (as cited in Hiebert et al., 1982) suggested that students with learning disabilities may think negative self-statements before they begin academic tasks, such as "I can't do this." Their anticipation of failure may lead to reduced effort, decreased ability to concentrate, or difficulty applying the skills they do have. As a result, cognitive therapy may be instrumental in addressing the effects of a student's emotions on their school performance and relationships. Specifically, Hiebert et al. suggested that teachers should systematically build "positive affect and hopeful expectation, utilizing self-instruction or some other procedure for promoting positive affect" (p. 342). For example, teachers might ask children to visualize a pleasant experience or situation before they begin a task. Teachers could also present enjoyable tasks before asking children to do difficult ones.

A factual account of a girl's struggle with reading highlights the importance of a positive mindset for learning.

### Shalema: A success story

Shalema was a noticeably tall, heavy-set girl in her second-grade classroom. She barely had the reading skills of a kindergartner, but because of her size, she was promoted to the second grade. For most of the day, Shalema sat in the back of the room, staring into space and twirling her hair. She was never disruptive, but also never participated in class activities and did not have any friends. The teacher tried to give her individual attention, but because she had 30 other students, she was usually unable to do much. When a student teacher came to her room, the teacher asked her to work individually with Shalema. The student teacher frequently praised Shalema for her efforts, and was genuinely pleased when Shalema was able to identify a sight word. She always made efforts to state that she felt Shalema was a smart girl and was able to learn to read.

Shalema began to look forward to her times with the student teacher, and became increasingly eager to read the few sight words she knew. Shalema also began to take out her preprimer books during reading period and read to herself. One day, Shalema's mother came to the class and reported that Shalema had asked her to buy books to read at home, and that they had been sitting down after dinner each night to read. She had come to class to report that Shalema read her first book. Encouraged by this news, the teacher announced to the class that Shalema had made great progress, to which the class responded by spontaneously giving her thunderous applause.

Analysis. Shalema struggled to catch up to her peers and continued to have difficulty in reading. Her change in self-perception, however, as well as the positive feedback from her teacher and classmates, increased Shalema's desire to learn to read. This self-motivation was crucial to her overcoming her difficulties.

What's a teacher to do? Teachers may find that words of encouragement and genuine belief in the child's abilities produce more change than expected.

## Final thoughts

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In his study of general and special education teachers, Sabornie (1994) found that "the regular class teachers' rating of social competence [of students with and without learning disabilities] proved to be the best single discriminator [of social-affective variables], showing that these teachers should be counted on to determine who may or may not need social skills instruction" (p. 277). Sabornie suggested that all teachers, and perhaps general education teachers in particular, have the potential to be instrumental in addressing the complex interaction of emotional concerns and learning disabilities for children with learning disabilities in their classrooms. Sabornie further stated:

Educators should be cognizant of the different types of social and affective problems they are likely to confront in students with learning disabilities. (p. 277)

Inevitably, a combination of interactions between emotional issues and learning disabilities may be at work in any given situation, and it may be impossible to definitively identify the causes of poor performance or inappropriate behavior. Nevertheless, having a clear understanding of the different mechanisms of interaction can be helpful in selecting priorities and strategies for intervention.

## Resources

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### Resources for educating children with learning disabilities

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Vaughn, S., & Bos, C.S. (1997). Teaching mainstreamed, diverse, and at-risk students in the general education classroom. Boston: Allyn & Bacon.

### Resources for fostering emotional health

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