

Need for parental intervention strategies

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The definition issued by the National Joint Committee for Learning Disabilities (1981) is the definition schools and SENCOS in India refer to: 'Learning disabilities is a general term that refers to a heterogeneous group of disorders manifested by significant difficulties in acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. These disorders are intrinsic to the individual, presumed to be due to central nervous dysfunction, and may occur across a life span. Problems in self-regulatory behaviours, social perception and social interaction may exist with Learning Disabilities but do not by themselves constitute a learning disability. Although Learning Disabilities may occur concomitantly with other handicapping conditions (for example, sensory impairment, mental retardation, serious emotional disturbance) or with extrinsic influences (such as cultural differences, insufficient or inappropriate instruction), they are not the result of those conditions or influences.'

A population of students that requires closer attention is students who have been diagnosed with a learning disability. Students with learning disabilities are estimated to represent 2 per cent to 10 per cent of the student population (American Psychiatric Association, 1994). In India approximately 13 to 14 per cent of all school children suffer from learning disorders (Sadaket, 2009).

Students with learning disabilities struggle with self-concept and self-esteem, which in turn can lead to adjustment difficulties, substance abuse, depression, and suicide ideation (Saghatoleslami, 2005). Psychological wellbeing has been defined as internal, individual dimensions of mental health and is concerned with an individual's feelings and other areas of psychological functioning (Petersen and Kellam, 1977). The importance of psychological well-being in children and young people, for their healthy emotional, social, physical, cognitive and educational development, is well-recognised. It has been recognised that individuals with Learning disabilities are at risk of encountering high levels of health and social problems (Dagnan, 2008), leading them to be at risk of poor psychological wellbeing and social support. As psychological service professionals, it is important to monitor the self-worth of children and to improve their psychological well-being.

When parents have a child whom they feel is clearly intelligent but is underperforming at school they begin to feel frustrated. This often leaves parents feeling confused, anxious, in denial, ignorant and inadequate. They may also then seem uncertain about their plans for their child's future (Gould, 2005). There will probably also be financial implications. These could include the cost of extra lessons with various specialists. The child might have to change schools in order to attend a school that focuses on teaching children with learning disabilities (Sperry and Duffy, 2002). Amerongen and

Mishna (2004) found that the behaviour enacted by children with learning disabilities often leads the parents to feeling helpless and ashamed. Parents believe that the behaviour is a reflection of their lack of parenting capability. They frequently feel and may actually be blamed for their children's behaviour by the teachers, extended family and others. This may be the reason for their negative attitude towards others. Besides financial demands and sacrifices parents typically experience fatigue and significant demands on their time. Driving the learning disabled family member around is time consuming and tiring. There are also, seemingly, a never-ending series of appointments with, amongst others, the pediatrician, speech therapist, occupational therapist, and tutor (Sperry and Duffy, 2002). Initially it may feel that the disability is all-encompassing. This can put relationship and career restraints on the parents. Added to these stressors, the parents and the child who is struggling are often burdened by homework. They find homework difficult, frustrating and laborious (Margolis, 2005; Tuttle and Paquette, 1993). Efforts to assist the child with a learning disability in the family may detract from the needs of other children in the family, and disrupt the quality of family life as a whole (Walsh and Williams, 1997).

An informed and supportive family is considered crucial to a successful life-long rehabilitation of people with learning disabilities (Burnett *et al.*, 1999) irrespective of the level of severity of their condition. Family is seen as the key stabilizing factor in a child's life.

When parents are positively involved in the lives of their children, the self-concept of their children was affected in a positive way (Elbaum and Vaughn, 2001; Dyson, 2003; Reese *et al.*, 2007). When parents interacted and maintained a positive attitude with their children, a more positive self-concept was developed and self-esteem was raised (Dusek and McIntyre, 2003). If parent of a child with learning disabilities exhibit stress surrounding their child's disability, that child tends to have problems with social competences as well as displays more behaviour problems (Dyson, 2003). There is now a large body of research linking parent involvement in their children's education with greater student achievement in terms of grades, student attitudes and behaviour. Meaningful parent involvement also leads to greater parental satisfaction with the educational programming provided for their children. For these reasons, building relationships to encourage meaningful parent involvement is considered one of the hallmarks of best practice among educators. Parents of a child with a Statement of Special Educational Needs, amongst other groups, were more likely than average to feel very involved with their children's education. Parents' attitudes and support for their children's learning influence performance on literacy tests irrespective of socio-economic status (Tizard *et al.*, 1988; Wells, 1987). Parental involvement in their child's literacy practices positively affects children's academic performance (Fan and Chen, 2001) and is a more powerful force for academic success than other family background variables, such as social class, family size and level of parental education (Flouri and Buchanan, 2004). Parents make the greatest difference to achievement through supporting their learning in the home rather than supporting activities in the school. Longitudinal studies, provide research evidence confirming that parental involvement in learning activities in the home is strongly associated with children's better cognitive achievement, particularly in the early years (Harris and Goodall, 2007).

Parents who are involved in their children's lives can be a positive influence on their school motivation, as well as on other non-academic outcomes (Martinez, 2006). In one study of adolescents' perceptions of support from parents, teachers, and peers, learning disabled children identified parental support as the most important factor in terms of creating a positive orientation towards learning and pursuing academic goals (Murray and Greenberg, 2006). Furthermore, if parents are involved in after-school activities and sport, it fosters positive relationships between them and their child with a learning disability and this, in turn, will improve motivation at school and in other non-academic areas (Martinez, 2006). Children benefit from parental involvement as the parents knowledge and interest may be reflected in the increased interest of the child (Welsh, 1987).

So in nutshell parental involvement is key concern for the well-being of the child. So there is

need that besides developing intervention strategies for children there is need to focus on intervention strategies that take into account the maximum involvement of parents.

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