

**Psychosocial Problems among
School Age Children with Learning
Disabilities and their Parents'
Behaviors**

Thesis

*Submitted for Partial Fulfillment of Master Degree
in Psychiatric and Mental Health Nursing*

By

Asmaa Mahmoud Abd El khalik

(B.Sc. in Nursing, 2010)

Faculty of Nursing –Zagazig University

**Faculty of Nursing
Ain Shams University
2017**

**Psychosocial Problems among
School Age Children with Learning
Disabilities and their Parents'
Behaviors**

Thesis

*Submitted for Partial Fulfillment of Master Degree
in Psychiatric and Mental Health Nursing*

Supervisors

Prof. Dr. / Ghada Mohamed Mourad

Professor of Psychiatric and Mental Health Nursing
Faculty of Nursing- Ain Shams University

Dr. / Bothayna Nader Sadek

Lecturer of Pediatric Nursing
Faculty of Nursing- Ain Shams University

**Faculty of Nursing
Ain Shams University
2017**



First of all, my deepest thanks and gratitude to **ALLAH**, who bestowed me the power to accomplish this work.

Words are never enough to convey my sincere gratitude towards **Prof. Dr. Ghada Mohamed Mourad**, professor at Psychiatric and Mental Health Nursing, Faculty of Nursing, Ain Shams University, for her endless support, motherly care, close supervision, encouragement, and constructive criticism. I would like to thank her for the bright illuminating remarks that guided me to complete this study in its specific form.

I would like to express my deep appreciation and gratitude to **Dr. Bothyna Nader Sadek**, lecturer of Pediatric Nursing, Faculty of Nursing, Ain Shams University for her, guidance, patience, kindness, and valuable advice, and devoting a lot of precious time during the supervision of this review, in addition to providing me with helpful feedback.

Finally, I praise and thank the **children** with learning disabilities who helped me in this study and their accompanied **parents**.

I am really indebted to you

Dedication

There are many times when silence speaks so much loudly than words, but I would like to express my gratitude to all of my *family members* and in *Iaws* for their continuing love, support and encouragement over the years. A special -Thank you-to my husband (*Khaled*), the person who always believed in my ability to achieve all what I set out to accomplish. I also dedicate this to my children (*Mohamed*) and (*Razan*) who are inspirations and the reason I strive to be my best.

I'm really thankful to all of you

List of Contents

Title	Page
Introduction	1
Significance of the study	3
Aim of the study	5
Review of literature	
I: Learning disabilities:	6
▪ Prevalence of learning disabilities	11
▪ Causes of learning disabilities	14
▪ Risk factors of learning disabilities	15
▪ Diagnosis of children with learning disabilities	16
▪ Deferential diagnosis of learning disabilities	18
▪ Symptoms of learning disabilities	19
▪ Types of learning disabilities	22
II: Psychological problems of children with learning disabilities	37
III: Behavioral problems of children with learning disabilities	44
IV: Attention-Deficit/Hyperactivity Disorder and learning disabilities	48
V: Parenting behaviors toward children with learning disabilities	51

Title	Page
VI: Role of mental health nurses towards children with learning disability	57
VII: Role of school teachers toward children with learning disabilities	59
VIII: Intervention for children with learning disabilities	60
Subjects &Methods	64
Results	76
Discussion	107
Conclusion and Recommendations	127
Summary	130
References	138
Appendices	171
Arabic Summary	

List of Tables related to review

Table	Title	Page
1	Types of specific developmental disorders	22

List of Tables related to result

Table	Title	Page
1	Demographic characteristics of study sample	77-82
2	Psychological problems among studied sample	83-94
3	Behavioral (social) problems among studied sample	95-98
4	Parenting dysfunction among studied group	99-103
5	Children's attention and adaptation (home image)	104
6	Children's attention and adaptation (school image)	105-106

List of Figures related to review

Figure	Title	Page
1	Prevalence of disabilities among school age children	12
2	The difference between non-impaired and dyslexic brain	25
3	Words that students with learning disabilities often hear	42

List of Figures related to results

Figure	Title	Page
1	Distribution of demographic characteristics of the studied children according to their gender	78
2	Distribution of the demographic characteristics of studied children according to their residence	78
3	Distribution of the demographic characteristics of studied children according to their school	79
4	Distribution of the demographic characteristics of parents of the studied children according to their occupation	82
5	Distribution of psychological problems among studied sample	87
6	Distribution of behavioral (social) problems among studied sample	94

List of Abbreviations

Abbreviation	Meaning
ADHD	Attention-deficit hyperactivity disorder
ASD	Autism spectrum disorder
APD	Auditory processing disorder
CB	Challenging behavior
CBT	Cognitive behavioral therapy
IQ	Intellectual quotient
LD	Learning disability
LDs	Learning disabilities
OHI	Other health impairments
SAF	Self-assessment framework
SIB	Self-injurious behavior
SLD	Specific learning disability
VPD	Visual processing disorder
WHO	World health organization

Operational definitions

Definition	Meaning
Dyslexia	Difficulty with reading, Problems reading, writing, spelling, speaking
Dyscalculia	Difficulty with math, Problems doing math, understanding time, using money
Dysgraphia	Difficulty with writing, Problems with handwriting, spelling, organizing ideas
Dyspraxia	Difficulty with fine motor skills, Problems with hand-eye coordination, balance, manual dexterity
Dysphasia/Aphasia	Difficulty with language, Problems understanding spoken language, poor reading comprehension
Auditory Processing Disorder	Difficulty hearing differences between sounds, Problems with reading comprehension, language
Visual Processing Disorder	Difficulty interpreting visual information, Problems with reading, math, maps, charts, symbols, pictures

Abstract

Learning disabilities among school-age children increase the risk of psychosocial problems. **The aims of this study are** to assess psychosocial problems among school age children with learning disabilities and to assess parents' behaviors towards their children with learning disabilities. **A descriptive design** was utilized in this study. A purposeful **sample** included 70 children with learning disabilities. The study **setting** was at two learning disabilities centers, one of them was at Zagazig city, and the other was at Menia El Kamh city. Four **tools of data collection** were used: 1) structured questionnaire which covers demographic characteristics of children and their parents 2) standardized Egyptian scale for children's psychosocial problems 3) parenting behaviors scale 4) standardized Egyptian scale for children's attention and adaptation. **Results** of this study revealed that lower than half of children with learning disabilities suffer from psychosocial problems and also lower than half of parents of studied children have a dysfunction in the behaviors towards their children. More than half of LD children experienced inattention at home and school. There were statistically positive correlations between all variables, (Psychological problems, behavioral problems, parenting dysfunction, and children's attention and adaptation -home and school- images). The study **Concluded** that less or approximately half of parents of studied children have a dysfunction in the behaviors towards their children. The study **Recommendation** included specialized supporting groups for both parents and children with learning disabilities, for rehabilitation and counseling.

Key words: learning disabilities – psychosocial problems – attention disorders – parenting dysfunction.

Introduction

Learning Disabilities (LDs) mean disorders in one or more of the basic psychological processes involved in understanding or in using language, spoken or written that may manifest itself in an 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, dysgraphia and dyscalculia (*Bency & Begum, 2017*).

The prevalence of learning disabilities in different regions of the world is estimated from 3 to 12 percent (*Keivan, 2012*).

Types of specific learning disabilities are categorized as follows: Dyslexia, a reading disability, Dysgraphia, a writing disability, Dyscalculia, A math disability, Dyspraxia, a motor coordination disability, Dysphasia, a language disability related to difficulty with reading comprehension, Aphasia, a language disability related to difficulty with understanding spoken language, Central Auditory Processing Disorder, a sensory disability related to processing sounds, Visual Processing Disorder, a sensory disability related to processing images, and Non-

Verbal Learning Disorder, a visual-spatial disability related to body control (*Gibson, 2015*).

Learning disabilities are the problems that affect the brains ability to receive process, analyze, or store information. These problems can make it difficult for a student to learn as quickly. LDs have an impact on all family members. They can be lifelong conditions that, in some cases affect many parts of a child's existence: school or work, daily routines (*Osman, 2012*).

Emotional difficulties can be considered one of the primary issues of the learning disabled and come about as a result of academic failure; in the other, emotional difficulties are a result of the secondary issues: frustration, lack of self-confidence, aggressiveness, and depression that arise from social and academic failure. Fear of failure leads to avoiding communication, which generates feelings of helplessness arising from the inability (or lack of confidence) to influence social conditions (*Accariya & Khalil, 2016*).

Additionally behaviors that challenge among children with learning disabilities can include aggression, destruction, self-injury, and other behaviors (e.g. running away) associated with personal or social risks. Children

with LD are much more likely to show behaviors that challenge (*Totsika et al., 2011*).

Nurse must facilitate opportunities for the child with a learning disability to be involved in decisions using materials that are accessible to them, for example, using augmentative communication strategies such as simple language, pictures, objects of reference, etc. and finally involve others important to the person who can help empower them or give information to identify what is felt to be the best decision for the person (*Clapham, 2014*).

The effective teaching goes further: creating an environment that not only makes learning possible now, but also teaches attitudes and behaviors that enhance learning and success in later life. Student skills in self-regulation, such as self-monitoring and self-evaluation, are vital for life-long learning (*Watkins, 2013*).

Significance of the study

A learning disability affects the way a child understands information and how they communicate. Children with more severe LD may have no or extremely limited verbal communication and may require support with all everyday tasks such as dressing and toileting.

Many will experience complex physical health, sensory, and mobility difficulties (*Crouse, 2013*).

The prevalence of learning disabilities among Egyptian primary school children is 25% (*Husin, 2014*).

A few studies have focused on the psychosocial problems of children with LD. Research on the social problems and social skills of those children is rather limited, but findings generally point to difficulties in understanding social interactions, and to social perception problems (*Sermed-Clikeman et al., 2010*).

A learning disability can't be cured or fixed; it is a lifelong issue. However, learning disabilities cause a variety of psychosocial problems as well as attention disorders, children with learning disabilities can succeed in school and go on to successful, often distinguished careers later in life with the right support and intervention.