Social integration of persons with learning disabilities through education and training

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MAIN TOPICS

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1. INTRODUCTION

- A short history of the "learning disability" concept
- Terminology
- Definitions and controversies
- Epidemiology of learning disabilities
- Models of social inclusion for people with learning disabilities
A short history of the “learning disability” – LD concept

- People with LD have been called in different manners during historical societies, like:
  - subhuman organism”,
  - “menace”,
  - “unspeakable object of dread”,
  - “object of pity”,
  - “holy innocent”,
  - “diseased organism”,
  - “object of ridicule” and
  - “eternal child” (Wolfensberger, 1972).
A short history of the “learning disability” – LD concept

- LD has been corellated with
  - witchcraft,
  - lunacy,
  - mental illness, and criminality,
  - until the introduction of the concept of community care and the principles of normalisation (Atherton, 2005).
A short history of the “learning disability” – LD concept

The concept of LD:
- has been proposed since the second half of the last century,

- as a reaction to the school educational reforms,

- with the aim of differentiating the children with low educational outcomes.
Terminology & definitions

- LD are generally considered as a:
  - rare disorder,
  - with organic determination,
  - that affects, in negative way, the students’ ability of learning, reading and writing (Sleeter, 2010),
  - with school failure (Rimrodt & Lipkin, 2011).

- LD - disorders that have in common an important impairment in major nervous system functions as
  - listening, speaking,
  - reading, writing,
  - reasoning or
  - mathematical abilities (Corley & Taymans, 2003).
Most definitions of LD describe children in educational contexts and less adults in a variety of work and personal life settings (Lowry, 1990).

Historically, few definitions of learning disabilities have included reference to adults (Ryan & Price, 1993).

For this reason most authors extrapolated the concept from childhood to the adult stage, considering that individuals with learning disabilities have lifelong difficulty learning because of some difference in information processing (Ross-Gordon, 1989).
Epidemiology of LD

- The lifetime prevalence of LD is important for national education, health and welfare systems.

- In US, children with LD represent about 9.7%; this condition affects as comorbidity especially children with special health care needs (Altarac & Saroha, 2007).

- 5% of all public school students are identified as having a LD, often associated with social skill deficits and emotional or behavioral disorders (Lyon, 1996).
Epidemiology of LD

- Regarding the LD in adult stage, often are reported coexisting with:
  - psychiatric disorders,
  - challenging behavior (Moss et al., 2010),
  - autistic traits (Bhaumik et al., 1997) and
  - personality disorders (Khan et al., 1997).

- The prevalence of LD in general population in the Western world:
  - is between 1-2.5%,
  - persons having major functional impairment and
  - requiring lifelong need for support and interventions (Gillberg & Soderstrom, 2003).
Social inclusion of adults with LD - a noble goal of policy makers,

In reality, such people face poor life chances, due to discrimination.

*The Ecological Model* –

is one of the most used models of social inclusion for people with disabilities,

is based on two emerged themes: interpersonal relationships and community participation (Clifford Simplican et al., 2015).

Also, social inclusion has become interchangeable with independent living (Duggan & Linehan, 2013).
2. METHODOLOGICAL CHALLENGES FOR EDUCATION AND TRAINING IN ADULTS WITH LEARNING DISABILITIES

- Principle of education for people with LD
- Educational and training approach of adults with LD
- Pedagogical strategies and instructional models for adults with LD
- Social perspective on education and training for adults with LD
Principle of education for people with learning disabilities

- Education of people with LD is based on the principle of putting them at the center of educational planning rather than applying ideological frameworks in action (Ford, 2013).

- Any educational and training approach of adults with learning difficulties involves the successive four key steps:
  1. subjects’ evaluation (diagnostic);
  2. selection and design an intervention plan;
  3. implementation of intervention plan;
  4. evaluation of intervention outcomes.
Educational and training approach of adults with learning disabilities

- The **evaluation process** of the subjects – assessing:
  - their needs, interests, preferences,
  - academic skills,
  - weaknesses and strengths in terms of learning experience.

- **For evaluators:**
  - from a **theoretical point of view**, it is necessary to define the learning difficulties for a better understanding of this problem;
  - from the **clinical point of view**, we must investigate and diagnose the issue and develop practical solutions for people with learning difficulties (Doucet, 2000).
Educational and training approach of adults with learning disabilities

- The multidimensional model of diagnostic:
  - is the best diagnostic approach for adults with LD;
  - focus on multidimensional and differential assessment;
  - is not a description of deficits,
  - include the subjects’ representations, their resources, interactivity in various context and
  - include the impact of LD on the construction of their identity.

- This model:
  - focuses on the contextualisation of the problem,
  - integrates social, emotional, cognitive and developmental components and
  - takes into consideration the experience of the subject (Chamberland & Nolin, 2000).
Educational and training approach of adults with learning disabilities (2)

- The Occupational Therapy Models:
  - are very useful model of assessment of performances in activities of daily living (ADLs) of people with learning disabilities (Dwyer & Reep, 2008).
  - can also assess different areas of living, like -
    - motivation and expectations,
    - the daily pattern of self-care,
    - leisure and productivity,
    - his sensory profile and
    - the impact of the environment on functional ability (Thomas, 2015).

- The social network mapping - tool for a sociological perspective of adults with LD.
Pedagogical strategies and instructional models for adults with LD

- **Pedagogical strategies** -
  - are coherent and adapted,
  - imply general actions to overcome the subjects’ difficulties of communication and understanding,
  - use the assistive technologies (Corley & Taymans, 2003);
  - overcome the barriers of adults LD,
  - assure a good instructor-learner interaction pattern (Mellard & Scanlon, 2006).
  - are focused on creating of flexible adaptative behaviour of teachers to the level of subject’s understanding and on the use of direct and explicit instruction during the implementation of the educational program (Mellard & Scanlon, 2006);
Pedagogical strategies and instructional models for adults with LD

- **Personalized and accompanied pedagogy** (Carré, 2004) –
  - stimulate the engagement of the adult learners;
  - involve them as full partners in the educational process, rather than to treat them like children;
  - based on autonomy,
  - overcome the traditional model of instruction, with all its dimensions (architecture, pedagogical relationship, responsibility, tools).
Pedagogical strategies and instructional models for adults with LD

- Trainees are consulted regarding the session’s schedules and basic operating procedures that occur in the training group.
- In addition, each participant must have a personal involvement within the group, in various ways and themes of discussions, like professions, life experiences, personal competences (knowledge and skills) or social roles and social norms.
- Thus, each participant has to socialize his representations and thus gradually overcome his social image, taking his place in the group as well as other trainees (Lechat, 2004).

- A modern learning manner implies information and communication technologies (ICTs) use. For people with LD, it has been proposed a lot of technical paths:
  - intuitive interfaces,
  - multimedia modularization,
  - virtual simulations,
  - intelligent agents,
  - adapted tutorials,
  - social networks of accompaniment and support (Bellier, 2004).
Pedagogical strategies and instructional models for adults with LD

- **Assessment of learning outcomes:**
  - is the last step in the educational intervention,
  - involves difficulties of interpretation of the evolution of subjects, due to the complexity of the situation;
  - replay intervention is required, as an adjusted form, under the conditions of reconsidering of the negative elements, in the idea of softening of the identified disturbing factors.
Social perspective on education and training for adults with learning disabilities

- The positive acquisitions:
  - will allow the trainees to rebuild a social image and
  - to acquire new certainty about their skills,
  - which is transposable from the training group to other social organizations (Lechat, 2004).

- Is required:
  - Research and programming for adults with LD in environments outside of school and work,
  - supportive assistance to improve social related skills,

  - combining the knowledge and experience from the recreation and leisure field with that from the LD field (Johnson, 1995).
3. CONCLUSION AND FUTURE DIRECTIONS

- Promoting social inclusion for adults with learning disabilities
- Opportunities for future actions
- Creating a social capital
- Creating communities, despite disability
CONCLUSION AND FUTURE DIRECTIONS

- Today, LD of adults are becoming better known and framed, but often continue to go underdiagnosed and untreated, due to circumstantial factors.

- The majority of people with LD lives in complex systems of social support during their entire life cycle.

- This require collaborative working practices in order to maintain or improve through educational and training programs the persons’ competences, their access to activities within their environment and inclusion within their community.

- As a permanent goal for educational and training strategies, adults with LD should be enabled to use mainstream services and to be fully included in the life of the community as citizens (Lillywhite & Haines, 2010).
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Thank you for your attention