UNIT 9: Guidance and Counselling for Specially abled Children

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9.1 Learning Objectives

After going through the unit, you will be able to:

- develop a clear understanding of children with physical disabilities;
- describe the classification of children with physical disabilities;
- understand how guidance and counselling services can be provided in schools according to the needs of children with physical disabilities;
- understand the advantages and disadvantages of group guidance;
- develop an understanding of children with learning disabilities;
- analyse the causes of learning disabilities;
- gain a comprehensive understanding of guidance and counselling provisions for such children with disabilities;
- develop an understanding of children with intellectual disabilities;

9.2 Introduction

While designing the education system as well as the framework of guidance and counselling in a school, it is extremely important to pay attention to the diversity among students. Besides assessing students' interests, experiences, latent talents, attention, and intelligence quotient, the following categories must be taken into consideration while providing guidance and counselling:

- children with physical disabilities;
- children with intellectual disabilities;
- children with learning disabilities, etc.

Since education is a birth right of every child, it has become essential for school authorities and teachers to be sensitive and alert towards children belonging to these special categories mentioned above. The widespread promotion of inclusive education strongly emphasizes this concern. In this unit, you will study guidance and counselling for children with physical disabilities. In this unit, the causes of such disabilities, their identification, and the guidance and counselling programmes required for these children will be discussed. Along with this, issues related to children with disabilities and children

with intellectual disabilities are discussed, and the strategies or measures that schools can adopt for the development of such children are highlighted. Furthermore, to gain a deeper understanding of children with special needs, it is essential to focus on children with learning disabilities or learning disorders. Learning disability is a condition that creates barriers in understanding or processing information. In schools, teachers often face difficulties while dealing with such children, as they are unable to learn as quickly or in the same manner as normal children, which leads to various problems. If taught in a conventional way, these children face difficulties in demonstrating specific skills or completing tasks. In this chapter, we will discuss children with learning disabilities. Along with an analysis of the causes of such disabilities, you will also learn about the guidance and counselling services that need to be provided in schools for these children.

9.3 Concept of Physical Disability

Physical disability refers to limitations in a person's physical functioning, mobility, coordination, or stamina. Other forms of physical disabilities include conditions that restrict different aspects of daily life, such as respiratory disorders, blindness, neurological disabilities, sleep disorders, and speech disorders.

Physical disability does not always mean that a person is completely unable to perform certain tasks, but it often makes those tasks more challenging. As a result, daily activities may require more time and effort. A person may be born with a physical disability, or may acquire it later in life due to accidents, injuries, illnesses, or as side effects of medical conditions or treatments. Regardless of the cause, it is the responsibility of education to mentally prepare such individuals and help them move forward by enabling them to lead a meaningful and independent life.

9.4 Classification of Physically Disabled Children (Types of Physically Disabled Children)

Children with physical disabilities can be classified on the basis of the type of disability they have, as given below. By keeping these categories in mind and planning guidance and counselling efforts at every level of schooling, better educational progress can be achieved. The categories of physical disabilities are as follows:

1. Children with visual impairment.

2. Children with hearing impairment.
3. Children with speech impairment.
4. Children with orthopaedic (locomotor) impairment.

9.5 Visually Impaired Children

When we talk about visually impaired children, we can identify several categories. For example, some children are completely unable to see and are called blind. Some others can see only partially. Some can see only nearby objects, while others can see only objects that are far away. In addition, some children see all objects in a blurred or unclear way.

Such visual impairment may be present from the time of pregnancy or may occur at any stage of life. According to the Persons with Disabilities Act, 1995, visual impairment includes both blindness and low vision. On the other hand, as per the *Rehabilitation Council of India Act, 1992*, visual impairment means:

1. Complete loss of vision.
2. Inability to see objects at a distance of 6 metres or 20 feet, or even less.
3. A visual field of less than 20 degrees.

9.5.1Guidance and Counselling for Visually Impaired Children

Visually impaired children include those who are blind, partially blind, have low vision, or can see only with one eye. While it is easy to identify children who are completely blind, it is more difficult to identify children who have low vision. To help identify such children, the NCERT (National Council of Educational Research and Training) has prepared a checklist. The indicators are as follows:

1. Frequent headaches.
2. Blinking the eyes repeatedly.
3. Asking classmates to read aloud what is written on the blackboard.
4. Bringing objects or books very close to the eyes to see them clearly.
5. Keeping one eye closed and bending the head forward while looking at objects.
6. Rubbing the eyes very frequently.
7. Difference in the size of the pupils of the two eyes.

8. The eyelids may appear small and red.
9. Being highly sensitive to light.
10. Watery eyes.

Therefore, to reduce these problems in the school environment, teachers, parents, and professionals involved in guidance and counselling must work together. Only through joint cooperation can these problems be effectively addressed. The following measures should be taken:

- Teachers should encourage teaching blind children through touch (tactile sense) and hearing (auditory sense). At the same time, teachers and counsellors should help partially blind children make maximum use of their remaining vision.
- If possible, the use of closed-circuit television (CCTV), as used in Western countries, should be introduced in our schools. With the help of such cameras, objects can be enlarged and shown on a television screen.
- Children with partial vision should be provided with magnifying glasses so that letters and numbers can be seen more clearly.
- For blind children, teachers should arrange teaching materials through tape recorders so that students can listen and remember the lessons. Subjects like language, history, geography, and sociology can be taught using audio recordings.
- The best method of teaching such children is Braille. Braille was invented by Louis Braille. In the Braille system, six dot symbols arranged in different positions are used to represent about 63 different patterns. Apart from reading and writing, Braille can also be used to teach music, mathematics, computer applications, and chemistry.
- The integrated education system emphasizes providing all types of education within regular schools. Schools should take special steps to provide continuous guidance, counselling, and encouragement to such children. Efforts should be made to give children with visual difficulties alternative learning experiences as much as possible. Teachers should also take initiative to bring and use appropriate learning aids in schools.
- Keeping in mind the limitations of visually impaired children, arrangements should be made for activities such as music, playing musical instruments,

literary activities, and games. These activities help ensure that feelings of inferiority or psychological distress do not develop in their minds.

9.6 Children with Hearing Impairment

According to the *Individuals with Disabilities Education Act (IDEA), 1990* of the United States of America, **deafness is a hearing impairment that is so severe that a child is unable to process language-related information, with or without amplification. This condition also negatively affects the child's overall functioning.**In other words, hearing impairment refers to a temporary or permanent loss of hearing that creates obstacles in a child's learning process. Such children can be divided into two categories. These are **deafness** and **hard of hearing**.**Deafness** is a more severe form of disability, while **hard of hearing** is a less severe form of hearing impairment.

9.6.1 Guidance and Counselling for Children with Hearing Impairment

A systematic study of every child helps in building a stable and healthy life. While identifying children with hearing impairment or trying to solve their behavioural problems, teachers should pay attention to the following points:

1. Does the child frequently have ear discharge?
2. When the teacher speaks in class, does the child turn one ear forward to listen?
3. Does the child speak either very loudly or very softly?
4. Does the child express feelings through gestures and signs?
5. Is the child unable to follow instructions given to them?
6. When others speak, does the child mainly watch the speaker's lips?
7. Does the child hesitate to take part in group discussions in the classroom?
8. Are there irregularities in the tone and pronunciation of speech?
9. Does the child show restlessness or lack of attention in class?

If any of these signs are noticed in a child, the teacher should take appropriate steps. For such children, the measures mentioned below can be expected to be very helpful.

- Schools should give importance to purchasing **hearing aids**. Suitable devices should be selected based on the degree of hearing loss. Children

who need these devices should be helped to use them very carefully, as they are sensitive and expensive.

- To ensure that hearing impairment does not become a barrier to social adjustment, children should be helped to mix with others through activities like **dance, music, and sports**, creating a healthy and friendly environment.
- If a child is identified as having a hearing impairment, arrangements should be made for the child to sit **close to the teacher** in the classroom. Teachers should speak **clearly and slowly**. Children with hearing difficulties should be encouraged to participate equally in classroom discussions. Teachers should build a friendly relationship to strengthen their **self-confidence**.
- As part of school guidance services, **hearing training** should be provided for children with hearing impairment. Through such training, the level of impairment is assessed, and children are given **speech training, lip-reading training**, and help in understanding sounds and objects.
- Based on the interests of such children, **vocational training** should be arranged with the help of experts. Facilities for **drawing, painting, and handicrafts** should also be provided.
- Trained professionals should be appointed to help children learn the movements and coordination of the **lips, tongue, and facial muscles** needed for speech. Although this work requires great patience, proper and consistent training can produce good results.
- The use of **fingers** can be very effective. There is a well-developed system of forming different shapes with finger movements to represent **English letters**, and teachers should receive proper training in this method.
- Through the use of **sign language**, children with hearing and speech difficulties can be encouraged to express their thoughts using hands, face, and arms. Each sign has a specific meaning and is expressed through particular movements, hand positions, and facial expressions.

9.7 Children with Speech Impairment

According to Van Riper, *speech is considered abnormal when it differs noticeably from the speech of other people, draws attention to itself, disrupts communication, and makes both the speaker and the listener feel uncomfortable.*

Language is the main means through which people in society express their thoughts and feelings to one another. However, a person who has speech or language impairment is unable to use language properly. When children with such impairments are present in school classrooms, teachers need to take appropriate steps and be attentive while teaching them.

Generally, speech impairment or speech disorders may occur due to abnormal structure or functioning of the speech organs and related parts such as the mouth cavity, lips, teeth, tongue, and vocal cords. These problems include inability to speak clearly, inability to form correct sentences, stammering or stuttering, getting stuck on words, and confusion while trying to speak.

9.7.1 Guidance and Counselling for Children with Speech Impairment

Speech or language impairment becomes an emotional problem because it creates difficulty in expressing one's thoughts and feelings. As a result, a child may sometimes become aggressive or frustrated. To address such problems, the most important requirement for a teacher is **psychological understanding**. Along with guidance and counselling, if a healthy and emotionally secure environment can be created, it becomes easier to develop a sound mental state in such children. Therefore, the educational environment should be open, free, and supportive, so that no learner faces obstacles in the process of learning. Teachers should focus on increasing the child's **vocabulary**, helping with **vowel sounds and correct pronunciation**. Children with speech impairment can be taught reading and writing more effectively through **dance, music, rhythm, and recitation**. Another very important point is that teachers must ensure that others do **not laugh or make fun** of a child's incorrect pronunciation, as such ridicule can have a harmful effect on the child's mental health. Importance should also be given to **teaching drawing and handicrafts**, because through such creative activities children get opportunities to express themselves. In addition, to maintain their **mental well-being**, support can be taken from activities such as showing

entertaining films and organizing educational trips. According to psychological principles, children with speech impairment should be taught with **patience, love, and care**. They should be encouraged to accept their disability and to build their lives with confidence and courage. Efforts should be made to use **new and innovative teaching aids**. If special training is required, teachers should come forward to receive such training. If the need arises, the school authorities should arrange for **special guidance professionals**. Overall, parents and teachers must work together to ensure that such children do not face adjustment problems and do not suffer from emotional difficulties.

9.8 Orthopedically Handicapped Children

Orthopaedic disability refers to defects in the **size, structure, or functioning of bones and joints**, which result in reduced muscle strength, coordination, and control.

The term **Orthopaedic** was formed by **Nicholas Andry** from two Greek words—**"Orthos"** meaning *straight* and **"Paidios"** meaning *child*. This implies that the prevention of deformities in adults depends on proper development during childhood. In other words, orthopaedic disability affects the functioning of **bones, joints, and muscles**.

According to the **Rehabilitation Council of India (1992)**, *locomotor disability means an inability of a person to perform certain movements or activities*. This disability generally occurs due to disorders of the **bones, joints, muscles, or nerves**.

Orthopaedic disability is also known as **locomotor disability**. Its main types are:

1. **Crippled or Lame**
2. **Spinal deformity (Spina Bifida)**
3. **Myopathy**
4. **Arthritis**
5. **Cerebral Palsy**
6. **Epilepsy**
7. **Polio**

According to the **Persons with Disabilities Act, 1995**, *locomotor disability* refers to a condition in which movement of the limbs becomes restricted due to disability of the **bones, joints, muscles, or any form of paralysis caused by brain disorders**.

9.8.1 Guidance and Counseling for Orthopedically Handicapped Children

Children with orthopaedic disabilities need the support of **specially trained teachers**. Along with them, general teachers should also work together as a team. Such teams can help by encouraging physically disabled children, providing necessary guidance, and taking steps for their **overall development**. The following measures can be helpful in this regard:

- Proper facilities such as **ramps and hand railings** should be provided in schools.
- **Wide corridors** should be available for easy movement.
- **Desks and benches** should be of suitable height.
- **Wide doorways** should be ensured.
- Visually and physically challenged children should be given **less written and homework**, and more importance should be given to **oral work and evaluation**.
- Efforts should be made to develop a helpful attitude among **normal children** so that they support their peers with disabilities.
- If possible, schools should provide **physiotherapy services** through trained professionals for such children.

In conclusion, parents, teachers, and members of society must come forward to ensure that **physical disabilities do not deprive children of opportunities**. With a positive attitude and collective cooperation, we can succeed in providing every child with a stable and meaningful life.

W CHECK YOUR PROGRESS

QNo. 1: Write two types of physical disability.

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Q No. 2: According to the Persons with Disabilities Act, 1995, what is meant by locomotor disability?

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Q No. 3: What are the categories of visually impaired children?

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Q No. 4: What is meant by “deafness” and “hard of hearing”?

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Question No. 5: Give examples of orthopaedic disability.

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9.9 Definition of Intellectual Disability or Mental Retardation

Children whose intelligence quotient (IQ) is below the average level of normal children can generally be considered intellectually disabled. Unlike normal children, such children are unable to read and write properly and fail to perform daily life activities efficiently. Even as their age increases, their mental development does not show normal progress. Like visual and hearing impairments, this is also a form of disability, but it is more complex.

According to the **American Association on Mental Retardation (1983)**, *mental retardation refers to significantly sub-average general intellectual functioning, which results in or is associated with concurrent impairment in adaptive behaviour, and is manifested during the developmental period.*

According to the **British Mental Deficiency Act, 1981**, *mental retardation is a condition of arrested or incomplete development of the mind existing before the age of 18 years, whether arising from inherent causes or caused by disease or injury.*

According to psychologist **Doll (1941)**, the concept and definition of mental or intellectual disability include six criteria. These are:

1. Social incompetence
2. Mental sub normality
3. Deficiency related to development
4. Retardation becomes evident by the time of maturity
5. Retardation is present from birth
6. It is essentially incurable

9.10 General Characteristics of Intellectual Disability (Mentally Challenged or Mental Retardation)

The general characteristics of intellectual disability are briefly mentioned below:

- Intellectual disability is a condition of intellectual functioning that is below the normal level.
- Such disability is usually observed during infancy, childhood, and adolescence.
- The causes of this disability may be biological or environmental.
- Intellectually disabled or mentally challenged children are unable to adjust properly.
- It is a mental condition of an individual and cannot be considered a disease.
- Mental retardation can be identified from a child's low performance in intelligence tests.

9.11 Causes of Intellectual Disability or Mental Retardation

Various studies have shown that children whose intelligence quotient (IQ) is below 70 can be considered intellectually disabled or mentally challenged. Although the exact causes cannot always be identified, they can be explained in the following ways:

1. Heredity:

Mental retardation may be caused by genetic abnormalities. A defect in the sex-determining chromosome, known as **Fragile X**, is one of the most common hereditary causes of intellectual disability. Accidental abnormalities during gene development can also lead to disability. For example, **Down syndrome** occurs due to an abnormal development caused by an extra chromosome and is one of the most common genetic causes of mental retardation.

2. Pre-natal Illness and Issues:

Research shows that if a mother consumes alcohol during pregnancy, the child may develop disabilities. Drug abuse and cigarette smoking during pregnancy are also major causes of intellectual disability.

Maternal infections and diseases such as **glandular disorders, rubella, toxoplasmosis, and cytomegalovirus infection** can lead to mental retardation. When a mother suffers from **high blood pressure (hypertension)** or **toxemia** during pregnancy,

the flow of oxygen to the fetus may decrease, resulting in brain damage and intellectual disability.In addition, congenital abnormalities can cause physical deformities of the brain and central nervous system, often leading to mental retardation. For example, **neural tube defects** are congenital abnormalities in which the neural tube that forms the spinal cord does not close completely. As a result, fluid may accumulate in the child's brain (**hydrocephalus**).

3. Abnormal Maternal Environmental Influences:

Deficiency of **iodine, folic acid**, or severe malnutrition in the mother during pregnancy can adversely affect the mental development of the child. The use of **nicotine, cocaine, and other drugs** is also highly harmful to the child's intellectual development. Furthermore, maternal conditions such as **high blood pressure during pregnancy, prenatal bleeding, placental abnormalities, diabetes, heart disease, and kidney disease** can cause mental retardation.

4. Complications During Delivery:

Difficult and complicated delivery, severe prematurity, very low birth weight, lack of oxygen at birth (asphyxia), or birth injuries can negatively affect a child's intellectual development. Similarly, conditions occurring soon after birth such as **jaundice, hypoglycaemia, brain infections** like tuberculosis and Japanese encephalitis, and severe or long-term malnutrition can be major causes of delayed mental development.

9.12 Classification of Intellectual Disability

Intellectually challenged children can be classified in the following ways:

1. Mild Mental Retardation:

About **85 percent** of the intellectually disabled population falls under the mild category. Their **IQ ranges from 50 to 75**. They can generally become self-dependent in life and, in some cases, can live independently with community and social support.

2. Moderate Mental Retardation:

About **10 percent** of the intellectually disabled population belongs to the moderate category. Their **IQ ranges from 35 to 55**. They can perform work and self-care activities under **moderate supervision**.

3. Severe Mental Retardation:

Approximately **3 to 4 percent** of the intellectually disabled population falls under the severe category. Their **IQ ranges from 20 to 40**. They may acquire only very basic self-care skills and some communication abilities.

4. Profound Mental Retardation:

In this category, the **IQ ranges from below 20 to 25**. With proper support and training, such individuals can develop basic self-care and communication skills. Profound mental retardation usually results from **congenital neurological disorders**, and individuals in this category require **intensive and continuous supervision**.

ẅ CHECK YOUR PROGRESS

Q No. 6: What is meant by an intellectually disabled child?

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Q No. 7: Mention two characteristics of intellectual disability.

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Q No. 8: Mention one major cause of intellectual disability or mental retardation.

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9.13 Guidance and Counselling Programme for Intellectually Disabled or Mentally Retarded Children

In this context, it is important to note that the degree of intellectual disability varies among children. Some of these children are capable of receiving formal education, while some are able to receive only training. Others require continuous supervision and care. From the discussion below, this situation can be clearly understood.

9.13.1 Guidance and Counselling for Educable Children with Intellectual Disability

For such children, guidance should generally be provided within regular schools according to their needs, and teachers should encourage them as much as possible

to learn according to their individual abilities.In the case of these children, it is commonly observed that they face difficulties in understanding **abstract and conceptual subjects**. Therefore, teachers can expect better results by giving guidance based on the principle of **"learning by doing."**For this category of children, teachers should pay special attention to the child's **interest in learning**. These children possess learning ability, but it is the teacher's responsibility to prepare them for learning by using suitable methods and techniques. Another important point to be noted is that educable mentally challenged children are unable to maintain attention on a subject for a long time. It is also observed that their **memory capacity is limited**. Therefore, to help them remember learning materials, the principle of **repetition** should be used during teaching.Another important point to note is that, while providing guidance to such children, **audio-visual aids and concrete materials** should be used so that learning through seeing and hearing becomes possible and the educational objectives can be achieved effectively. On the other hand, if the curriculum includes **reading and writing, arithmetic, household-related activities, livelihood skills, study of nature, measurement, leisure and recreational activities, and safe living practices**, children of this category will benefit greatly.

Moreover, for ensuring **holistic development**, encouragement and motivation should be provided for participation in **co-curricular activities** such as dance, music, sports, and handicrafts. The most important point to be noted is that children with this type of intellectual disability or mental impairment often face **neurological problems**. Therefore, to provide relief from such problems, the school authorities should invite a **neurologist at least once a month** to the school. Such awareness and initiatives can be expected to bring positive changes and light into the lives of these children.

9.13.2 Counselling for Trainable Children with Intellectual Disability

In the case of mentally challenged children who are capable of training, the following measures should be adopted by the school. These are as follows—

(a) First of all, teachers should keep in mind that while teaching these children, **concrete materials** should always be used, because mental impairment makes them incapable of understanding abstract concepts.

(b) One characteristic of these children is that they become **easily fatigued**. Therefore, instead of providing excessive academic instruction, emphasis should be given to **sensory training, self-care skills, and developing the habit of doing their own work independently**.

(c) In order to develop their **active and cooperative attitude**, arrangements should be made for **simple dramatization, storytelling, and group games**.

(d) Another important point is that for **language development**, certain **special aids** should be used through which children can acquire at least some degree of linguistic skills. Along with this, every possible effort should be made to **enhance their self-confidence**, and for this purpose, **training in handicrafts** should also be provided.

(e) According to findings from various research studies, **music is one of the most effective means of gaining strength and joy**. Therefore, music should be considered an **essential component** of education for these children.

9.13.3 Guidance for Custodial (Supervisable) Children with Intellectual Disability

These children are at the **lowest level in terms of intelligence quotient**. They are **custodial in nature**. Such children are **not capable of receiving formal education or training**. Therefore, they require **special care and supervision**. Through supervision, they can be taught certain basic activities. For example—

(a) They should be taught **basic self-care skills** such as using the toilet, eating food, and wearing clothes.

(b) Attention should be given to **self-protective activities**, such as **not going near fire** and **keeping away from poisonous insects and animals**.

w CHECK YOUR PROGRESS

Q No. 9: Mention the categories of intellectual disability.

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Q No. 10: Mention one guidance method for intellectually disabled children who are capable of learning.

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9.14 Concept of Learning Disability

Learning disability is a neurological condition that affects the brain's ability to receive, process, store, and respond to information. Children with learning disabilities may face difficulties in reading, writing, speaking, listening, understanding mathematical concepts, or general comprehension. Learning disabilities include disorders such as dyslexia, dyspraxia, dyscalculia, and dysgraphia.It may be noted that the definition of learning disability given in Public Law 94-142 by the Government of the United States has also been accepted in India. According to this definition:"Specific learning disability means a disorder in one or more of the basic psychological processes involved in understanding or using language, spoken or written, which may show itself in an imperfect ability to listen, speak, read, spell, or do mathematical calculations."This term includes conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. However, it is important to note that this concept does not include children whose learning problems are mainly due to visual, hearing, or motor disabilities, intellectual disability, emotional disturbances, or environmental, cultural, or economic disadvantages.Another important point is that some children may learn slowly in the beginning but later become able to learn and cope with reading, writing, and other activities. Similarly, some children may not be interested in certain types of learning and may prefer games or outdoor activities instead. These characteristics show the child's interests and do not indicate learning disability.

9.15 Causes of Learning Disability

According to experts, there is no single or definite cause of learning disability. However, certain factors can lead to this type of disability, creating difficulties for both parents and teachers. The main causes are explained below:

1. **Heredity:**In some cases, learning disability is related to heredity. If parents or other family members have such disabilities, there is a possibility that the newly born child may also develop learning disability due to genetic factors.

2. **Illness during birth and after birth:**Learning disability may occur due to illness or injury at the time of birth or after birth. Other possible causes include the use of drugs or alcohol during pregnancy, physical injury, poor growth of the fetus in the womb, low birth weight, premature birth, or prolonged and difficult delivery.
3. **Stress during infancy:**Mental stress after birth, such as high fever, head injury, or poor nutrition during infancy, can also lead to learning disability.
4. **Environment:**

   Deficiency of nutrients like iodine and folic acid in the mother's body can later cause learning disabilities in the child. In addition, lack of a proper nurturing environment can create such problems. Premature birth may also contribute to learning disability.

9.16 Common Signs of Learning Disability

Most children sometimes face difficulties in school. However, it is important to observe carefully. If a child is seen having continuous difficulty in mastering schoolwork, completing assignments on time, staying organized, or maintaining attention, it may be time to consider assessment for learning disability. The common signs of learning disabilities include:

- Difficulty in reading, writing, and mathematics
- Struggling to follow instructions
- Problems with attention and concentration
- Difficulty in staying organized or remembering things

On the other hand, the common types of learning disabilities include:

- Attention Deficit Disorder (ADD)
- Attention Deficit Hyperactivity Disorder (ADHD)
- Language Processing Disorder
- Dyslexia
- Auditory Processing Disorder
- Visual perceptual or visual-motor deficits
- Dysgraphia
- Dyscalculia

Children with learning disabilities may experience emotional problems such as

frustration, low self-esteem, and anxiety. Their social development and skills may also be delayed. In addition, other conditions may exist along with learning disability, which may require separate treatment and medication.

9.17 Guidance for Children with Learning Disability

According to the **Texas Council for Developmental Disabilities (2013)**, children and adolescents identified as having learning disabilities generally have disorders in one or more basic psychological processes related to understanding or using spoken or written language. As a result, these difficulties lead to academic problems.According to data from the **USA Centre for Learning Disability (2014)**, the prevalence of specific learning disabilities among school-age children (6–11 years) worldwide is **about 3.3%**. Among adolescents aged **12–17 years**, the prevalence is **2.6%**. Among adults aged **18–24 years**, it is **about 2.3%**. Among adults aged **18–65 years**, the prevalence is **2% in males** and **1.4% in females**. Among people above **65 years**, the prevalence is **about 0.3% in males** and **0.3% in females**.Children and adolescents with specific learning disabilities require remedial services that focus on specific areas of functioning. If special attention is given to the psychological needs of students with learning disabilities, they are more likely to succeed in learning tasks. Schools should arrange for the appointment of counselors, and these counselors can increase positive outcomes by building long-term therapeutic relationships. Since most of the difficulties faced by these children and adolescents are academic in nature, it is important to include teachers as team members while planning services for this group.International and national laws have made it mandatory to include children and adolescents with specific learning disabilities in regular classrooms as far as possible. Therefore, counselors need to coordinate with general education teachers and experienced specialists who provide special services to students with learning disabilities both inside and outside the classroom (UNESCO, 2018).With the cooperation of teachers and counselors, specific strategies can be planned for these children. These include teaching step-by-step methods for solving mathematics problems, using repetition, teaching outlining techniques, and using memory aids. In addition, classroom teaching methods can be modified by providing oral examinations, using computers, audio support, and tape recording facilities.Counselors can help teachers become role models for promoting social success of students with learning disabilities in the classroom. They can also work directly with these students to improve their low self-esteem and discuss

issues related to identity and long-term career planning with adolescents.Depending on need, the following types of therapy may also be helpful:

1. Child Psychotherapy:

This is a long-term treatment method based on the principles and theories of psychoanalysis. The counsellor works closely with the child with learning disability to explore suppressed emotions and desires that affect current thoughts, feelings, behaviour, and relationships. As therapy progresses, children learn to better identify and resolve problems and to build or improve interpersonal relationships.

2. Child Cognitive Therapy or Talk Therapy (CBT):

This is a practical approach that helps individuals with learning disabilities change their patterns of thinking. It focuses on modifying attitudes, beliefs, and behaviours to solve personal problems. It is usually a short-term, goal-oriented method used to treat general anxiety and related issues.

3. Solution-Focused Therapy (SFT):

This approach helps students with specific learning disabilities strengthen their ability to solve life problems rather than focusing only on a particular problem. Overall, it helps learners move in a future-oriented direction.

4. Sensory Integration Therapy:

This therapy helps individuals with learning disabilities organize and respond appropriately to sensory input received through the five senses. It supports the child's nervous system in responding more effectively and in a more organized way to sensory stimulation.

Finally, counselors may also use **family therapy** to reduce stress experienced by the family due to the child's condition. One of the most valuable outcomes of family therapy is the strengthening of family bonds.

ẅ CHECK YOUR PROGRESS

Q No. 12: Mention any one cause of learning disability.

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Q No. 13: What are two common signs of children with learning disability?

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Q No. 14: Mention any one type of learning disability.

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Q No. 15: What is meant by child psychotherapy?

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9.18 Let us Sum Up

- While giving guidance and counselling, apart from students' interests, talents, attention, and intelligence quotient, the following categories need special consideration:
    1. Physically disabled children
    2. Intellectually disabled children
    3. Children with learning disabilities
- Physical disability refers to limitations in a person's physical functioning, mobility, coordination, or stamina.
- The types of physical disability include:
    1. Visually impaired children
    2. Hearing impaired children
    3. Speech impaired children
    4. Orthopedically impaired children
- Children whose intelligence quotient (IQ) is below the average level are generally considered intellectually disabled. Weakness in intellectual functioning is also called mental retardation.
- According to psychologist Doll (1941), mental retardation has six criteria: social inadequacy, intellectual deficiency, developmental delays, lack of maturity at the final stage of development, presence from birth, and the need for remedial measures.
- Research shows that heredity, diseases and complications during childbirth, and the effects of an abnormal maternal environment can be causes of intellectual disability.
- Mental retardation or intellectual disability can be classified into mild, moderate, severe, and profound levels.

- By adopting special instructional programs in schools, such children can be guided towards a better life. For this, awareness and cooperation of both teachers and parents are essential.
- Learning disability is a neurological condition that affects the brain's ability to receive, process, and transmit information.
- Children with learning disabilities may face difficulties in reading, writing, speaking, listening, and understanding mathematical concepts. These include dyslexia, dyspraxia, dyscalculia, and dysgraphia.
- Heredity, illness during and after birth, stress during childhood, and environmental factors are considered the main causes of learning disabilities.
- The signs of learning disabilities include difficulties in reading, writing, and mathematics; struggling to follow instructions; problems with attention; and difficulty in organization and memory.
- With the help of child psychotherapy, child cognitive behavioral therapy, solution-focused therapy, and similar approaches, children with such difficulties can be supported to lead a better life. In this process, the role of teachers and parents is very important.

K 9.19 Answers to Check Your Progress

Answer to Question No. 1:

Two types of physical disability are:

1. Hearing impairment
2. Visual impairment

Answer to Question No. 2:

According to the Persons with Disabilities Act, 1995, a condition in which movement of the limbs becomes restricted due to disability of joints or muscles, or due to any type of paralysis of the brain, is called *locomotor disability*.

Answer to Question No. 3:

Types of visual impairment are:

1. Total blindness
2. Inability to see up to a distance of 6 meters or 20 feet, or less than that
3. Visual field less than 20 degrees

Answer to Question No. 4:

Deafness is a severe disability, while hard of hearing is a less severe disability.

Answer to Question No. 5:

Examples of orthopaedic disability include lameness or limping, deformity of the spine, arthritis, etc.

Answer to Question No. 6:

Almost all children whose intelligence quotient (IQ) is below the average level of normal children.

Answer to Question No. 7:

Two characteristics of intellectual disability are:

1. Such disabilities are usually seen during infancy, childhood, and adolescence.
2. The causes of these disabilities may be biological or environmental.

Answer to Question No. 8:

Complications during childbirth.

Answer to Question No. 9:

The categories of intellectual disability are:

1. Mild intellectual disability
2. Moderate intellectual disability
3. Severe intellectual disability
4. Profound intellectual disability

Answer to Question No. 10:

Instruction should be provided by giving importance to the principle of “learning through work.”

Answer to Question No. 11:

“Specific learning disability means a disorder in one or more mental processes related to understanding or using language, spoken or written, which may show itself in an imperfect ability to listen, speak, read, spell, or do mathematical calculations.”

(Public Law 94-142, Government of the USA)

Answer to Question No. 12:

One cause of learning disability is heredity.

Answer to Question No. 13:

Any two signs of children with learning disabilities are:

1. Problems with attention
2. Problems with memory

Answer to Question No. 14:

One type of learning disability is *language processing disorder*.

Answer to Question No. 15:

Child psychotherapy is a long-term treatment method based on the principles and theories of psychoanalysis.

O 9.20 Further Reading

- Sharma R. A. (2001) : *Fundamentals of Guidance and Counselling.* R. Lall Book Depot, Meerut Publishers, Delhi.
- Sharma, Ram Nath and Sharma, Rachana (2007) : *Guidance and Counselling in India.* Atlantic Publishersh, Delhi.
- Suri S. P. & Sodhi T. S. (1997) : *Guidance and Counselling,* Bawa Publications, Patiala.
- Crow L. D. and Crow (1962). *'An Introduction to Guidance Principles and Practices',* New Delhi : Eurasia Publishing House.
- Rao, Narayan (1981). *'Counselling Psychology'* MC Graw Hill Publishing Co. Ltd. New Delhi.

M 9.21 Model Questions

Short Questions

Q1: For what reasons can a child become physically disabled?

Q2: What is the full form of IDEA?

Q3: According to Van Riper, what is speech disorder?

Q4: Write the meanings of *Orthos* and *Paidos*.

Q5: Mention two types of orthopedic disability.

Q6: Define mental retardation or intellectual disability.

Q7: Mention two characteristics of intellectual disability.

Q8: How can heredity become a cause of intellectual disability?

Q9: What is meant by mild mental retardation?

Q10: Mention one difference between children with severe mental retardation and profound mental retardation.

Q11: Define learning disability.

Q12: Mention three causes of learning disability.

Q13: Mention the common signs of learning disability.

Q14: Mention the different types of learning disabilities.

Q15: Mention the information given by the USA Centre for Learning Disabilities (2014) regarding learning disabilities.

(B) Long Questions

Q 1: Discuss the identification of visually impaired children and the guidance and counseling to be provided to them.

Q 2: Write a short note on the identification of hearing-impaired children.

Q 3: What kind of steps should teachers take for children with speech impairment? Discuss.

Q 4: Describe the types of orthopedically disabled children and the measures schools should take for them.

Q 5: Explain the concept of intellectual disability or mental retardation. Discuss the causes of mental retardation in detail.

Q 6: Explain the classification of intellectual disability with examples.

Q 7: Explain how a school can implement guidance programs for children with intellectual disability.

Q 8: How can heredity be a cause of learning disability? Also discuss other causes of learning disability in detail.

Q 9: Discuss the guidance measures for children with learning disabilities.

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