

# **Learning Disabilities: Implications for Policy Regarding Research and Practice**

## **A Report by the National Joint Committee on Learning Disabilities March 2011**

The National Joint Committee on Learning Disabilities (NJCLD)<sup>1</sup> affirms that the construct of learning disabilities (LD) represents a valid, unique, and heterogeneous group of disorders, and that recognition of this construct is essential for sound policy and practice. An extensive body of scientific research on LD continues to support the validity of the construct. Historically, “specific learning disability” (SLD) has been recognized and defined by the U.S. Office of Education since 1968 (U.S. Office of Education, 1968). However, recent discussion about retaining the LD category has prompted this overview of critical issues in the field of LD and their implications for policies that affect individuals with LD.

This paper addresses points of general agreement in the field of LD, common misperceptions regarding LD, and unresolved issues in scholarship and practice, which inform the NJCLD’s policy recommendations regarding LD research and practice. The paper presents neither all agreements nor all controversies in the field of LD; the NJCLD’s purpose in presenting this document is to establish a basic consensus upon which to build policy for the United States.

### **Understanding LD: Consensus and Controversies**

Even though a great deal is known about LD, the field has been the subject of controversies for most of its history. This section of the paper addresses points of agreement, common misperceptions, and unresolved issues.

#### **Points of General Agreement About LD**

There is general agreement that LD are neurobiologically based, involve cognitive processes, and affect learning. LD persist in various forms across the life span, with precursors—most often language delays or language deficits in early childhood—appearing before formal schooling begins and continuing into adulthood (NJCLD, 2008). Furthermore, LD occur regardless of such factors as an individual’s culture, race, language, gender, or socioeconomic status.

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<sup>1</sup> This is an official document of the National Joint Committee on Learning Disabilities (NJCLD). The following are the member organizations of the NJCLD: American Speech-Language-Hearing Association, Association of Educational Therapists, Association on Higher Education and Disability, Council for Learning Disabilities, Division for Communicative Disabilities and Deafness, Division for Learning Disabilities, International Dyslexia Association, International Reading Association, Learning Disabilities Association of America, National Association of School Psychologists, National Center for Learning Disabilities, and Recording for the Blind & Dyslexic.

SLD is one of the 13 disability categories in which students may qualify for special services under the Individuals with Disabilities Education Improvement Act of 2004 (IDEA 2004). The definition of SLD employed in federal education laws refers to disorders that adversely affect learning but are not primarily the result of other disorders such as intellectual disability or hearing impairment. Notably, eligibility for special education services is determined by a student's educational performance and is therefore influenced by the quality of instruction and other aspects of the educational setting. Currently, all 50 states report that approximately half of the students found eligible for special education are served under the SLD category (U.S. Department of Education, 2008). Individuals with LD are also protected under the Americans with Disabilities Act of 1990 as a disability that affects activities of daily living.

Individuals with LD may experience significant difficulties in one or a combination of areas of educational performance. IDEA 2004 identifies eight areas of underachievement: listening comprehension, verbal expression, basic reading skill, reading fluency, reading comprehension, written expression, mathematical computation, and mathematical problem solving. Although various disciplines identify aspects of LD using different terms, such as dyslexia, reading disorder, dyscalculia, math disability, dysgraphia, and disorders of written expression, there is agreement that these are types of LD.

LD may coexist with other disorders. For example, individuals with LD also may manifest social-emotional, behavioral, or attentional difficulties, which may be either concomitant or secondary to LD. Although individuals with LD may share some characteristics with individuals who have other disabilities, the defining characteristic of LD is that the cognitive processes affecting learning are the primary determinants of the educational difficulties that the individual with LD experiences. In addition, since language is an integral part of learning, deficits of language and communications, in general, are often at the core of LD.

LD exist across cultures, races, and languages, but they may differ from one culture or language to another. These differences may complicate identification, assessment, and instruction for students with LD, and they may pose problems for educators. English language learners may be mistakenly considered to have LD or be overlooked for LD services because of limitations in their understanding and use of English. Understanding a student's needs depends upon schools' capacities to assess whether LD are evident in the student's primary language. Although educators often express concern about false-positive identification of students with disabilities, false negatives (e.g., failing to provide services to a student with LD because learning difficulties are mistakenly attributed to exposure to multiple languages) are also a substantial cause for concern.

Individuals identified as intellectually gifted may also have LD. Although twice-exceptional individuals may appear to be functioning adequately in the classroom, their performance may be far below what they are capable of, given their intellectual ability. As a consequence of the students' ability to compensate for their LD-related challenges until the volume or intensity of work or assessment and grading procedures pose barriers to demonstrating their learning or accomplishing required tasks, educators often overlook these students until late in their academic careers.

Most students with LD have an uneven pattern of strengths and weaknesses that affect learning. The problems experienced by these students vary in severity and pervasiveness; some students experience deficits in one area of functioning, and others experience difficulties in multiple areas of functioning. Regardless, students with LD require instruction and support that are differentiated in ways that address their specific learning needs.

Diverse disciplines—including education, psychology, speech-language pathology, and medicine, among others—have broadened understanding of the neurobiological and neuropsychological aspects of LD. Promoting collaborative research across disciplines provides an evidence base that can be expected to advance the informed application of strategies, interventions, and best practice in addressing the needs of this population.

### **Common Misperceptions About LD**

Common misunderstandings can result in policies and practices that create barriers to appropriate services for individuals with LD. Some misconceptions are clearly mistaken and harmful (e.g., individuals with LD are lazy, or students with LD simply need greater motivation to succeed). Other misconceptions are more subtle, but they are equally insidious (e.g., LD are mild disabilities, LD can be cured, LD are synonymous with reading problems, or the term *LD* is a catchall term for other disabilities).

One common misperception regarding LD is that they are mild impairments. An individual's LD may appear to be mild (perhaps even nonexistent) in some circumstances and more severe in other circumstances. Because learning demands, environments, and supports vary greatly across contexts and across the life span, variation in the functional impact of LD occurs. Each individual possesses an array of unique strengths and limitations representing a continuum of risk and resilience that greatly affects the extent to which LD interferes with learning and success across the lifespan.

A second misperception is that high-quality instruction in the general education classroom or in supplementary intervention programs can prevent or eliminate LD. High-quality instruction can mitigate the negative effects of LD. This is especially true when intervention occurs early in an individual's life (NJCLD, 2006). However, many individuals with LD will need specialized instruction, accommodations, and compensatory strategies throughout life. Assurance of high-quality instruction and supplementary intervention programs can reduce the number of false positives.

A third misperception occurs when LD are thought of as synonymous with a reading disability. Although the majority of students identified with LD in school have reading problems, LD also encompasses deficits in areas such as listening, speaking, mathematics, written expression, social-emotional, and executive functions. These areas have lagged behind reading in research, funding, level of understanding, and impact on public policy.

A fourth misperception involves the term *LD* being used as a generic term for individuals with other disabilities. People in media, parents, and even educators mistakenly use LD to refer to students with intellectual and developmental disabilities, hearing impairments,

autism, and other disabilities. These references treat LD as a catchall term, diluting the concept of LD and threatening its integrity.

### **Unresolved Issues in Scholarship and Practice**

There is general agreement within the scientific community that LD are a manifestation of atypical cognitive and linguistic processes that interfere with learning, but controversies exist about assessment, identification, and prevalence because of the complex nature of these processes. LD are a widely accepted construct, and they can be readily identified in their more severe forms. However, the underlying mechanisms of LD are complex, and they are the subject of steadily advancing cognitive and biological science. The following are some reasons why there are unresolved issues:

- The cognitive processes underlying an individual's LD are often difficult to pinpoint. The processes underlying acquisition of early literacy skills have been established, but the processes underlying other areas, such as written expression, mathematics, and social cognition, are not as well understood.
- The learning problems associated with LD are distributed along a continuum, so there is no naturally occurring cut point that can be used to differentiate between individuals with and without LD.
- Environmental factors or stressors (e.g., lack of educational opportunity or appropriate instruction, linguistic diversity, poverty, or emotional interference) can have effects on learning that are often difficult to distinguish from manifestations of LD.
- The assessment of cognitive processes has been used in clinical evaluation and to determine eligibility for special education services, but there is conflicting evidence regarding its value in LD identification or in informing educators about the efficacy of specific instructional methods.

Historically, LD has been identified in an exclusionary manner, referring to the absence of other explanatory factors such as intellectual disability. "Unexpected underachievement" has often been cited as the defining characteristic of LD. As research progresses and assessment measures improve, our understanding of LD as underachievement that cannot be explained by other causes is shifting toward the use of comprehensive identification procedures that help predict the probability of underachievement and inform instruction. We are coming to recognize that deficiencies in certain cognitive processes are indicators of LD that predict and, therefore, result in expected underachievement.

The relative merits of different methods of LD identification have been the subject of particularly heated controversy. One long-standing method is to interpret a battery of psycho-educational assessment data, usually focusing on a student's pattern of strengths and weaknesses. In 1977, federal special education regulations introduced the use of an ability-achievement discrepancy method of LD identification. Due to criticisms of the theoretical, psychometric, and empirical shortcomings of the discrepancy approach, the 2004 reauthorization of IDEA allowed for the use of a response to intervention (RTI) approach (NJCLD, 2005) as well as other scientifically based approaches to LD identification. RTI relies on an analysis of academic performance over time to determine whether a child has both continued underachievement and an insufficient rate of

improvement when provided with appropriate instruction and targeted interventions. No single method has proven superior as a means of making diagnostic decisions or sufficient as a sole source of evaluation data. The 2010 NJCLD report *Comprehensive Assessment and Evaluation of Students With Learning Disabilities* provides guidance in this area (NJCLD, 2010).

Another unresolved issue is the prevalence of LD. Estimates range as high as 20% of the population, but recent reports to Congress on IDEA usually show that about 5% of school-age children and youths are receiving services under the SLD category. IDEA prevalence rates vary from state to state and even school to school. LD prevalence estimates vary as a result of how each state sets eligibility criteria and depending on the source of data (epidemiological, survey, child count, or research). Some of the variation in estimates may underrepresent prevalence; for example, data indicate that 15% of the population have dyslexia, which is only one of the disabilities served under LD, so it follows that the total prevalence of LD is greater than 15%. The identification of LD and determination of eligibility for services are two distinct concepts that influence reported prevalence rates.

### **Implications for Policy Decisions Regarding Research and Practice**

Current research and reasoned principles should guide policies concerning LD. Policies must ensure that students with LD have access to expert instruction, appropriate related services, and a quality education. In this section, the report discusses four key principles and presents a set of recommendations about policies related to LD.

#### **Principles**

To establish effective policies, government officials and educational leaders must understand the nature of LD and the needs of individuals with LD. Individuals with LD contribute in positive and meaningful ways to the social and economic good. It is vital to adopt policies that promote their success in school, at work, and in the community.

1. Individuals with LD are entitled to equal access to high-quality instruction and support including needed accommodations and special services. Recent alignment of the nation's general education and special education laws—IDEA and the Elementary and Secondary Education Act (ESEA)—has led to systemic change in K–12 education. For example, state and local education agencies and individual schools must now set academic standards, implement research-based practices, and administer assessments to ensure that students, including students with LD, make meaningful educational progress. Such informed public policy has a direct and substantial effect on individuals with LD and, therefore, has positive consequences for schools and communities.
2. Policies must apply not only to early childhood education and K–12 but also to other aspects of individuals' lives. Supports should continue into higher education, employment, and across the life span. Supports also must ensure that individuals with LD are provided with access to high-quality instruction, intervention, accommodations, and modifications that enable them to participate in and benefit from education, work, recreation, and other opportunities available to individuals without disabilities.

3. Policies must promote effective preservice education and ongoing professional development for individuals who provide services to persons with LD. Teachers, administrators, related service professionals, and educational specialists must be able to use evidence-based practices competently. Effective practice must be implemented in ways that are sensitive to individual characteristics and educational contexts (e.g., social, cultural, linguistic, and social-emotional).
4. Policies must promote access and positive outcomes for individuals with LD. Recent changes in K–12 accountability requirements have resulted in increased participation in statewide assessments, with corresponding increases in the proportion of students meeting achievement standards, receiving access to accommodations, graduating from high school, and matriculating into higher education.

In creating new policies, legislators at federal and state levels must consider both the intended and unintended consequences of policies as they affect individuals with LD. Policies should support continued recognition of the category of LD and ensure that educators and others employ practices that benefit individuals with LD.

## **Recommendations**

The NJCLD recommends that federal and state governments pursue the following policies and activities:

- Maintain SLD as a distinct eligibility category under educational laws
- Preserve accountability requirements for students with LD as mandated under educational laws
- Increase coordination of IDEA and ESEA, which will lead to opportunities of equal access
- Expand preservice education and support and fund professional development in the use of evidence-based practices, knowledge, and skills for educators and others who serve individuals with LD at the K–12 and postsecondary levels of education
- Support implementation of research-based practices, including universal screening of skills needed for academic success; teaching that employs curricula, methods, and procedures that have demonstrated effectiveness; and monitoring of student progress toward educational goals and objectives
- Increase and fund targeted, high-quality research on the nature and causes of LD, reliable and valid assessment for LD identification, effective instruction, and appropriate accommodations for individuals with LD
- Expand research activities examining oral language, listening and reading comprehension, mathematics, written expression, and social-behavioral competence, areas of critical importance to the field of LD

## Summary

Policy makers must clearly understand the issues affecting individuals with LD, including both points of general agreement and misperceptions about this disorder. Federal laws and regulations for accountability have brought increased attention to how educators and other professionals serve students with LD and the students' performance on statewide assessments. Although improvements in the performance of students with LD have occurred, continued federal, state, and local leadership is critical to ensure vigilance in protecting the rights of all individuals with LD, to sustain commitment to provide appropriate services, and to educate the professionals who serve them.

The NJCLD strongly recommends the continuation of federal laws and regulations that (a) maintain SLD as a separate eligibility category in the IDEA, (b) ensure equal access to high-quality instruction and services that support the needs of individuals with LD through the life span, and (c) promote improved practice through sustained funding for research and training. LD are real and debilitating disorders. Neither the existence of common misperceptions nor unresolved issues regarding LD should impede policies that protect the rights of individuals with LD and ensure their access to appropriate services.

## References

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