

A STUDY OF PREVALANCE OF CHILDHOOD LEARNING DISORDERS IN SCHOOLSManjunathswamy R¹, Ramprasad K. S²**HOW TO CITE THIS ARTICLE:**

Manjunathswamy R, Ramprasad K. S. "A Study of Prevalance of Childhood Learning Disorders in Schools". Journal of Evolution of Medical and Dental Sciences 2014; Vol. 3, Issue 68, December 08; Page: 14588-14591, DOI: 10.14260/jemds/2014/3959

ABSTRACT: AIM & OBJECTIVE: The primary aim was to analyze the various learning problems in school going children, especially concentrating on primary schools. **RESEARCH DESIGNS AND METHODS:** Children with disabilities like visual impairment, orthopedically impaired, hearing impaired, autistic spectrum disorder, borderline or mild mental retardation and those with learning disabilities or with multiple disabilities were being included in the present study. There are evidences that because of physical health, social factors or economic backwardness, the school attendance was hampered. The data of school children from the district education office is been taken and analyzed for the same. **RESULTS:** The result showed that 39% had mental sub-normality, 10% orthopedically challenged, 1.5% suffering from cerebral palsy and 50% had multiple disabilities. **CONCLUSION:** The right to education policy by Government of India is a good policy which has a good impact on the education of the children. A single window approach for addressing various problems in children may be useful. This study needs replication at different districts to know the overall status.

KEYWORDS: Mental retardation; Learning disability; Cerebral palsy; Autism.

INTRODUCTION: Childhood is a very interesting period in one's life. The fulfillment of the need and its acceptance is governed by many factors like biological, social, financial, environmental and cultural factors. In India we are trying to delineate the glaring problems faced by these children. School education is a challenge for children who do not have any experience in going out of the caring environment. The teachers have to accommodate them and teach the educational material which is a challenging work. The causes are varied like genetic, gender, social and environmental. In developing countries, finance in the form of socioeconomics is also a contributory factor in addition to the acceptability of the subject (teacher) by the child. The nutrition in the age group less than 5years also plays a key role. Poverty also has its own way of influence over school attendance. Attention and concentration are the main necessary things needed in children for learning process. This is helped by intact sensory organs and brain functions for perceiving and processing the inputs.

MATERIAL AND METHODS: The District education authorities data is been taken for analysis with permission and analyzed. This includes all the children in the district of Shimoga, Karnataka state, India.

Inclusion Criteria: The school registered students in normal schools in the district of Shimoga are included.

Exclusion Criteria: Special education school students were not included.

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RESULTS: 9.6% of children were suffering from orthopedic impairment, 39% children were having borderline or mild mental sub normality, 50% of children were suffering from multiple disabilities and only 1.5% was suffering from cerebral palsy. There were no children with autism. The proportions of the students were predominantly boys and in total 55% of the disability sufferers were boys showing the male preponderance in all types of disabilities.

LOW VISION		TOTAL BLIND		HEARING IMPAIRED		SPEECH IMPAIRED		ORTHOPEDIC IMPAIRED		MENTAL RETARDED		MULTIPLE DISABILITY		SPECIFIC LEARNING DISABILITY		CEREBRAL PALSY		AUTISTIC SPECTRUM DISORDER		TOTAL		
B	G		G	B	G	B	G	B	G	B	G	B	G	B	G	B	G	B	G	B	G	T
0	0	0	0	0	0	0	0	17	14	72	54	87	73	0	0	3	2	0	0	179	143	322

Table 1: SEX DISTRIBUTION OF VARIOUS DISORDERS IN STUDY POPULATION [B=BOYS, G=GIRLS]

DISCUSSION: This study is done in both government and private institutions. The inclusions of special school were not done. Majority of the students in the school were from the government school and were in the low socio-economic status dwelling in the rural settings. Though Shimoga district known for its richness in the natural resources, and intellectuals the school attendance is been dominated by boys than girls. Similarly the boys outnumber girls in all the disabilities also. The Autistic disorder students, low vision, Blind, Hearing impaired, Speech impaired, and Specific learning disability students were not found in the schools in this study as students in special school were not included. Only the orthopedically challenged and those with borderline and mild (learning disabilities) mental sub-normality students enrolled in the school were in the study.

REVIEW OF LITERATURE: Every fifth child in the world and every third malnourished child in the world lives in India. Every second child is underweight and three out of four children in India are anemic. Every second new born has reduced learning capacity due to iodine deficiency. School retention rate at primary level is 71.01%. Girls' enrolment in schools at primary level is 47.79%. A total of 1104 lakh child labor in the country. Children born with low birth weight are 46%, Children under 3yrs with anemia are 79%. Immunization coverage is very low (polio-78.2%, measles - 58.8%, DPT - 55.3%, BCG - 78%).¹

Autism spectrum disorder (ASD) is a set of complex neurodevelopment disorders that include autistic disorder, Asperger disorder, and pervasive developmental disorder not otherwise specified.² ASD symptoms typically can be identified in children as young as 18 months.³ American Academy of Pediatrics recommends developmental screening of all children by age 24 months.⁴ The increases in ASD prevalence reported here extend an ongoing trend observed in the United States and other developed countries over the past several decades.^{5,6,7} Epidemiologic, genetic, and neuroscience research points to the prenatal period as the key exposure window for ASD risk factors.^{8,9}

An increase in ASD recognition by community providers and proportion of new ASD, without previous diagnosis has declined steadily and so total ASD prevalence rates have shown marked increases.¹⁰

Single window operation for child mental health, education, and welfare will surely go a long way in successful implementation of various plans and policies related to child in India.¹

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Tsuzuku and Kaga and others have reported learning disabilities and delayed development in walking and balance abilities in children with vestibular system anomalies.^{11,12,13,14,15,16} Schaaf reported that incidence of vestibular disorders was high in developmentally delayed preschoolers with a history of otitis media.¹⁷

1-3% of the general population is affected with mental retardation¹⁸. Prematurity and birth asphyxia are responsible for neurological deficits.¹⁹

Volpe and Hack et al showed that low birth weight children were found to develop mental retardation and motor abnormalities at their school age.²⁰

CONCLUSION: The school studies of children with mild handicaps should go along with normal children, this concept is very good as it helps the child to setup high goals in school and try to achieve it. This policy of the Government is excellent. This necessitates the teachers to be more vigilant and intrusive in knowing difficulties faced in learning and the backwardness of the student and teach them in accordance. A single window approach for addressing various problems in children may be useful. This study needs replication at different districts to know the overall status. Thanks to Sarva Shikshan Abhyan, Deputy Director of Public Instruction (DDPI) office Shimoga for providing the school children data of Shimoga district needed for this paper.

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Date of Submission: 01/12/2014.
Date of Peer Review: 02/12/2014.
Date of Acceptance: 03/12/2014.
Date of Publishing: 05/12/2014.