

# History of Learning Disabilities: Reflection on the Development of the Concept and Assessment

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## Abstract

The history of the concept and identification of Learning Disabilities (LD) has important stages of development which should be considered by the researchers of this field. This development includes different thoughts and experiments which are still controversial until recently. This paper discusses this development and divides it into four periods which consider different factors of each period such as: the location, scholars and critical perspectives and practices. Discussion about the impact of the history on the current period is provided.

**Index terms**— concept and identification, development and divides, impact of the history.

## 1 Introduction

The term of Learning Disabilities (LD) is known in some countries as Specific Learning Difficulties SpLD or dyslexia (Alnaim, 2015). This paper attempts to consider mainly the concept and identification issues of LD. Understanding how a field of knowledge has developed is important for readers and researchers in that field. Firstly, investigating the history of LD can inform researchers about how Students With Learning Disabilities (SWLD) have been treated and taught during different periods of time. Secondly, exploring perspectives and consequences of previous methods of identification and teaching LD sufferers provides a strong foundation to build new thoughts and perspectives. Thirdly, it is interesting to be aware about how this field was established and developed and how much effort, time and research have been dedicated to this field until now.

Different studies divided LD history into roughly similar periods (Guardiola, 2001; Hallahan & Mercer, 2001; Lerner, 2000; Lerner & Johns, 2009; ??iederholt, 1974). I will follow a method similar to these history frames, particularly the outlines proposed by Hallahan and Mercer (2001). This is mainly because these author's outline highlights the nations where this field mainly developed. History of LD was divided into the following four periods: European foundation (1800 to 1920), US foundation (1920 to 1965), emergent period (1965 to 1980), and revision and progression period (from 1980 until recently).

## 2 a) European foundation (1800 to 1920)

Among the many researchers (Broadbent, 1872; Gall & Spurzheim, 1810) who played important roles in this period, two researchers were very influential.

Author: University of Manchester, United Kingdom. e-mail: fahad.alnaim@postgrad.manchester.ac.uk Firstly, around 1877, Adolph Kussmaul was the first to identify reading inability and termed it 'word blindness', which introduced awareness that reading may have its own disability. Kussmaul raised this concept after finding out that recognizing written words was the only problem of one of his patients who had no other disabilities (Anderson & Meier-Hedde, 2001). Interestingly, about ten years after the term "word blindness" appeared, the term 'dyslexia' was produced by Berlin (1887). These two terms have similar concepts. The other influential researcher in this field was Pringle Morgan in the UK, which is a leading country in the area of LD research. His work involved deep-rooted research that studied LD more than a century ago. This consideration of LD has lasted up until very recently and assists to reform, construct and develop understanding of the various issues related to LD. The earliest consideration of LD in the UK first emerged in 1896 when the British Medical Journal published

an article by Pringle Morgan entitled "A Case of Congenital Word Blindness" (Morgan, 1896). The article encouraged researchers and built a basis for research to study other cases of LD (Anderson & Meier-Hedde, 2001). More recent studies can be considered as one of the later efforts based on much research which have built on Morgan's article on word blindness.

### 3 b) US foundation (1920 to 1965)

Interest and research on LD continued in Europe (Hallgren, 1950; Hermann, 1956; Hermann, , 1959;; Norrie, 1939) during this period. However, the most critical progress of LD research occurred in the US. There was important progress in identification, teaching methods and theories related to LD. Samuel Orton was one of the greatest LD scholars in this period in particular. Two aspects of his work should be highlighted here. Firstly, as he was interested in seeking methods the help children overcome reading disabilities, Orton (1937) produced the first multisensory training, for which he is credited. Secondly, Orton recorded significant results based on his observation of students with reading disabilities, including their IQ test scores which were average or above average. This observation played an important role in shaping this field, particularly in the area of identification methods (Hallahan & Mercer, 2002). This is based on the premise that LD can be overcome and managed if SWLD should be taught in the correct way according to LD research. assessment of LD. The difference between actual and expected achievement is a concept which was introduced by Monroe (1932) as an approach to identify students with reading disabilities (Hallahan & Mercer, 2002). Samuel Kirk developed the Illinois Test of Psycholinguistic Abilities (ITPA) to identify specific learning disabilities in children (Kirk, McCarthy, & Kirk, 1961). Although many studies mentioned the term 'learning disabilities' in the nineteenth century, Kirk was the first to specify this term by a definition (Kirk, 1962(Kirk, , 1963)). This term is still used in many countries. c) Emergent period ??1965 to 1980) In this period, LD became politicised and no longer just an educational or theoretical issue. Also, the attention to LD started to grow in the general public and to have official sectors. In the UK, the subject of LD started to appear in policies in 1970 when acute dyslexia was covered in The Chronically Sick and Disabled Persons Act, Section 27 (Soler, 2009). This was followed by several reports that paid attention to dyslexia (Bullock Report, 1975; Department of Education and Science, 1972; Warnock, 1978). In the US, LD was introduced and listed in the agenda of the Federal Government. In that, the Federal Government mandated in 1969 to develop the field of learning disabilities to be a distinct entity within special education (Hammill, 1993). Organisations related to LD were funded by parents and professionals, and different educational programmes for SWLD were initiated (Hallahan & Mercer, 2002). Following this development, a model of resources room appeared. In the resources room, SWLD receive the required special instruction while the rest of the school time must be spent in regular classrooms. Accordingly, this official development in the education sector enhanced public awareness of LD (Lerner & Johns, 2009).

Furthermore, studies on the definitions and identification tools of LD further progressed. For example, more definitions were introduced (Hammill, Leigh, McNutt, & Larsen, 1981; U.S. Office of Education, 1968), Monroe's discrepancy model was reproduced (Bateman, 1965) and Kirk, McCarthy, and Kirk (1968) revised the assessment tools of ITPA.

### 4 d) Revision and progression period (1980 until recently)

As LD became an official consideration as different interventions and assessments were adopted in the previous period, researchers revised the results observed in the wide range of the educational sector. Identification of LD took in wider arguments and changes in trends. In the late 1990s, there was a concern in the US that the percentage of students who have been identified as SWLD increased and exceeded 50% of students with special needs which indicated probable errors in diagnosis (U.S. Department of ??ducation, 2000). Also, the misidentification issue led researchers to doubt the effectiveness of the discrepancy approach and to investigate or develop other ways to find a more accurate method to deal with students who were suspected of having LD. One of the main models developed to overcome this problem is the response-to-intervention (RTI) model which aims to treat students in a careful, inclusive and precise manner (Kavale, Holdnack, & Mostert, 2005). A significant increase is documented in the use of assistive technology to support SWLD in different aspects of learning difficulty such as speech synthesis (text-to-speech), voice recognition (speech-to-text), organisation and memory (Draffan, 2002; Forgrave, 2002).

## 5 II.

## 6 Conclusions

From a historical point of view, one can notice that some ideas still have an effect in the present programmes and legislations. Furthermore, it can be seen that the real beginning of the concept of LD as a specific field was about 100 years ago. This period of time for this field can be considered a short period compared to other fields of education or psychology. Therefore, significant progress and research is expected to follow, which might result in significant changes in concepts and trends related to LD. Stanovich (2005) encouraged looking for better ways in identification and focused on passing IQ related discrepancy while warning against being behind scientific progress stating that "the field suffers greatly from its tendency to base practice on concepts and psychometric

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102 technologies that have been superseded by subsequent scientific advance” ??Stanovich, 2005, p. 103). What is  
103 important to say here is that the essential matter is not to look for change, but it is the need to take advantage  
104 of previous research and experiences. As LD is a new field, some developing countries might still be behind.  
105 The late start of planning a programme or an intervention for SWLD is not the major problem; however, the  
106 concern is related to such questions as: do the interventions consider change and develop ways of identification  
107 based on the latest research? Or does it base its practice on the instructions adopted at its first launch? For  
108 example, awareness about the RTI model (even if it is not used) indicates a trend of keeping pace with historical  
109 development of LD. Understanding the latest developments does not necessarily mean applying them in practice.  
110 However, this awareness might be applied to identify certain mistakes and to change and develop the initially  
111 adopted way of managing LD.



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## 6 CONCLUSIONS

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