

Students with Learning Disabilities: Risk Factors and Strategies for Building Resilience

Ann K. Rogers, PhD, NCSP
WPS

Presenter Disclosure

Ann K. Rogers, PhD, NCSP

Assessment Consultant

WPS (Western Psychological Services)

arogers@wpspublish.com

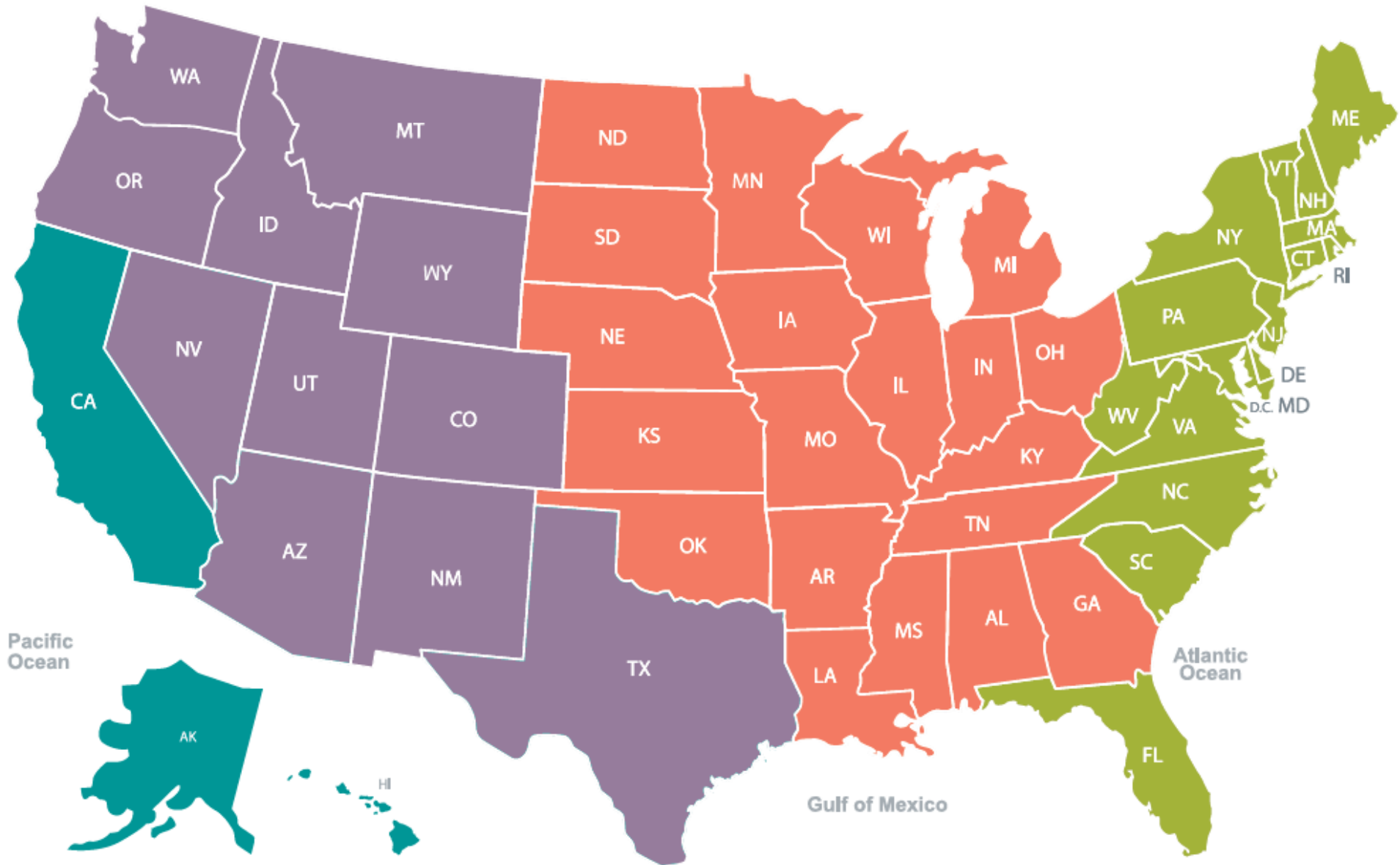
424-488-4622

I am employed by WPS, publisher of the instruments that I will highlight today.

Agenda

- Introductions
- A definition of Risk (Learning Disabilities literature)
 - Types of Risk Factors
- A definition of Resilience (Learning Disabilities literature)
 - Protective Factors
 - Building Resilience
- Assessment Options & Strategies to Promote Success
- WPS Opportunities
- Questions

Assessment Consultant Territories



 Amanda Wynn 424.201.8840 awynn@wpspublish.com	 Laura Stevenson 424.318.9636 l Stevenson@wpspublish.com	 Ann Rogers 424.488.4622 arogers@wpspublish.com	 Stephanie Livesay 424.488.4902 slivesay@wpspublish.com
--	---	---	---

Risk and Resilience Factors for students with Learning Disabilities (LD)

- Internal factors:
 - Self Perception, Self-Concept
 - Also
 - Depression
 - Anxiety
 - Processing (attention/working memory/executive function)
- External factors:
 - Teacher Feedback
 - Peer Feedback
 - Type and Severity of Learning Disability
 - Gender
 - Placement
 - Social Support and Competence

Risk Factors

Risk Factors for students with LD

- Negative or potentially negative conditions that can impede or threaten any of these areas of development:
 - Academic
 - Social
 - Behavioral

- Adverse events that increase the likelihood of negative outcomes

Keogh & Weisner, 1993

Spekman, Herman, & Vogel, 1993

Maag & Reid, 2006

Montague, Enders, Dietz, Dixon, & Cavendish, 2008

Risk Factors for students with LD

- For a student with learning disabilities, the school environment can include many conditions that place the student at risk for negative experiences
 - Self-perceptions can be influenced by difficulties with both the academic and the social aspects of school
 - Difficulties at school can challenge emotional and social development
 - School experiences can erode feelings of confidence

Vaughn & Elbaum, 1999

Gans, Kenny, & Ghany, 2003

Nalavany, Carawan, & Rennick, 2011

Risk Factors for students with LDs

- Students with LDs demonstrate increased levels of depression and anxiety compared to non disabled peers
- Some students with LDs seem to be at higher risk for developing characteristics of depression and anxiety
 - Many students do not receive help (subthreshold clinically)
 - No help can lead to additional processing problems
 - ATTN, EF, WM

Montegue et al. 2008

Mugnaini, Lassi, La Malfa, & Albertini 2009

Maag & Reid, 2006

Nelson & Harwood, 2011a, 2011b

Eysenck, Derakshan, Santos, & Calvo, 2007

Risk Factors for students with LDs

- 50% of children later identified as having learning disabilities are retained in the first grade
 - Can instill a sense that things will not improve
- Students with LDs who have negative self-perceptions are likely to be:
 - strategy deficient
 - be judged as not working as hard as other students
 - have difficulty judging their own level of effort.

McKinney, Osborne, & Schulte, 1993

Brooks, 2001

Lackaye & Magalit, 2006

Meltzer et al., 2004

Risk Factors for students with LDs

- Students with LDs can gradually lose their resilience and are no longer willing to take risks
 - PBS video by Richard Lavoie
“Last One Picked, First One Picked On”

Risk Factors for students with LDs

Negative Teacher Feedback

”Work carefully”, “Be neat” comments can be perceived negatively, as if the student is not trying. Can add to feelings of inadequacy and incompetence.

Risk Factors for students with LDs

Negative Peer Feedback

Pejorative terms “Special”, “Sped”, “Dumb”, etc.

The disability and external responses to it can create significant personal disruption

Risk Factors for students with LDs

Type and Severity of Learning Disability

Can influence resilience and long-term outcomes

Better to define by domain specific rather than a global term

Some types of LDs exacerbate specific risks (Nonverbal LD)

Spekman, Goldber, et al., 1993

Spekman, Herman, et al., 1993

Wong, 2003

Stanovich, 1999

Galway & Metsala, 2011

Resilience

Resilience

- Protective factors are life situations or events that enhance the chances of positive outcomes
- Ability to spring back from the negative outcomes associated with stress and risk factors
- A dynamic quality that can be nurtured
- As resilience increases, so does the student's ability to cope with or overcome risk and adversity

Keogh & Weisner, 1993

Bender et al., 1999

Margalit, 2004

Doll & Lyon, 1998

Fostering Resilience for students with LDs

Gender

Some have written that gender may play a role in the response of children to social failure

Others, no gender differences with risk factor of anxiety, depression, and academic self-concept

Some studies found that for successful transition to adulthood, temperament and self-concept were more important for females, and outside sources from family and community were more important for males

Settle & Milich, 1999
Wong, 2003
Montague et al., 2008
Nelson & Harwood, 2011a
Werner, 1993, 1999

Fostering Resilience for students with LDs

Self-Understanding and Acceptance

Self-understanding, acceptance, and a feeling of control over one's life can be key to overcoming risk

- Setting realistic goals (but success is influenced by the accuracy of one's self-knowledge and self perception)

Bender et al., 1999

Nalavany, Carawan, & Rennick, 2011

Fostering Resilience for students with LDs

Self-Understanding and Acceptance

- Foster an internal locus of control
- Focused, specific praise to point out strategy or action that worked instead of saying “good job”
- Explicitly point out child’s effort and link to success

Fostering Resilience for students with LDs

Self-Understanding and Acceptance

- Counselors/therapists need to understand the effects of the LD on the child, as well as be able to distinguish between thoughts and behaviors caused by the disorder from those resulting from a reaction to the disorder
 - Such as, is the problem due to not understanding the direction or due to emotion?

Fostering Resilience for students with LDs

Self-Understanding and Acceptance

Longitudinal study of individuals with LDs found that the most successful participants accepted their disability and could talk about their own strengths and weaknesses

Understanding of the disability and self-awareness form protective factors that can facilitate lower levels of anxiety

Fostering Resilience for students with LDs

Social Support

Supportive adults or mentors are able to foster trust and bolster the self-esteem of children with LDs

Sometimes teachers can serve as protective factors by offering continual encouragement and mentorship

Teachers can offset some risk factors by creating school climates where students can succeed (provision of positive experiences that enhance self-esteem and competence)

Fostering Resilience for students with LDs

Social Support

Long-term educational benefits from positive school experiences may stem more from the student's attitudes toward learning and the self-esteem than from what they are specifically taught in class

Fostering Resilience for students with LDs

Placement

Although a topic of much debate over the years, studies focused on self-concept and placement - findings have been that no one type of placement (e.g., Gen Ed, Resource) has been shown to be preferable for students with LDs

Fostering Resilience for students with LDs

Placement

Some studies found higher levels of depression in adolescents with LDs placed in Gen Ed environments versus students in more restrictive placements

Not as rated by students but by Guidance Counselors
Self-awareness, negative teacher & peer feedback as factors

Fostering Resilience for students with LDs

Placement

Students with LDs need a strong support system throughout their school careers. A strong support system can help preserve self-concept and self-worth by:

- Keeping failure at a minimum
- Increasing acknowledgement of nonacademic competencies
- Emphasize learning goals over performance goals

Fostering Resilience for students with LDs

Placement

When decisions about educational placement are being made, it is recommended that consideration of the student's own preferences, as well as his or her academic, social, and emotional needs are considered

Assessment

Piers-Harris Children's Self-Concept Scale, Second Edition

Ellen V. Piers, Ph.D.

David S. Herzberg, Ph.D

Overview

- Assesses Self-Concept in children ages 7 to 18 years
- 60-item self-report measure using a *Yes* or *No* format
- 2nd grade reading level
- AutoScore Form (Third Edition coming!)
- 2 Validity Scales and 7 Self-Concept Content Scales
- T-Scores

Scales

- Validity
 - Inconsistent Responding (INC)
 - Response Bias (RES)
- Content (Domain scales)
 - Behavioral Adjustment
 - Intellectual and School Status
 - Physical Appearance and Attributes
 - Freedom from Anxiety
 - Popularity
 - Happiness and Satisfaction
 - Total

Scoring and Interpretation

- First consider the validity of responses using the inconsistency and response bias scales
- T scores (M=50, SD 10)

Scoring and Interpretation

T-Score ranges for TOTAL scale

	Descriptor
≤ 29	Very Low
30-39	Low
40-44	Low Average
45-55	Average
56-59	High Average
60-69	High
≥ 70	Very High

Scoring and Interpretation

T-Score ranges for Domain Scales

	Descriptor
≤ 29	Very Low
30-39	Low
40-44	Low Average
45-55	Average
≥ 56	Above Average

Psychometric Properties

- Standardized on a sample of 1,387 students
- **Reliability: Internal consistency estimates**
 - Total .91
 - Behavioral Adjustment .81
 - Intellectual and School Status .81
 - Physical Appearance and Attributes .75
 - Freedom From Anxiety .81
 - Popularity .74
 - Happiness and Satisfaction .77
- **Validity:** Factor analysis, divergent and convergent analyses, and clinical group analyses

Revised Children's Manifest Anxiety Scale, Second Edition (RCMAS^T-2)

Cecil R. Reynolds, Ph.D.

Bert O. Richmond, Ed.D.

Overview

- Assesses the level and nature of anxiety in children from 6 to 19 years
- 49-item self-report measure (group or individual) using a *Yes* or *No* format
- 2nd grade reading level
- Short or Long Form (Spanish available)
- Audio CD available
- AutoScore Form (soon to be added to the OES)
- 6 Scales (2 Validity and 4 Content)
- T-Scores

Scales

- Validity
 - Inconsistent Responding (INC)
 - Defensiveness (DEF)
- Content
 - Total Anxiety
 - Physiological Anxiety
 - Worry
 - Social Anxiety

Scoring and Interpretation

- First consider the validity of responses using the inconsistency and defensiveness scales
- T scores (M=50, SD 10)

T-Score range

71 and higher

61–70

40–60

39 and lower

Descriptor

Extremely problematic

Moderately problematic

No more problematic than for most students

Less problematic than for most students

Psychometric Properties

- Standardized on a sample of 2,368 students from a full reference sample of 3,086 students
- **Reliability: Chronbach's Alfa Full Reference Sample**
 - Total Anxiety .92
 - Physiological Anxiety .75
 - Worry .86
 - Social Anxiety .80
 - Defensiveness .79
 - Short Form Total Anxiety .82
- **Validity:** Factor analysis, divergent and convergent analyses, and clinical group analyses

Children's Depression Rating Scale, Revised

Elva O. Poznanski, M.D.

Hartmut B. Mokros, Ph.D.

Overview

- Assesses depression and can be used to monitor treatment response in children ages 6 to 12 years
- Brief rating scale based on a semi-structured interview
- Responses rated on a 7 point scale
- 17 Symptom areas
- T-Score for Summary Score
- Comparison across 17 areas from parent vs child

Scales

Impaired Schoolwork
Difficulty Having Fun
Social Withdrawal
Appetite Disturbance
Sleep Disturbance
Excessive Fatigue
Physical Complaints
Irritability
Excessive Guilt

Low Self-Esteem
Depressed Feelings
Morbid Ideation
Suicidal Ideation
Excessive Weeping
Depressed Facial Affect
Listless Speech
Hypoactivity

School Motivation and Learning Strategies Inventory (SMALSI)

Kathy Chatham Stroud, Ph.D.

Cecil R. Reynolds, Ph.D.

Overview

- Assesses student strengths and liabilities related to:
 - Motivation, Learning Strategies, Study Habits
- Three forms (Child 8-12 yrs., Teen 13-18 yrs., College)
- Self-report measure (group or individual) using a *Likert* format (Never, Sometimes, Often, Almost Always)
- 3rd grade reading level (approximately 30 minutes)
- Group or Individual administration
- Audio CD available (child and teen forms)
- AutoScore Form or WPS Online Evaluation System

Focuses on Strategies

- SMALSI is a measure of how children and adolescents describe their own learning, study, and test-taking strategies; their level of academic motivation; and any symptoms of test anxiety that they experience
- Important for schools to evaluate student strengths and weaknesses in the development of effective learning strategies so that students with needs can be given particular attention. (Typical curriculum does not always include routine instruction in these areas)

Focuses on Strategies

The School Motivation and Learning Strategies Inventory (SMALSI) lets you identify and address these and other problems **before** students become discouraged, fail classes, or drop out of school.

Scales

- Validity
 - Inconsistent Responding
- Strengths
 - Study Strategies
 - Note-Taking/Listening Skills
 - Reading/Comprehension Strategies
 - Writing/Research Skills
 - Test-Taking Strategies
 - Organizational Technique
 - Time Management
 - Time Management/Organizational Techniques
- Liabilities
 - Low Academic Motivation
 - Test Anxiety
 - Concentration/Attention Difficulties

Scoring and Interpretation

- First consider the validity of responses using the Inconsistent Responding Index (INC)- see guidelines
- Scales: T scores (M=50, SD 10)

Suggested Qualitative Descriptors

Score Range	Strength Scales	Liabilities Scales
71 and higher	Extremely well developed	Extremely Problematic
61-70	Very well developed	Moderately Problematic
40-60	Average in development	No more problematic than for most students
30-29	Below average in development	Less problematic than for most students
29 and lower	Inadequately developed	Minimally problematic

Psychometric Properties

- **Child Form:** 8-12 years Standardized on a sample of 1,821 students
- **Reliability:** Chronbach's Alfa **Child Form**
 - Study Strategies .77
 - Note-Taking/Listening Skills .81
 - Reading/Comprehension Strategies .79
 - Writing/Research Skills .69
 - Test-Taking Strategies .76
 - Time Management/Organizational Techniques .77
 - Low Academic Motivation .83
 - Test Anxiety .89
 - Concentration/Attention Difficulties .85
- **Validity:** Correlations with BASC, TX Assessment of Knowledge & Skills

Psychometric Properties

- **Teen Form:** 13-18 years Standardized on a sample of 1,100 students
- **Reliability:** Chronbach's Alfa **Teen Form**
 - Study Strategies .86
 - Note-Taking/Listening Skills .86
 - Reading/Comprehension Strategies .82
 - Writing/Research Skills .77
 - Test-Taking Strategies .84
 - Organizational Techniques .79
 - Time Management .81
 - Low Academic Motivation .83
 - Test Anxiety .91
 - Concentration/Attention Difficulties .88
- **Validity:** Correlations with BASC, TX Assessment of Knowledge & Skills

ALSO

WPS distributes for other publishers

- **Executive Function, Attention, Memory**
 - BRIEF 2
 - CEFI
 - CAS 2
 - WRAML 2
 - ChAMP
 - TOVA
 - Wisconsin Cart Sorting Test
 - Comprehensive Train-Making Test

ALSO

WPS distributes for other publishers

- **Depression and Self-Concept**
 - Children's Depression Inventory, 2nd Edition
 - Reynolds Adolescent Depression Scale
 - Multiscore Depression Inventory for Children
 - Tennessee Self-Concept Scale, 2nd Edition

WPS[®] Online Evaluation System[™]



WPS Online Evaluation System: SMALSI

- Child and Teen Record Forms in your packet
- Free samples of scoring credits for the OES available
- Contact me @ arogers@wpspublish.com if you would like to sample the system.

Intervention

Intervention/Strategies for Success

- Academic Achievement is a protective factor.
 - Teaching students with LDs strategies to succeed increases the probability of success
- Providing instruction in social-emotional skills, including self-awareness is equally important to academic instruction

The SMALSI Intervention Manual Strategies for Academic Success

- **Section I:**
An Introduction to Learning Strategies

Chapter 1: An Introduction to Learning Strategies:
Assessment and Development

Chapter 2. The Research Evidence From the Education
Sciences: How Teaching Learning and Study Strategies
Enhances Learning

The SMALSI Intervention Manual Strategies for Academic Success

Section II:
Strategies for Developing Learning Strengths

7 Chapters—one for each SMALSI Strength Scale

The SMALSI Intervention Manual

Example Chapter Outline: Section II

Chapter 3. Teaching Study Strategies

- The SMALSI and Study Strategies
- What Are the Best Study Strategies?
- Teaching the Best Study Strategies
- Teaching Students to Improve Their Concentration When Studying
- Teaching Students to Improve Memorization
- Teaching Students to Develop Associations With Prior Learning
- Teaching Students to Use Self-Talk During Study
- Teaching Students to Use Concept Maps
- Teaching Students to Use Multiple Sources of Information
- Summary

The SMALSI Intervention Manual Strategies for Academic Success

Section III:
Strategies for Overcoming Academic Liabilities

3 Chapters—one for each SMALSI Liabilities Scale

The SMALSI Intervention Manual

Example Chapter Outline: Section III

Chapter 12. Enhancing Low Academic Motivation

- The SMALSI and Academic Motivation
- What Are the Best Academic Motivation Strategies?
- Teaching the Best Academic Motivation Strategies
- Teaching Students to Set Goals and Increase Self-Determinism
- Teaching Students About Choice and Preference
- Teaching Students About Participation and Involvement
- Teaching Students to Understand Situated Motivation and the Impact of the Environment
- Teaching Students to Unlearn a History of Failure by Setting Up Success
- Summary

The SMALSI Intervention Manual Strategies for Academic Success

Supplemental Information

- Appendix A: Web Sites With Supplemental Information on Improving Learning and Study Strategies
- Appendix B: Reproducible Figures
- References

Opportunities with WPS

Data Collection with WPS

- Always looking for a “pool” of data collectors
- Earn money / materials by collecting data on children, adolescents, and adults for new and assessments being revised
- You earn money and the participants you recruit and test also receive monetary incentives
- Contact: study@wpspublish.com
- Current projects: **Developmental Profile, 4th Edition; Sensory Processing Measure, 2nd Edition; Risk & Resilience Scales**
- Standardization Data Needed: typically developing individuals ages 0–90
- Clinical groups needed: ASD, ADHD, Conduct Disorder, Trauma, Learning disabilities, eating disorder, suicide risk, motor impairment, developmental delay, sensory integration/processing disorders, traumatic brain injury

For further information,
please contact me directly:

Ann Rogers

arogers@wpublish.com

424-488-4622