

Decoding specific learning disabilities: Types, rights, and policies in the Indian constitutional framework

Key words: Specific learning disability # dyslexia #
dysgraphia # dyscalculia # Indian constitutional framework
constitutional rights # Indian policies

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Abstract

Specific learning disability (SLD) is a developmental disorder that affects children's reading, writing, language comprehension, and calculation's ability. SLD are caused by differences in brain structure and function, and they impair a person's ability to receive, store, process, retrieve, or communicate information. Children with SLD have normal intelligence with intact hearing and visual abilities. Thus, SLD are often termed as 'hidden disabilities' because children with these conditions do not exhibit any apparent sign of disability as their difficulties are not readily evident. It is estimated that around 7-15% of school-going children are impacted by this disability.

The present research paper examines

the landscape of specific learning disabilities in the context of the Indian Constitutional framework. It tries to explore policies and corresponding rights in context of affected individuals various types of learning disabilities. Drawing upon legal documents and legislative acts, including the Rehabilitation Council of India Act, (1992), the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, (1995-PWD Act), the National Trust for the Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act, (1999), and the Rights of Persons with Disabilities (RPWD) Act, (2016), alongside the new education policy, this paper provides a comprehensive analysis of the legal provisions and institutional mechanisms aimed at safeguarding the rights and ensuring the inclusion of children with specific learning disabilities in India.

Introduction:

Over 1 billion people are estimated to experience disability. This corresponds to about 15% of the world's population, with up to 190 million (3.8%) people aged 15 years and older having significant difficulties in functioning, often requiring health care services (WHO: World Report on Disability 2011). As per the Census 2011, out of the

121-crore population in India 2.68 crore persons were enumerated as 'disabled' which was 2.21% of the total population. According to World Health Organization (WHO):

"Disability is an umbrella term, covering impairments, activity limitations, and participation restrictions. An impairment is a problem in body function or structure; an activity limitation is a difficulty encountered by an individual in executing a task or action; while a participation restriction is a problem experienced by an individual in involvement in life situations. Thus, disability is a complex phenomenon, reflecting an interaction between features of a person's body and features of the society in which he or she lives."

The Rights of Persons with Disabilities Act, (2016) defines 'person with disability' means a person with long term physical, mental, intellectual or sensory impairment which, in interaction with barriers, hinders his full and effective participation in society equally with others. The act covers 21 disabilities such as Blindness, Low vision, Mental illness, Autism, Specified Learning disabilities and so on.

The term 'learning disability' was firstly introduced by psychologist Dr. Samuel Kirk during his presentation at an educational conference held in Chicago in 1963. Specific learning disability (SLD) is a developmental disorder that affects children's reading, writing, language

comprehension, and calculation's ability. SLD are caused by differences in brain structure and function, and they impair a person's ability to receive, store, process, retrieve, or communicate information. It is important to emphasize that children with SLD have normal intelligence with intact hearing and visual abilities. Specific Learning disabilities are often labelled as 'hidden disabilities' because children with these conditions do not exhibit any apparent sign of disability, and their difficulties are not readily evident. It is estimated that around 7-15% of school-going children are impacted by this disability. Thus, such disabilities are complex and often misunderstood. The mental health professionals often consider six disorders relate to unique specific learning disabilities. These are Dyslexia, Dysgraphia, Dyscalculia, Auditory Processing Disorder, Language Processing Disorder and Visual Perceptual/Visual Motor Deficit.

Types of specific learning disabilities

Dyslexia is the most common learning disability affecting reading and related language-based processing skills, accounts for at least 80% of all learning disabilities. It can have an impact on reading fluency, decoding, reading comprehension, recall, writing, spelling, and, in some cases, speech, and it can coexist with other related disorders. However, the severity varies from person to person. Therefore, dyslexia is sometimes referred to as a Language-Based Learning

Disability. Individuals with reading impairments frequently struggle to decode words into separate sounds and/or blend sounds together in order to read words fast and properly. These decoding issues frequently lead to reading comprehension issues. Some of the symptoms of dyslexia are: delayed speech; problems with pronunciation; problems with rhyming words and learning rhymes; difficulty with learning shapes, color and how to write own name; difficulty with retelling a story in the right order of events and lack of interest in playing games with language sounds such as repetition and so on

Dysgraphia is a learning disability that affects a person's handwriting ability and fine motor skills. It is characterized by poor writing skills that are significantly below the child's age, intelligence, and education, causing problems with academic success and other important areas of life. Dysgraphia is also known as spelling disorder and spelling dyslexia. Illegible handwriting, inconsistent spacing, and poor spatial planning on paper can all be problems, as can poorly spelling and errors in grammar, punctuation, and poor handwriting. The children struggle with writing composition as well as thinking and writing at the same time. This is associated with difficulties with visual-motor integration or fine motor skills. Writing skills include both transcription and composition (text generation). Some of the symptoms of dysgraphia

are numerous technical faults of punctuation, grammar, words usage, sentence structure and paragraph structure formation; omitting words frequently in sentences or unfinished sentences; failure to capitalize the first letter of the first word in sentence; poorly organized written works; incorrect use of upper and lower case letters, inverted characters; mixing of printing and cursive writing and so on.

Dyscalculia is a specific learning disability that affects a person's ability to understand numbers and learn mathematical facts. Individuals with this type of learning disability often struggles with mathematical symbols and its comprehension, organizing and memorizing numbers, telling time, counting and so on. Problems with numbers or basic concepts are more likely to appear in students very early, while problems with reasoning appear later in their education. Dyscalculic children often are unable to sort important information and fail to recognize proper computing technique. They also fail to assess whether the solution they acquire is appropriate or not. Jordan, N. C., Hanich, L. B., & Kaplan, D. (2003) suggests that mathematical challenges are typically the most severe obstacles in the academic path of individuals with learning disability, and they frequently persist into high school. Various psychological, neurological, genetic, environmental and emotional factors are responsible for dyscalculia. Inferior parietal sulcus

plays a dominant role in numerical processing. Magnetic Resonance Imaging (MRI) studies have shown decreased gray matter in the left parietal lobe of children suffering from Dyscalculia. Environmental factors like schooling, low-income households and factors such as anxiety and motivation are some of the causal factors of poor mathematical abilities and psycho-social adversities in such children. Some of the symptoms of dyscalculia is that an individual might have difficulty in reading time, counting money, identifying patterns, remembering mathematical facts and solving mental mathematics. They often count using fingers because of difficulty with counting. They also encounter problems in differentiating sides between left and right. They often make mistakes in alignment of digits and completing arithmetical procedure and shows poor comprehension of fractional concepts.

Dyspraxia is defined as ‘a breakdown of action’ and ‘the inability to utilize voluntary motor abilities effectively in all aspects of life from play to structured skilled tasks’ (Chu S and Milloy NR cited in Bowens and Smith 1999). However, psychology gives an alternative definition. It says dyspraxia is “motor difficulties caused by perceptual problems, especially visual-motor and kinaesthetic motor difficulties” (Portwood, 1996). No doubt, it profoundly influences various facets of life of children. Thus, it impacts learning, eating and

chewing, everyday activities such as dressing and toileting, coordination, participation in sports and recess activities, speech development, visual-motor tasks, tactile and kin-aesthetic abilities and so on. Not only these, it also affects social skills including maintaining eye contact and engaging in small talk. As a result, every aspect of the child's functioning gets affected. While dyspraxia doesn't diminish a child's intelligence, it does present learning challenges, often necessitating additional support in the educational setting.

Developmental aphasia, on the other hand refer to specific language impairment (SLI) or developmental language disorder (DLD). It is a condition that hampers the acquisition and utilization of language skills among children. Despite possessing typical cognitive abilities and lacking evident neurological or sensory impairments like hearing loss, affected children often encounter difficulties in comprehending or expressing spoken language. Manifestations include challenges with grammar, vocabulary, comprehension, and articulation. This disorder exerts notable ramifications on academic achievement, social interactions, and general communication proficiency. Early intervention and speech therapy play crucial roles in effectively managing and enhancing outcomes for individuals diagnosed with developmental aphasia.

The status of children with disabilities: Policy

perspectives

Indian policies and programs on disability have been influenced by the international declarations on inclusive education. such as the UN Convention on the Rights of the Child; Jomtein Conference, Salamanca Statement. In 1974, the Centrally Sponsored Scheme of Integrated Education for the Disabled Children (IEDC) was one of the first programs addressing the educational needs of children with disabilities. This scheme, provided financial assistance for education of children with disabilities, aids and appliances, salaries of special teachers, cost of setting up of resource centres. Though Ghai, (2015) suggests that it had limited impact because it operated on a project mode and failed to bring systemic changes. Over the years, the education of children with disabilities has become a part of the mainstream education through major policies and programmes by government of India. The Indian Education Commission (1964-66) popularly known as Kothari Commission recognized it in 1966. It stated that, “education of the handicapped children should be an inseparable part of the education system” (MHRD, 1966, 6.43). It also went onto note that in addition to efforts aimed at getting some children with disabilities into schools, efforts should also be aimed at setting up “one good institution for the education of handicapped children in each district” (MHRD, 1966, 6.46). This twin track approach to

the education of children with disabilities has continued in subsequent education policies including the National Education Policy, 1968, (MHRD, 1968), revised National Education Policy (1986, with revised Plan of Action in 1992) (MHRD, 1986) and in National Education Policy 2020.

The 86th Amendment to the Indian constitution determined education as the fundamental right of children between the age group of 6-14 years. In 2009, it was legalized through the Right of Children to Free and Compulsory Education Act (RTE) (2009). The act states that every child between the age of 6-14 years shall have the right to free and compulsory education in a neighbourhood school between grades 1 and 8. While this act covers all children, children with disabilities were only specifically included in the act through an amendment passed in 2012. It was defined as a “disadvantaged group” by the Ministry of Law and Justice in 2012. Further, a key legislation i.e. the Right of Persons with Disabilities Act, (2016) supporting the education of children with disabilities has been put forward by the Ministry of Law and Justice in 2016. After India ratified the United Nations Convention of the Rights of the Persons with Disabilities (UNCRPD, 2006), concerns were raised in PwD Act (1995) with regard to the lack of coverage of all the rights recognized under UNCRPD (Singal, 2015). This led to the passing of a new act, i.e. “Rights of the

Persons with Disabilities Act” (MLJ, 2016). This Act reiterates the twin track approach by stating that, “every child with benchmark disability between the ages of six to eighteen years shall have the right to free education in a neighbourhood school, or in a special school, of his choice”.

Major Policies and Legislative Framework for Persons with Disabilities

The Kothari Commission (1964-66)

The Kothari Commission was the first official body to address the issues of access and participation in education for all. It emphasized the importance of a common school system that would be open to children regardless of their caste, creed, community, religion, economic condition, or social status. Following the commission’s recommendations in 1968, the National Education Policy advocated for the expansion of educational facilities for both physically and mentally handicapped children. Additionally, it proposed the development of an integrated program that would enable handicapped children to study alongside their peers in regular schools. This marked a significant step by the Government of India towards ensuring the rights of persons with disabilities, particularly children, who aspire to receive education just like any other child.

The National Policy on Education (NPE), 1968

The National Policy on Education (NPE) prominently elevated the crucial matter of equality

to the forefront. Section 4.9 of the policy explicitly addresses the requirements of children with disabilities. The aim is to integrate physically and mentally handicapped individuals as equal participants in the broader community, fostering their normal growth and equipping them with the resilience and confidence to navigate life's challenges.

Integrated Education of Disabled Children (IEDC)

In 1974, the Government of India recognized the importance of integrating children with disabilities into the education system. This acknowledgment led to the launch of the centrally sponsored scheme known as Integrated Education of Disabled Children (IEDC) by the Union Ministry of Welfare. The IEDC aims to provide educational opportunities for disabled children within mainstream schools, with the goal of enhancing their retention in the educational system. Furthermore, it facilitates the transition of children who have acquired communication and daily living skills at a functional level in special schools to mainstream schools.

Rehabilitation Council of India Act, 1992

The inaugural legislative endeavour in India addressing the requisites of special education materialized through the Rehabilitation Council of India (RCI) Act, 1992. This legislation facilitated the training of educators specifically tasked with

delivering education tailored to individuals with disabilities. The RCI was set up as a registered society in 1986. On September, 1992 the RCI Act was enacted by parliament and it became a Statutory Body on 22 June 1993. The Act was amended by Parliament in 2000 to make it broader based. The mandate given to RCI is to regulate and monitor services given to persons with disability, to standardise syllabi and to maintain a Central Rehabilitation Register of all qualified professionals and personnel working in the field of Rehabilitation and Special Education. The Act also prescribes punitive action against unqualified persons delivering services to persons with disability.

Persons with disabilities Act, 1995

The most significant legislation in the history of special education in India is the Persons with Disabilities (Equal Opportunities, Protection of Rights & Full Participation) Act of 1995. This comprehensive act addresses seven disabilities, including blindness, low vision, hearing impairment, loco-motor impairment, mental retardation, leprosy-cured, and mental illness. Section 26 under chapter-v of the Act, focuses on education and outline the responsibilities of appropriate governments and local authorities as follows:

1. Ensuring that every child with a disability has access to free education in a suitable environment until reaching the age of eighteen.
2. Striving to integrate students with disabilities

into mainstream schools.

3. Promoting the establishment of special schools in both government and private sectors to cater to those requiring specialized education, ensuring accessibility for disabled children across the nation.

4. Endeavouring to equip special schools for children with disabilities with vocational training facilities.

The rights of children for free and compulsory education (RTE) Act, 2009

The Right to Education (RTE) Act, introduced as part of the 86th Amendment, was a major milestone. This important amendment brought in Article 21A, making education for children aged 6-14 years a fundamental right. It also added Article 51A(k) to the Constitution, which makes it a fundamental duty of parents to ensure their children have access to education within this age group. When the RTE Act came into force on 1st April 2010, India joined 135 other countries in recognizing education as a fundamental right for its citizens. This act elevated the 'Right to Education' to the same level as the 'Right to Life,' underscoring its importance. The Act calls upon everyone—parents, schools, teachers, society, and both state and central governments—to play their part in ensuring every child between 6 and 14 years old receives free and compulsory education. The RTE Act emphasizes that every child deserves

education of equitable quality, grounded in principles of fairness and non-discrimination. Although the Act is designed to cover all children, it specifically included children with disabilities through a 2012 amendment, recognizing them as a "disadvantaged group" and ensuring they, too, have the support and opportunities they need to thrive.

Rights of persons with disabilities (RPWD) Act, 2016

The Rights of Persons with Disabilities (RPwD) Act of 2016 was a result of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD). It fulfils the obligations of the UNCRPD, to which India is a signatory. This act replaced the earlier Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act of 1995. The RPwD Act recognizes disability as an evolving and dynamic concept, expanding the list of recognized disabilities from 7 to 21, with provisions for the Central Government to add more types of disabilities as needed. It emphasizes inclusive education, advocating for the integration of students with disabilities into mainstream educational settings as much as possible. One of the newly recognized conditions under this act is Specific Learning Disability (SLD).

Under the RPwD Act, Specific Learning Disability (SLD) refers to challenges in acquiring academic skills despite having adequate cognitive abilities

and learning opportunities. The act includes provisions for identifying, evaluating, and assisting individuals with SLD. It mandates that children with SLD receive tailored support within the educational system. This includes extended exam durations, alternative learning material formats, and specialized instruction tailored to their needs. Additionally, the act prohibits discrimination against persons with disabilities, including those with SLD, in all areas of life, such as education and employment. It underscores the importance of creating an inclusive and accessible environment that allows individuals with disabilities to fully and equitably participate in society.

National education policy, 2020

The National Education Policy (NEP) of 2020 in India represents a comprehensive framework designed to overhaul the educational landscape of the nation. While its primary objective is to tackle various challenges and enhance the overall quality and accessibility of education, it also incorporates provisions pertinent to individuals with specific learning disabilities (SLD). A fundamental tenet of the NEP 2020 is the promotion of inclusive education, which seeks to cater to the diverse learning needs of all students, including those with disabilities like SLD. This policy underscores the significance of fostering supportive learning environments that accommodate the requirements of every learner, irrespective of their abilities or

disabilities. Furthermore, the NEP 2020 underscores the significance of integrating technology into education. This aspect holds particular promise for students with SLD, as assistive technologies and digital learning platforms can deliver tailored learning experiences that cater to their unique needs. Such technologies facilitate easier access to educational content and enable students with SLD to engage with learning materials in manners conducive to their individual learning styles. While the NEP 2020 does not explicitly mention SLD, its emphasis on inclusive education, technological integration, and teacher training resonates with the principles of supporting individuals with SLD.

Conclusion

Specific learning disabilities, characterized by difficulties in reading, writing, comprehension, and calculation, poses significant obstacles to learning and academic achievement. Despite being labeled as 'hidden disabilities', it is imperative to recognize that children with SLD possess normal intelligence and sensory abilities. Through an examination of various types of learning disabilities and the corresponding rights and policies in India as well as the legal documents and legislative acts, this paper provides a comprehensive analysis of the support systems and accommodations available to individuals with SLD in India. It emphasizes the importance of recognizing and addressing the

diverse needs of children with SLD to ensure equal opportunities and full participation in society. Moving forward, continued efforts are necessary to enhance awareness, promote inclusive education practices, and strengthen support services for individuals with specific learning disabilities, ultimately fostering their holistic development and empowerment.

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