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Learning difficulties in pupils from understanding to intervention

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Abstract

This article examines learning difficulties among nursery and primary school pupils, focusing on their identification, underlying causes, assessment, and appropriate educational interventions. It aims to provide teachers with a comprehensive understanding of the challenges encountered by pupils experiencing learning difficulties and to propose pedagogical strategies that promote inclusive and effective learning. Drawing on a theoretical and descriptive approach, the study distinguishes between temporary learning difficulties and persistent learning disorders, highlighting the influence of cognitive, neurological, emotional, social, and educational factors on academic performance. Particular attention is given to specific learning disorders, including dyslexia, dysorthography, dysgraphia, dyscalculia, dysphasia, and dyspraxia, as well as attention deficits, memory impairments, and executive function difficulties. The article also explores the importance of early identification and multidisciplinary assessment, emphasizing the complementary roles of teachers, neuropsychologists, speech and language therapists, remedial educators, and families. Furthermore, it discusses methodological, pedagogical, socio-psychological, and assessment-related adaptations designed to address pupils' individual needs and facilitate their academic progress. The analysis highlights the importance of distinguishing learning disorders from difficulties arising from environmental or emotional circumstances to ensure appropriate interventions. The article concludes that effective support for pupils with learning difficulties requires a collaborative, individualized, and inclusive educational approach. By integrating early assessment, differentiated teaching practices, and multidisciplinary cooperation, schools can improve learning opportunities, strengthen pupils' autonomy, and promote equitable educational outcomes.

Keywords: Learning Difficulties; Learning Disorders; Inclusive Education; Dyslexia; Dysorthography; Educational Intervention; Early Identification; Neuropsychological Assessment; Differentiated Instruction; Primary Education.

Introduction

The issue of learning and teaching is not a new one; it has been the subject of much debate for several decades (De Boer, 1991). From a teacher's perspective, we are always asking: what should we teach? To what end? And by what method? Similarly, from a pupil's perspective, our teaching and

learning activities are directed towards the profile to be developed and the skills to be built

Generally speaking, the questions posed above are recurring ones to which researchers have sought to provide various answers, drawing in particular on findings from epistemology, child psychology, sociobiology, educational science and the field of professional didactics.

However, teaching a mixed-ability class requires the teacher's constant attention to assess pupils' levels and identify those experiencing learning difficulties; the latter often struggle with motivation. Their learning difficulties, their frequent failures and the way they are perceived by their fellow pupils lead many of them to become demotivated and lose all interest in learning within a school setting. What can we do to help them rediscover a love of learning?

In this article, we aim to shed light for teachers in nursery and primary schools on the various learning difficulties encountered by some pupils, with the aim of providing a framework to help these teachers better identify and analyse the problems these pupils face, and to intervene more effectively on the pedagogical and methodological factors that influence their learning dynamics.

Methodology

Theoretical Framework

Definition

According to the World Health Organisation, a learning difficulty is a medical term referring to a permanent disorder of neurological origin. A learning difficulty corresponds to an impairment affecting one or more neuropsychological functions, which disrupts the acquisition, comprehension, use and processing of verbal or non-verbal information. A learning disability is not caused by an intellectual disability, nor by a sensory impairment (visual or hearing), a lack of academic support, a lack of motivation or adverse socio-economic conditions.

What is the difference between:

The difference between learning difficulties and learning disorders

Learning disorders are persistent and permanent. They are not linked to intelligence or socio-emotional factors. Although there is as yet no recognised treatment to cure them, appropriate intervention and certain adjustments can greatly improve learning (academic performance and performance in the workplace).

Learning difficulties are temporary obstacles to learning that are linked to a person's circumstances (difficult socio-emotional conditions, bereavement, anxiety, financial difficulties, etc.). Once the necessary steps have been taken to address the underlying causes, the person generally returns to a normal learning rhythm.

Learning difficulties

Learning disorders are usually characterised by:

1. a **significant delay** in mastering learning compared to what is expected for the child's age and potential,

2. by a **criterion of duration or persistence** over time despite appropriate intervention,

3. and by the fact that the **difficulties observed cannot be explained by other factors** (such as sensory impairments, an atypical educational background, a developmental disorder, environmental and social factors, social or emotional issues, etc.).

Learning difficulties are **independent of intelligence or motivation**.

There are also usually **markers or indicators present in the child's developmental history** in terms of motor, cognitive, socio-emotional or language skills. The disorder does not occur 'all of a sudden'.

Difficulties in orienting oneself in time and space, in acquiring certain automatic responses, in understanding sequences, and in applying what has been learnt across different contexts are often observed well before a child starts school.

Learning difficulties

A child may show significant delays and difficulties in learning without necessarily having a learning difficulty.

The cause of the child's difficulties therefore lies in the impact of various factors such as:

- **Emotional factors**
    - Performance anxiety that paralyses;
    - A lack of motivation and interest, which leads to disengagement;

- A socio-economic or family situation that affects their willingness to learn.

- **In terms of teaching**

  - Working methods or study strategies that are ineffective;

  - A teaching style that does not match the child's learning style;

  - Frequent changes of school, which have required a great deal of adjustment, etc.

- **Cognitively**

  - The child has attention difficulties that prevent them from retaining information effectively and learning;

  - The child has a language disorder that affects their reading and writing skills;

  - The child has a graphomotor disorder which requires all their energy to form letters, preventing them from concentrating on the spelling of words, etc.

Clarifying the origin or source of the difficulties helps to determine whether there are signs of a disorder or rather learning difficulties. This clarification leads to the implementation of measures that are better tailored and adapted to the child's needs

Classification of learning difficulties

Learning difficulties may stem from one or more of the following neuropsychological disorders or syndromes:

- Dyslexia

a specific reading disorder, is a term referring to difficulties in acquiring this skill. This disorder becomes apparent from the very beginning of the reading learning process

Types of dyslexia

A. Phonological dyslexia

This is caused by deficits in the acquisition of grapheme (letter)-phonemes (sounds) and in short-term auditory memory or

It accounts for 67 per cent of cases of dyslexia.

B. Lexical dyslexia

It is caused by deficits in the handwriting-based integration of word form.

It is present in 10 per cent of cases of dyslexia.

People with this type of dyslexia read mainly 'by ear': they

rely predominantly on the phonological pathway.

C. Mixed dyslexia

It is present in 23 per cent of cases of dyslexia. Reading difficulties affect both the lexical and phonological levels.

D. Alexia

It is found mainly in adults following a stroke.

- **Dysorthography**

Dysorthography is a specific writing disorder characterised by 'a significant and persistent failure to assimilate spelling rules (impaired spontaneous writing or writing under dictation)'. Like dyslexia, it appears in children as soon as they begin to learn this skill. It is of neurological and hereditary origin, and is therefore permanent. Thus, dysorthography is not caused by cultural or educational deficiencies, nor by emotional problems, nor by intellectual or sensory deficits.

Dysgraphia

Dysgraphia is the disorder that leads to significant slowness in producing **written work**, or to misshapen letters. Warning signs: persistent general problems with precision and clumsiness

It is characterised by persistent poor grip of writing implements (scissors, ruler, pencil), persistent difficulties in reproducing shapes, a refusal to write, fatigue and cramps whilst writing…

Other disorders may also be associated with dyslexia or dysorthographia:

Dyscalculia, a disorder affecting the acquisition and mastery of the various knowledge and skills involved in mathematics, whether in understanding numbers, learning arithmetic operations, problem-solving or geometry.

This is a cognitive dysfunction that excludes any sensory or motor disorders, neurological conditions or psychological abnormalities in a child of normal intelligence.

Dysphasia, which is thought to result from a dysfunction affecting one of the chains of communication. Pupils with dysphasia also exhibit a disorder of verbal abstraction:

A specific developmental disorder of speech and language resulting in a failure to acquire receptive and expressive language normally, which is not attributable to an intellectual disability, a sensory impairment or a severe emotional disorder.

Dyspraxia, which is a disorder of coordination, organisation and motor execution of motor skills, of neurological origin and present from birth. It is a failure to automatise motor sequences (of the mouth, legs, hands and/or eyes).

- **Memory disorders**
  Memory plays a crucial role in learning processes. Memory is determined by biological and psychological factors. There are three types of memory: short-term, working and long-term. A memory disorder may affect the following functions: information integration, information retention and information retrieval (the ability to recall information from memory, the ability to retain this information in memory and to use it actively whilst working on a given task).

- **Attention deficit disorder with or without hyperactivity**

Attention deficit disorder with or without hyperactivity is a neurological condition that is particularly difficult to diagnose (requiring neurological, psychological and psychiatric assessments). A child who is constantly on the move. This is a non-specific symptom present in many disorders, or a child who is very inattentive and easily distracted

Impaired executive functions, leading to difficulties in establishing planning strategies, in impulse control and in the processes of active memory retrieval that the pupil uses to solve a task or to achieve a goal

Diagnosis

The criterion for diagnosing a learning disability is a discrepancy of at least two years between intellectual ability and academic performance. This discrepancy cannot be explained by:

A) an intellectual disability;

B) a psycho-emotional disorder;

C) a sensory impairment (vision and hearing);

D) a lack of educational opportunities;

E) a lack of motivation and interest.

Therefore, to identify a learning difficulty, it is necessary to analyse the child's or adult's overall profile, including their academic progress, intellectual assessment and psycho-emotional profile. The only people qualified to carry out this comprehensive analysis are **neuropsychologists or psychologists** specialising in the assessment of learning difficulties (that is, professionals with the necessary skills to assess intellectual abilities, emotional and psychological difficulties, and academic performance, including reading, spelling and mathematical skills).

However, teachers' ongoing monitoring and formative assessment remain an essential means of guiding pupils not only in terms of knowledge acquisition, but also in relation to intellectual, sensory and psycho-emotional deficits;

Firstly, we provide examples of several observable manifestations in relation to the learning outcomes set out in the nursery school curriculum:

- Difficulties with reading skills;
- Difficulties with writing skills;
- Difficulties with oral communication skills;
- Difficulties with conceptualisation or reasoning."

Secondly, we shall outline some examples:

- The pupil does not meet the academic requirements;
- The pupil meets the academic requirements but only with considerably more effort and hard work;
- The pupil has behavioural problems;
- The pupil has emotional problems (anxiety, depression, etc.).

Neuropsychological assessment

Neuropsychologists have a background in psychology and have specialised in the functioning of the brain, enabling them to make an accurate diagnosis of cognitive difficulties. Neuropsychological assessment is carried out using psychometric tests. One of the first things a neuropsychologist seeks to determine during an assessment for a learning disability is the individual's performance and intellectual functioning. Specific reading disorder, in fact, cannot be explained by intellectual weakness. Learning difficulties and disorders can, however, stem from multiple factors. It is therefore through a battery of subtests that various components of the brain are also assessed. These involve different cognitive mechanisms such as memory, language functions, attention, concentration and executive functions. At the end of this investigation, a comprehensive cognitive profile of the pupil is drawn up, from which a diagnosis is made, accompanied by recommendations.

The remedial educational assessment

Assessments of writing difficulties carried out by remedial teachers. These consist of various tests, including a reading speed test, a text comprehension test, a dictation, and an assessment of the pupil's metalinguistic and phonological knowledge.

Speech and language therapy assessment

This assessment of linguistic functions involves measuring difficulties with spoken and written language. The tests it comprises enable an analysis of the pupil's psycholinguistic and phonological abilities and allow the implications for learning to read and write to be deduced.

Methodological adaptations

Pedagogical adaptations

Socio-psychological adaptations

Assessment adaptations

Conclusion

A child's disorder rarely has a single cause. The complexity of the brain and its functioning means that we must explore the various areas that may influence learning (psychological, medical, instrumental, developmental, etc.). It is therefore important that there is a partnership between families, teachers, school psychologists, school doctors and neuropsychologists to assess children's abilities in the various areas and make a diagnosis (by process of elimination). It is advisable not to wait until a pupil is struggling before involving the school psychologist, members of the RASED team and the school health service in your approach.

Supporting pupils with learning difficulties requires a shift from a school system focused on uniform performance to one centred on equity. By combining the perspectives of assessment experts (neuropsychologists, speech and language therapists, remedial teachers) with the practical work of teachers in the classroom, it becomes possible to transform these children's school experience. By consistently implementing methodological, pedagogical, socio-psychological and assessment-related adaptations, we do more than simply make their educational journey easier: we provide them with the keys to independence and success in their life plans.

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