

Help for the Hidden Handicapped

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Do you have a child who looks like he's been sentenced to a torture chamber whenever he's asked to write anything? You may not be raising/teaching an "obstinate, lazy underachiever"; instead, you may be looking at a gifted child with a thinly disguised learning disability. Here's a checklist to help you determine if this child needs further diagnosis. As you look over the list, imagine that this young person has just been given an assignment to write an essay and you are observing him in the process.

Diagnostic Checklist

1. Is his writing posture awkward? (Does he resemble a scrunched up pretzel?)
2. Does he hold his pencil strangely?
3. Can you see the tension run through his hand, arm, face?
4. Does it take him much longer to write than anyone else his age?
5. Does he fatigue easily and want to quit?
6. Does he space his letters on the paper in an unusual way?
7. Does he form his letters oddly (e.g., starting letters at the top that others would start at the bottom)?
8. Does he mix upper and lower case letters?
9. Does he mix cursive and manuscript?
10. Are his cursive letters disconnected?
11. Does his lettering lack fluidity?
12. Does he prefer manuscript to cursive?
13. Does he reverse letters after age 7?
14. Is his handwriting illegible?
15. Is his spelling poor?
16. Does he avoid writing words he can't spell?
17. Does he leave off the ending of words?
18. Does he confuse singulars and plurals?
19. Does he mix up small words, like "the" and "they"?
20. Does he leave out soft sounds, like the "d" in gardener?
21. Is his grasp of phonics weak? (Is it difficult to decipher what he was trying to spell?)

Assessment

If you have noticed most of these signs, you are probably looking at a child with a disability. The next step is a thorough, comprehensive diagnosis by a competent psychologist—preferably one who has some experience with gifted children with learning disabilities. A caveat is in order here. Giftedness and

disabilities can cancel each other out, making the child appear "average." High scores represent the child's giftedness and low scores his disabilities. Also some professionals do not realize the significance of large discrepancies between strengths and weaknesses when a child's lowest scores are still within the average range. A general rule of thumb is that a 15 point discrepancy between the Verbal and Performance score on the WISC-R is significant, as is a 7 point discrepancy between the highest subtest score and lowest subtest score (Sattler, 1982).

Therapy

Diagnosis should be followed by therapy, if indicated. The following therapeutic interventions may prove helpful:

1. Children with depressed Performance scores might be seen by a behavioral optometrist to see if vision therapy would be recommended (Hellerstein, 1990).
2. Children with eye-hand coordination or motor speed problems may profit from sensory-motor integration therapy offered by an occupational therapist.
3. Children with auditory perception problems can be further assessed by an audiologist, using the Central Auditory Processing Battery.
4. Children with cyclic mood swings and lack of control could be checked by allergist for food allergies.
5. Children who are highly distractible can be seen by a specialist in attention deficit disorders.
6. If emotional difficulties surface or the child has suicidal ideation, consult a psychologist or play therapist.

Educational Interventions

Modifications of the child's school program area also recommended. Some of the following suggestions should be implemented:

1. Write assignments on the board or on paper.
2. Use several modalities when presenting information: visual, auditory, and kinesthetic, when possible.
3. Teach to the student's strengths.

4. Expose the student to abstract, complex concepts, even if he hasn't mastered the easy, sequential material.
5. AVOID TIMED TESTS! If they are absolutely necessary, let the student take them by himself competing with his own past record rather than in competition with others.
6. If the student has motor speed or processing speed difficulties, make sure this is documented by the school psychologist so that college board exams (SAT, ACT) can be arranged to be taken untimed.
7. Allow the student to use a keyboard for most assignments. When grading handwritten work, do not lower grades due to mechanical errors.
8. Let the student discover his own methods of problem solving. Do not force him to show his work.
9. Use a sight approach to reading rather than phonics. Use books rich in visual imagery.
10. Many of these students are "whole-part" learners, so give them the big picture before the details.
11. Engage a tutor to help the student learn visualization techniques (Freed, 1990).
12. Teach the student to compensate for his disability rather than trying to remediate it. For example, teach him to use a spell check program or a Bad Speller's Dictionary (Krevisky, 1985).
13. To improve handwriting, try calligraphy.
14. Use humor frequently.
15. Engage the student emotionally through encouragement.
16. Assure the student that he will get smarter as he gets older, because most gifted individuals with learning disabilities find fields where they can succeed.

For more detailed information on this topic and a longer list of suggestions, please see the article, "Invisible Gifts, Invisible Handicaps" (Silverman, 1989). Gifted children with learning disabilities do not have to fall through the cracks in the system. With proper detection and intervention, school can produce joy instead of defeat.

References

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(NOTE: I used the "generic male" pronoun throughout the article because the majority of students I've seen who fit this description were male. My apologies to my feminist friends!)

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