



EMOTIONAL AND BEHAVIOURAL DIFFICULTIES OBSERVED IN STUDENTS WITH VISUAL IMPAIRMENTS AND LEARNING DISORDER: - A CROSS SECTIONAL STUDY

Ophthalmology

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ABSTRACT

Aim and Objectives of the Study:- a) To study the children with learning disorder may lead to emotional distress. b) To study the visual processing issues and impact on learning disorder. c) To promote general awareness and an understanding of the problems and needs of children and others with learning disorder and thereby to assist them to obtain specialised diagnosis and treatment so that their disorder maybe addressed as early as possible. Sample for the study includes 288 school going children (children with Learning disorder boys 98 and 46 girls, children with non-learning disorder boys 105, and 39 girls) between the age group of 10-16 years, from different schools from Raipur. Result - Study showed statistically significant differences in children with learning disorder lead to emotional distress (depressive, anxiety, withdrawn behaviour ,somatic complain, thought problem, ADHD, rule breaking behavior, aggressive behaviour , oppositional problem and conduct problem), statistically significant at the level of <math><0.05</math>. Visual processing issues -Children with visual discrimination issues around 74 % (89 % boys and 41% girls) children with learning disorder and 46% (51% boys and 31% girls) children with non- learning disorder, Children with Visual figure-ground discrimination issues around 48% (44% boys and 57% girls) children with learning disorder and 19% (17% boys and 26% girls) children with non-learning disorder, Children with Visual sequencing issues Around 51% (53% boys and 48% girls) children with learning disorder and 19% (22% boys and 13% girls) children with non- learning disorder, Children with Visual-motor processing issues Around 74% (76% boys and 72% girls) children with learning disorder and 32% (32% boys and 31% girls) children with non- learning disorder , Children with Long- or short-term visual memory issues Around 65% (62% boys and 70% girls) children with learning disorder and 52% (53% boys and 49% girls) children with non-learning disorder, Children with Visual-spatial issues Around 24% (19% boys and 32% girls) children with learning disorder and 14% (11% boys and 21% girls) children with non- learning disorder, Children with Visual closure issues Around 35% (35% boys and 35% girls) children with learning disorder and 18% (24% boys and 5% girls) children with non- learning disorder, and Children with letter and symbol reversal issues Around 74% (67% boys and 89% girls) children with learning disorder and 46% (37% boys and 69% girls) children with non- learning disorder. Conclusion -The association between learning disorder, behaviour and emotional problems is of great significance over the long time as both behaviour problems and academic problems are likely to persist and both are related to maladjustment, health- (Psychiatric, Ophthalmology, psychologist, occupation therapist, and special teachers), social deviance, activities and unhappiness in later life. Early identification from schools, teachers, parents, special educators should not wait for difficulties in students to reinforce, but they should try to find students "at risk" as early as possible. In present study shows that emotional and behaviour difficulties observed in children with visual impairments and learning disorder are positive significance.

KEYWORDS

WRAT 5- Wide Range Achievement Test, Fifth Edition, Child Behaviour Checklist, counselling and guidance.

INRODUCATION-

Learning difficulties not only present problems in coping with academic requirement but has serious repercussions. School teachers and parents label children by their behaviour without knowing that reasons are at the root of the problem. Emotional behavioural problems can be caused by learning difficulties. Learning Disorder has been found to occur in approximately 4.7 % of children and adolescents. (Fristad, Topolosky, Weller, & Weller, 1992).

School going children with learning disorder or difficulties are frequently criticized and denigrated by teachers and parents and they may be rejected by parents, teachers, peers or social. As they fall further and further behind they develop a picture of themselves as deficient, different, hopeless and unsuccessful, but still they didn't get the support from their parents, teachers or tuitions. Continuing failure and increasing distress further reduce motivation to try and a syndrome of "learned helplessness" may produce indifference to learning, or in some cases, energetic avoidance of school work.

Learning disabilities may negatively affect a child's social growth. Children with LD who do not have many friends will feel lonely, sad and misunderstood. Many researchers have consistently linked depression to children with learning disorder. Fristad et al. found the presence of learning disabilities among a sample of clinically depressed hospitalized children to be seven times higher than in the general population. Other researchers have also noted the high "comorbidity" of learning disabilities and depression (Bender & Wall, 1994; Livingston, 1985; Peck, 1985). Fristad et al. suggested that the

"additional difficulties experienced by [depressed] children [with learning disabilities] in the classroom may be due to the stress and frustration caused by their learning disabilities".

These children will get into fights easily because they will feel disapproved. Emotional problems may mask learning disorder because parents, teachers or many adults may only pay attention on the children academic and behaviour growth, they may ignore or may be not understand the children learning issues or learning disorder. When difficulties or disorder are not observed and children do not get help and support from school or home, they will come up with any excuse to avoid doing homework tend to refuse school.

Emotional distress worries, concerns may increase learning disorder when children are worried about their school work, their anxieties, depress about their works and their academic marks can decrease ability to pay attention to what they are learning in class. Not paying attention to things that they have to learn can lead children not to comprehend and learn, and at the end they'll give up and refuse of school or many even are truants avoiding schools.

But still in many places in India parents and teachers they didn't help or understand the children academic or emotional difficulties rather than labelling as lazy, half mind, or using rough language .

Many people think of eyesight, they usually think about accuracy. But vision is much more than that. The brain processes the visual world, including things like symbols, pictures, design, maps and distances.

Weaknesses in these brain functions are called visual processing disorder or visual processing issues. But they're fairly common in children who have learning issues.

Visual processing issues don't just affect how a child learns. They also impact his ability to do ordinary things like sorting, cricket or playing a simple game of volleyball, football or basketball. Visual processing issues can cause problems with socializing and self-esteem, too. Some children may become frustrated and withdrawn. Like- types of visual processing issues scientists have identified, Visual figure-ground discrimination issues, Visual sequencing issues, Visual-motor processing issues, Long- or short-term visual memory issues, Visual-spatial issues, Visual closure issues, and Letter and symbol reversal issues.

AIM AND OBJECTIVES OF THE STUDY:-

The study was conducted with following objects in mind:

- a) To study the Learning disorder may lead to emotional distress.
- b) To study the visual processing issues and impact on learning disorder.
- c) To promote general awareness and an understanding of the problems and needs of children and others with learning disorder and thereby to assist them to obtain specialised diagnosis and treatment so that their disorder maybe addressed as early as possible.

MATERIAL & METHODS:

- 1. Place of Study: This study was conducted at Shri Aurobindo Medical and Research Centre, Pachpedi Naka ,Raipur.
- 2. Period of Study: September 2016 to March 2019 (2 years 6 months)

3. Inclusion Category

- School going children (boys and girls) (Age group 10 to 16 years)
- School going children (boys and girls) who referred by doctors for low academic performance and behaviour difficulties.

4. Exclusion

- School going children (boys and girls), (parents- complain academic, visual, behaviour difficulties), at different schools from Raipur.

5. Sample size: School going children –parents complain about child academic , visual an behaviour difficulties, referred at Shri Aurobindo Medical and Research Centre, Pachpedi Naka ,Raipur were included in the study (N= 288)

6. Study Design: Cross sectional study (Questionnaire based)

MEASURING INSTRUMENTS-

WRAT 5- Wide Range Achievement Test, Fifth Edition, author-Gary S. Wilkinson, PhD , Gary J. Robertson, PhD, The WRAT-5 provides derived scores and interpretive information for four subtests: Reading, sentence comprehension, spelling, math computation, and reading composite.

Child Behaviour Checklist for Ages 6–18 (CBCL/6-18)- Achenbach and Rescorla 2001) The 113 items on this measure are rated as Not True (0), somewhat or sometimes True (1), or Very True or Often True (2). Validity and reliability are excellent, and extensive normative data are available for children ranging from 6 to 18.

PROCEDURE OF DATA COLLECTION

For collection of data from **Shri Aurobindo Medical and Research Centre Raipur**, was chosen. Clinical profile of the study subjects was analysed and a detailed history including presenting complaints, duration of symptoms, socio economic status, medical history, psychiatric history, socio demographic background, birth history, developmental history, personal and family history, school performance and school absence details were recorded from the parents, children and accompanying informants. A thorough physical examination was performed in all children including a general and systemic examination.

First of all, checklist of trails was administered on the subjects to get their original viewpoint. The subjects were randomly selected sample in Shri Aurobindo Medical and Research Centre Raipur, school going Children (boys 203 and 85 Girls) each subjects took about 2 hours to

respond on the entire above tools. A period of two years 6 months was devoted for the data collection.

STATISTICAL ANALYSIS

The obtained data was statistically analyzed by applying descriptive (Mean, Standard Deviation, paired t-value) of significance of mean differences in term of various variable. We have entered all data and further Statistical Analysis was done with the help of IBM- SPSS-25 software.

RESULT

The characteristics of the sample are presented in Table 1a. Total 288 children participate in this study children with learning disorder 68% boys and 32% girls and children from non- learning disorder range 73% boys and 27% girls. Children between the age ranges of 10-16 years. About 15% of children with learning disorder and 17% of children with non-learning disorder were from class 5th , 15% of children with learning disorder and 17% of children with non-learning disorder were from class 6th, 24% of children with learning disorder and 26% of children with non-learning disorder were from class 7th , 32% of children with learning disorder and 26% of children with non-learning disorder were from class 8th ,and 14% of children with learning disorder and 13% of children with non-learning disorder were from class 9th . It is seen from the table that about 50 per cent of children fell in the age group of 12- 15 years.

TABLE.1A – Children With Learning Disorder And Non- Learning Disorder Children Class Wise And Age Wise Distribution

Sino.	Characteristics	Learning Disorder Children		Non Learning Disorder Children	
		Boys	Girls	Boys	Girls
Gender	Boys	98	68%	105	73%
	Girls	46	32%	39	27%
Class		Boys N=98	Girls N= 46	Boys N= 105	Girls N= 39
	5th Class	15 (15%)	7 (15%)	21 (20%)	4 (10%)
	6th Class	17 (17%)	5 (11%)	14 (13%)	11 (28%)
	7th Class	19 (19%)	15 (33%)	24 (23%)	14 (36%)
	8th Class	29 (30%)	17 (37%)	31 (30%)	7 (18%)
	9th Class	18 (18%)	2 (4%)	15 (14%)	3 (8%)
Age					
	10- 11 Years	28 (29%)	9 (20%)	24 (23%)	6 (15%)
	12 -13 Years	32 (33%)	16 (35%)	28 (27%)	17 (44%)
	14- 15 Years	47 (48%)	14 (30%)	44 (42%)	14 (36%)
	15- 16 Years	37 (38%)	7 (15%)	9 (9%)	2 (5%)

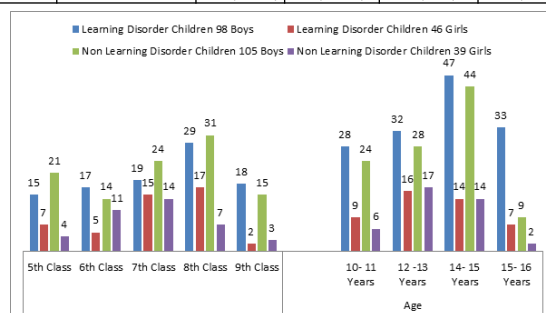


FIGURE NO. 1A- Children With Learning Disorder And Non-Learning Disorder Children Class Wise And Age Wise Distribution

About parents' education (table 1b), children with learning disorder 6% parents and children with non-learning disorder 3% parents are 10th class , children with learning disorder 13% parents and children with non-learning disorder 15% parents are 12th class, children with learning disorder 28% parents and children with non-learning disorder 37% parents are graduate, children with learning disorder 19% parents and children with non-learning disorder 22% parents are post graduate, and children with learning disorder 34% parents and children with non-learning disorder 24% parents are other educational background .

Regarding occupation, children with learning disorder 2% parents and children with non-learning disorder 1% parents are unemployed, children with learning disorder 21% parents and children with non-learning disorder 19% parents are doing farming, children with learning disorder 30% parents and children with non-learning disorder

33% parents are working in government sector, children with learning disorder 18% parents and children with non-learning disorder 28% parents are working in private sector, children with learning disorder 10% parents and children with non-learning disorder 10% parents are self-employed, children with learning disorder 12% parents and children with non-learning disorder 8% parents are doing own shops or business, and children with learning disorder 7% parents and children with non-learning disorder 1% parents are doing other job.

In case of income category, majority children with learning disorder 22% parents and children with non-learning disorder 17% parents belonged to low income group, children with learning disorder 40% parents and children with non-learning disorder 49% parents belonged to medium income group and children with learning disorder 38% parents and children with non-learning disorder 34% parents were of high income group.

Majority 47% children with learning disorder and 68% children from non-learning disorder hailed from nuclear families, 53% children with learning disorder and 32% children from non-learning disorder hailed from joint families. Around 47% of children with learning disorder and 49% children with non-learning disorder belonged to medium socio-economic and 38% of children with learning disorder and 38% children with non-learning disorder belonged to high socio-economic status. Only 15% of children with learning disorder and 13% children with non-learning disorder belonged from low socio-economic status.

Table No. 1b. Distribution Of The Families Of Studied Children With Learning Disorder And Non- Learning Disorder Children Behaviour Problem To Their Socio-demographic Characteristics

Areas			
Parents Education		Learning Disorder Children	Non Learning Disorder Children
	10th	9 (6%)	5 (3%)
	12th	18 (13%)	21 (15%)
	Graduate	40 (28%)	53 (37%)
	Post Graduate	28 (19%)	31 (22%)
	Other	49 (34%)	34 (24%)
Parents Income	Low	32 (22%)	24 (17%)
	Medium	58 (40%)	71 (49%)
	High	54 (38%)	49 (34%)
Type Of Family			
	Joint	76 (53%)	46 (32%)
	Nuclear	68 (47%)	98 (68%)

Social Economic Status			
	Low	22 (15%)	18 (13%)
	Medium	68 (47%)	71 (49%)
High	54 (38%)	55 (38%)	
Parents Occupation	Unemployed	3 (2%)	2 (1%)
	Farmer	30 (21%)	28 (19%)
	Government servant	43 (30%)	47 (33%)
	Private Servant	26 (18%)	40 (28%)
	Self-employed	15 (10%)	14 (10%)
	Business	17 (12%)	11 (8%)
	Others	10 (7%)	2 (1%)

At Present result outcomes for the majority of individual with learning disorder they did not receive any appropriate help from school, teachers and even parents nor accepted the child is suffering from learning disorder, in present study 97% students reported that they did not getting any help for school for remedial training, provision for learning disorder, behaviour therapy, because the lack of teacher and parents awareness.

Table No. 2 –mean And Std. Deviation Along With Their Statistical Significance Of Difference Between Mean Children With Learning Disorder And Non- Learning Disorder Children

Paired Samples Statistics						
			Mean	N	Std. Deviation	Std. Error Mean
Pair 1	Word Reading	LD	40.24	144	20.319	1.693
		NLD	42.57	144	20.899	1.742
Pair 2	Sentence Comprehension	LD	30.83	144	16.174	1.348
		NLD	45.39	144	21.317	1.776
Pair 3	Spelling	LD	26.65	144	11.697	.975
		NLD	30.91	144	16.772	1.398
Pair 4	Math Computation	LD	47.56	144	22.577	1.881
		NLD	56.10	144	20.376	1.698
Pair 5	Reading Composite	LD	43.40	144	21.603	1.800
		NLD	47.72	144	21.439	1.787

Paired Samples Test									
		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Pair 1	Word Reading - LD/NLD	-2.333	17.733	1.478	-5.254	.588	-1.579	143	.117
Pair 2	Sentence Comprehension - LD/NLD	-14.562	20.725	1.727	-17.976	-11.149	-8.432	143	.000
Pair 3	Spelling - LD/NLD	-4.257	11.945	.995	-6.225	-2.289	-4.277	143	.000
Pair 4	Math Computation - LD/NLD	-8.542	22.598	1.883	-12.264	-4.819	-4.536	143	.000
Pair 5	Reading Composite - LD/NLD	-4.319	20.038	1.670	-7.620	-1.019	-2.587	143	.011

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The Word Reading subtest measures decoding skills through letter and word recognition. The study revealed that the mean value of reading fluency of learning disorder students was 40.24 and non-learning disorder students 42.57, the std. deviation was 20.31 and 20.89 and 't' value of the group was -1.579, which is not significant at 0.05 level. The result of the study showed that both groups are facing issues in word reading. In particular, students with learning disorder struggle to develop reading fluency Bashir and hook 2009 and Chard et al.2009.

The Sentence Comprehension subtest uses a modified cloze procedure to measure the ability to gain meaning from words and to comprehend ideas contained in sentences. It can be added to the reading area to enhance the scope of the content measured and to explore one's inferential ability to seek a level of understanding required in reading comprehension. The study revealed that the mean value of Sentence Comprehension of learning disorder students was 30.83 and non-learning disorder students 45.39, the std. deviation was 16.17 and 21.31 and 't' value of the group was -8.43, which is significant at 0.05 level. The result of the study showed that the learning disorder students possess high issues in Sentence Comprehension than the non-learning disorder students.

The Spelling subtest utilizes a dictated spelling format to measure the ability to encode sounds into written form as letters or words. The study revealed that the mean value of Spelling of learning disorder students was 26.65 and non-learning disorder students 30.91, the std. deviation was 11.69 and 16.77 and 't' value of the group was -4.27, which is significant at 0.05 level. The result of the study showed that the learning disorder students possess high issues in spelling than the non-learning disorder students. According to Nag & Snowling, 2013 said there is a strong link between a student's reading and spelling, because sound (phoneme)-symbol (grapheme) connections are needed for both.

Math Computation involves counting, identifying numbers, solving simple oral problems, as well as calculating written math problems. The study revealed that the mean value of Math Computation of learning disorder students was 47.56 and non-learning disorder students 56.10, the std. deviation was 22.57 and 20.37 and 't' value of the group was -4.53, which is statistically significant at <0.05 level. The result of the study showed that the learning disorder students possess high issues in math computation than the non-learning disorder students. Students with learning disabilities may have

problems in both math calculations and math reasoning (USOE, 1977). These students often have a number of problems in mathematical thinking (Hunt & Marshall, 2005).

Reading Composite this involves a calculation from the Word Reading and Sentence Comprehension subtests which provides a more reliable and comprehensive measure of overall reading achievement. The study revealed that the mean value of Reading Composite of learning disorder students was 43.40 and non-learning disorder students 47.72, the std. deviation was 21.60 and 21.43 and 't' value of the group was -2.58, which is significant at 0.05 level. The result of the study showed that the learning disorder students possess high issues in reading composite than the non-learning disorder students.

Table No.4: Mean And Std. Deviation Along With Their Statistical Significance Of Difference Between Mean Children With Learning Disorder And Non- Learning Disorder Children Behaviour Issues

Paired Samples Statistics						
Pair	Issue	Group	Mean	N	Std. Deviation	Std. Error Mean
Pair 1	Depressive	LD	62.38	144	18.323	1.527
		NLD	46.01	144	18.135	1.511
Pair 2	Anxiety	LD	64.13	144	15.066	1.255
		NLD	44.65	144	16.529	1.377
Pair 3	Withdrawn Behaviour	LD	59.38	144	18.481	1.540
		NLD	44.93	144	17.831	1.486
Pair 4	Somatic Complain	LD	59.97	144	17.755	1.480
		NLD	44.99	144	17.790	1.482
Pair 5	Thought Problem	LD	59.01	144	18.347	1.529
		NLD	45.40	144	18.025	1.502
Pair 6	ADHD	LD	56.19	144	18.205	1.517
		NLD	45.13	144	18.041	1.503
Pair 7	Rule Breaking Behaviour	LD	59.58	144	17.843	1.487
		NLD	45.34	144	18.021	1.502
Pair 8	Aggressive Behaviour	LD	60.29	144	17.259	1.438
		NLD	44.98	144	18.024	1.502
Pair 9	Oppositional Problem	LD	58.22	144	17.686	1.474
		NLD	45.16	144	18.024	1.502
Pair 10	Conduct Problem	LD	56.37	144	20.061	1.672
		NLD	46.19	144	19.033	1.586

Paired Samples Test									
		Paired Differences				t	df	Sig. (2-tailed)	
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower				Upper
Pair 1	Depressive - LD/NLD	16.361	24.536	2.045	12.320	20.403	8.002	143	.000
Pair 2	Anxiety - LD/NLD	19.486	23.818	1.985	15.563	23.410	9.817	143	.000
Pair 3	Withdrawn Behavior - LD/NLD	14.444	25.036	2.086	10.320	18.568	6.923	143	.000
Pair 4	Somatic Complain - LD/NLD	14.972	23.481	1.957	11.104	18.840	7.651	143	.000
Pair 5	Thought Problem - LD/NLD	13.618	23.656	1.971	9.721	17.515	6.908	143	.000
Pair 6	ADHD - LD/NLD	11.056	24.679	2.057	6.990	15.121	5.376	143	.000
Pair 7	Rule Breaking Behavior - LD/NLD	14.243	22.215	1.851	10.584	17.902	7.694	143	.000
Pair 8	Aggressive Behavior - LD/NLD	15.313	22.537	1.878	11.600	19.025	8.153	143	.000
Pair 9	Oppositional Problem - LD/NLD	13.056	23.942	1.995	9.112	16.999	6.544	143	.000
Pair 10	Conduct Problem - LD/NLD	10.181	28.654	2.388	5.460	14.901	4.263	143	.000

As it shown in table 4 -Mean score for Depressive features in the learning disorder children (Mean 62.38; Std. deviation 18.32) and in the non-learning disorder children (Mean 46.01; Std. deviation 18.13) (t value 8.002) there exist significant differences between learning disorder children and non-learning disorder children with Depressive features and Mean score for Thought Problem in the learning disorder children (Mean 59.01; Std. deviation 18.34) and in the non-learning disorder children (Mean 45.40; Std. deviation 18.02) (t value 6.908)

there exist significant differences between learning disorder children and non-learning disorder children with Thought Problem . Present study shows that children with learning disorder children are not actively participation in every activity and enjoying, sleep less, worries about the homework, examination or not even properly mixing and enjoying social activities. According to Birmaher B, Brent D, et al (1998) study shows psychotherapy can be useful as initial therapy for children and adolescents with mild to moderate depression and as an

adjunct to medications for children with more severe depression.

Mean score for Anxiety features in the learning disorder children (Mean 64.13; Std. deviation 15.066) and in the non-learning disorder children (Mean 44.65; Std. deviation 16.529) (t value 9.817) there exist significant differences between learning disorder children and non-learning disorder children with Anxiety features. Study shows that learning disorder children face social fear, phobia, separation anxiety, nervousness all positively come down .Jager and Ryan (2007) study showed better results in reduction of symptoms of anxiety disorder and worries after play therapy.

Mean score for Withdrawn Behaviour in the learning disorder children (Mean 59.38; Std. deviation 18.48) and in the non-learning disorder children (Mean 44.93; Std. deviation 17.831) (t value 6.923) there exist significant differences between learning disorder children and non-learning disorder children with Withdrawn Behaviour . Depression/ withdrawn behaviour/ anxiety are most often caused by a child being out of touch with their awareness of them. For example, child may sad, or showing angry feeling, hidden deep down, but the idea of expressing them seems scary. Depression is a common, natural mechanism that results from the mind's attempt to repress frightening, sad, and angry feeling. Children are completely unaware of all this going on. Our findings support the earlier work made in this area -Harrist and colleagues (1997), Hymel, S., Bowker, A. & Woody, E.(1993) and Ladd and Burgess (1999). Present study noted earlier, the withdrawn children in our research had problems in social skills, peer group, shy nature, won't talk to others and don't take participant in sports activities, low or no friend in school, family relationship.

Mean score for Somatic Complain in the learning disorder children (Mean 59.97; Std. deviation 17.755) and in the non-learning disorder children (Mean 44.99; Std. deviation 17.790) (t value 7.651) there exist significant differences between learning disorder children and non-learning disorder children with Somatic Complain. Present study shows that children with learning disorder shows somatic issues like headache, abdomen pain, vomiting issues, pain in chest, joint pain and many studies performed in children have shown a relationship between somatic complaints and impaired emotional functioning. Emotional problems such as in creased level of stress, excessive experience of negative emotions, and symptoms of depression or feeling of fear co-occur with an increase in somatic complaints (Compo st al., 1994; De

waal MV, Arnold, Eekhof, & Van Hemert, 2004).

Mean score for attention-deficit hyperactivity disorder (ADHD) in the learning disorder children (Mean 56.19; Std. deviation 18.205) and in the non-learning disorder children (Mean 45.13; Std. deviation 18.041) (t value 5.376) there exist significant differences between learning disorder children and non-learning disorder children with attention-deficit hyperactivity disorder (ADHD) . Present study shows that children with learning disorder having attention problem, decreasing impulsiveness, and self-control. Conclusions from Cantwell's (1996) meta-analysis spanning ten years of research about ADD indicate that a combination of psychotherapy and psychosocial interventions play a major role in successful treatment. In 2013 study Ebrahim Abdollahian, Naghmeh Mokhber, Atena Balaghi, Fatemeh Moharrari- found that cognitive-behavioral play therapy showed a significant decrease in hyperactivity in children who had been diagnosed with ADHD.

Mean score for Rule Breaking Behavior in the learning disorder children (Mean 59.58; Std. deviation 17.843) and in the non-learning disorder children (Mean 45.34; Std. deviation 18.021) (t value 7.694) there exist significant differences between learning disorder children and non-learning disorder children with Rule Breaking Behavior and Mean score for Conduct Problem in the learning disorder children (Mean 56.37; Std. deviation 20.061) and in the non-learning disorder children (Mean 46.19; Std. deviation 19.033) (t value 4.263) there exist significant differences between learning disorder children and non-learning disorder children with Conduct Problem. Present study shows that children with learning disorder having more difficulties like cruel to animal, destroy toys or other things , not follow the rules in school as well as home, using bad language .

Mean score for Oppositional Problem in the learning disorder children (Mean 58.22; Std. deviation 17.686) and in the non-learning disorder children (Mean 45.16; Std. deviation 18.024) (t value 6.544) there exist significant differences between learning disorder children and non-learning disorder children with Oppositional Problem. According to DSM-5 - Oppositional defiant disorder (ODD) is listed in the DSM-5 under Disruptive, impulse-control, and conduct disorders and defined as "a pattern of angry/irritable mood, argumentative/defiant behaviour, or vindictiveness" in children and adolescents.

Table No. 5- Distribution Of The Studied Children With Visual Processing Issues Average And Percentage

	Visual discrimination issues		Visual figure-ground discrimination issues		Visual sequencing issues		Visual-motor processing issues		Long- or short-term visual memory issues		Visual-spatial issues		Visual closure issues		Letter and symbol reversal issues	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
LD	87 (89%)	19 (41%)	43 (44%)	26 (57%)	52 (53%)	22 (48%)	74 (76%)	33 (72%)	61 (62%)	32 (70%)	19 (19%)	15 (32%)	34 (35%)	16 (35%)	66 (67%)	41 (89%)
LND	54 (51%)	12 (31%)	18 (17%)	10 (26%)	23 (22%)	5 (13%)	34 (32%)	12 (31%)	56 (53%)	19 (49%)	12 (11%)	8 (21%)	24 (23%)	2 (5%)	39 (37%)	27 (69%)

Children with visual discrimination issues they have difficulty seeing the difference between two similar letters shapes or objects. So they may mix up letters, confusing *d* and *b*, or *p* and *q*. Around 74 % (89 % boys and 41% girls) children with learning disorder and 46% (51% boys and 31% girls) children with non- learning disorder shows difficulties in visual discrimination.

Children with Visual figure-ground discrimination issues they may not be able to pull out a shape or character from its background. They may have trouble finding a specific piece of information on a page. Around 48% (44% boys and 57% girls) children with learning disorder and 19% (17% boys and 26% girls) children with non- learning disorder shows difficulties in Visual figure-ground discrimination issues.

Children with Visual sequencing issues they have difficulty telling the order of symbols, words or images. They may struggle to write answers on a separate sheet or skip lines when reading. They also may reverse or misread letters, numbers and words. Around 51% (53% boys and 48% girls) children with learning disorder and 19% (22% boys and 13% girls) children with non- learning disorder shows difficulties in Visual sequencing issues Children with Visual-motor processing issues having difficulty using feedback from the eyes to coordinate the movement of other parts of the body. Writing within the lines or margins can be tough. Children may bump into things and have trouble

copying from a book. Around 74% (76% boys and 72% girls) children with learning disorder and 32% (32% boys and 31% girls) children with non- learning disorder shows difficulties in Visual-motor processing.

Children with Long- or short-term visual memory issues having difficulty recalling what they've seen. Because of that they may struggle with reading and spelling. They may also have trouble remembering what they've read and using a calculator or keyboard. Around 65% (62% boys and 70% girls) children with learning disorder and 52% (53% boys and 49% girls) children with non- learning disorder shows difficulties in Long- or short-term visual memory.

Children with Visual-spatial issues having difficulty telling where objects are in space. That includes how far things are from them and from each other. It also includes objects and characters described on paper or in a spoken narrative. Children may also have a tough time reading maps and judging time. Around 24% (19% boys and 32% girls) children with learning disorder and 14% (11% boys and 21% girls) children with non- learning disorder shows difficulties in Visual-spatial.

Children with Visual closure issues having difficulty identifying an object when only parts are visible. They may not recognize a truck if

it's missing wheels. Or a person in a drawing that is missing a facial feature. Children may also have great difficulty with spelling because they can't recognize a word if a letter is missing. Around 35% (35% boys and 35% girls) children with learning disorder and 18% (24% boys and 5% girls) children with non-learning disorder shows difficulties in Visual closure.

Children with letter and symbol reversal issues they having issues with switch letters or numbers when writing. Or make letter substitutions when reading after age 7. They also have trouble with letter formation that affects reading, writing and math skills. Around 74% (67% boys and 89% girls) children with learning disorder and 46% (37% boys and 69% girls) children with non-learning disorder shows difficulties in Letter and symbol reversal.

CONCLUSION

The association between learning disorder, behaviour and emotional problems is of great significance over the long time as both behaviour problems and academic problems are likely to persist and both are related to maladjustment, health- (Psychiatric, Ophthalmology, psychologist, occupation therapist, and special teachers), social deviance, activities and unhappiness in later life. Early identification from schools, teachers, parents, special educators should not wait for difficulties in students to reinforce, but they should try to find students "at risk" as early as possible. In present study shows that emotional and behaviour difficulties observed in children with visual impairments and learning disorder are positive significance.

In this present study seen that Intrinsic reinforcement comes from within the students and relate to a particular task, such things as curiosity, interest, pride, the satisfaction of completing a task, and the avoidance of pain or failure are all internal reinforcers of positive behaviour, school teachers, parents, and special educators create or develop such kind of environment where student can positively develop self. On other hand Extrinsic reinforcers outside of the person or task and can be used by school teachers, parents, and special educators help such students learn maintain or increase positive behaviours. Extrinsic reinforcers are needed when the behaviours to be learned are difficult, stress, frustrating events, time consuming, or uninteresting things or tasks, and regular medical check-up.

LIMITATION -

The results of this study were significant but short-term. In order to study the long-term effects of children with learning disorder, visual processing and behaviour problem, difficulties to obtain results for a more extended population.

As this research was conducted in children with learning disorder, visual processing, and the researcher had limitations of place and proper time to hold sessions.

FINANCIAL SUPPORT AND SPONSORSHIP-NIL CONFLICT OF INTEREST

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