

## Adults with Learning Disabilities: An overview

Not so long ago, it was widely believed that learning disabilities – such as dyslexia, dysgraphia or dyscalcula – emerged when a child first tackled academic subjects in 1st grade, at age 6 or 7, and disappeared when a student left academic pursuits behind as an adult. We know now, however, that learning disabilities are lifelong in nature. Assessments of the pre-reading skills of very young children at 3 or 4 are accurate predictors of reading difficulties to come, and while many adults who've benefited from quality education targeted to meet their needs do learn to compensate and to a degree overcome their learning disabilities, they never actually go away.

To further complicate matters for adults with learning disabilities, the information age has ushered in a corollary phenomenon, that of lifelong learning. In a world in which the typical individual can expect to undertake not only multiple jobs throughout the life span but indeed 2, 3 or more careers, the academic pressure to read, learn and remember new material never ceases.

The prevalence of learning disabilities has spiraled ever higher among students in American schools over recent years. There are many explanations for this: diagnostics are better able to detect learning disabilities; environmental hazards such as mercury in fish, agricultural pesticides, air pollutants, etc., pose increasing levels of risk during fetal development and to young children; poor instructional methods have left disadvantaged children behind and struggling with reading and learning difficulties that could be misdiagnosed as learning disabilities. Whatever the set of factors causing the rise in students with learning disabilities, one fact is clear: there were many, many children a decade or a generation ago who had learning disabilities that were never diagnosed and who never received appropriate treatment or instructional assistance.

What became of those people with learning disabilities who are now adults? Many of them dropped out of high school, frustrated by school failures. If they were girls, statistics indicate that a very high proportion of them became pregnant almost immediately upon leaving school, seeking life fulfillment outside of the academic experience that proved to be so unrewarding. If they were men and lucky, they found jobs – for the most part entry level and dead end jobs – and got on with life as best they could with low literacy skills. (One individual of note sold beer in the KingDome in Seattle for 17 years before being diagnosed with learning disabilities: he went to college, attained a master's degree and is now a prominent advocate working for the U.S. Department of Education in Washington, D.C.)

Those not so fortunate turned to crime or became victims of crime, seeking medicinal treatment for their neurological disorders in bottles and vials not found in better pharmacies. Although the Department of Justice, Bureau of Statistics has not been tracking

disabilities among our nation's prison populations, educated estimates range from 40% to 65% or even higher for inmates and parolees who have learning disabilities, mild mental retardation, and psychiatric or addictive disorders, or some combination thereof. As many as 65% of the children incarcerated in juvenile correctional facilities prove to be eligible for special education services.

Assessments were run on all enrollees of the Kansas welfare system shortly after the reform measures instituting the Temporary Assistance to Needy Families (TANF) program were passed. 36% of the women tested as having learning disabilities or mild mental retardation. Several years later, after TANF moved the easier-to-place recipients into employment, the hard core unemployed who remained on the rolls represented an even higher proportion of people with disabilities. Over half of the TANF caseload today can be assumed to have learning disabilities, mental retardation, psychiatric or addictive disorders, or a combination thereof.

There is a brighter side to the picture for adults with learning disabilities, of course. Any number of more affluent children attended excellent and very specialized private schools or benefited from top-drawer public special education systems, usually in affluent communities. Successful students with learning disabilities have gone on to attain graduate degrees at distinguished universities, and some have authored books to encourage their peers and protégés. Yet even among the highest achievers, life with learning disabilities is not always rosy. There is the bright young woman who managed to obtain a master's degree but cannot pass the Pennsylvania MCATS to enter med school; there is the certified special education teacher who cannot now pass the new high stakes teacher exams in Virginia; there is the priest with a master's degree unable to enroll in the doctoral program of his choice due to entrance exams of a design he'll never pass.

Add to the mix the fact that 50% of learning disabilities appear to be inherited genetically, and one realizes that all adults with learning disabilities are at high risk of having offspring facing the same kind of challenges and heartaches in school and in life that they themselves have had to face.

Who is there to help adults with learning disabilities? There are six nationally recognized learning disabilities organizations in the United States (who jointly belong to the Coordinated Campaign for Learning Disabilities and the somewhat more broadly defined National Joint Committee on Learning Disabilities). All of them focus on children and educational issues exclusively – all of them except the Learning Disabilities Association of America.

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