SOCIAL ADJUSTMENT IN ADOLESCENTS WITH LEARNING DISABILITY

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Abstract: Social skills are the skills necessary for healthy adaptation in the society. It needs one to be accommodative of other’s point of view, expressive, and go-getter in social groups having people with different orientations. These skills contribute to a good adjustment in social framework, in school and at home too. It is however observed that LD adolescents show a deficit of social skills. They avoid social interactions, and social situations due to fear of failure. It keeps them from acquiring social behaviour patterns appropriate to their age. (Hoglund&Leadbeater, 2004, Kavale&Forness, 1996; Pearl, 1992, Bandura, 1977, Asher, 1988). Heiman, (2000) stated that LD adolescents exhibit poor interpersonal skills, ineffective social cognition, emotional and motivational problems. They often show difficulty in interpretation of indicators like voice tonalities, expressions and non-verbal language. With difficulty in empathizing, they sometimes misinterpret others’ moods and expressions due to which they get to hear lazy, spoiled, stubborn kinds of adjectives! This becomes frustrating for them and the vicious cycle keeps them from appropriate social behaviour and adjustment. This in turn leads to anxiety, rage and confusion (Levin, 2001). Literature indicates lack of self-awareness, empathy, interpersonal relationship, social and emotional competence, communication, problem solving abilities and inappropriate coping with stress, which makes them vulnerable. This has negative effect on their overall development and learning. A vulnerable and transitional period, adolescence brings with it several challenges. Being popular, having an identity, leadership, peer relationship, group culture etc happen to be important markers in their development. Peers happen to an integral part in adolescence. They have a huge influence on each other. This relationship and adjustment in LD children is also greatly affected due to their challenges in social skills.

Keywords: Social Skills, Adjustment, Learning Disabilities, Adolescents, Behaviour

SOCIAL ADJUSTMENT IN ADOLESCENTS WITH LEARNING DISABILITIES:

At the secondary level, the number of students diagnosed as LD is seen to be greater than middle school or primary school level and this is because of certain cognitive, social and biological changes during puberty (Margalit&Efrati, 2002, Margalit& Tur-Kaspa, 1998). Researches show that LD adolescents have difficulty in social adjustment, dealing with social situations and low self-efficacy, esteem and concept. They also exhibit mood-swings and depression symptoms following isolation and loneliness (Heath, 1996; Margalit, 1998, Pelletier, 2001; Petti, Volker, Shore, & Hayman-Abello, 2003, Shimshonik&Brenner, 2004). Under and over expectations lead to low self-image as per the findings of a study done by Clark (1997). All non-academic effects are beyond the scope of black and white. However, several of these are documented in some research studies. (Al-Yagon 2007; Bryan 1997; Margalit 2010). Numerous studies evidenced that LD adolescents lack in social competence and interpersonal issues. They often face peer rejection and find it difficult to adapt to certain situations. (Al-Yagon 2007; Bryan 1997; Margalit 2010). Information-processing difficulties, impulsivity, and performance deficits are seen in these children. (Bryan 1997). Such factors have been examined for their effect not only on these children’s academic skills, but also on their perceptions and interpretations of feelings and social situations, which, in turn, may impair their social, emotional, and behavioral skills (Margalit 2010). Their difficulties are seen as products frustration, academic failures, and high levels of stress. Intervention studies designed to improve the socioemotional and behavioral functioning of children with LD generally include individual/family psychotherapy or social skills training, spanning a wide range of intervention durations, settings, and techniques (AlYagon 2007; Margalit 2010). For example, social skills training programs may consist of cognitive behavior modification or metacognition training such as coaching, modeling, role-playing, feedback, and mnemonic strategies to train children in efficient interpersonal problem-solving skills. Recent studies also suggested the possible role of intervention programs focusing on these children’s close relationships with significant others such as parents and teachers (Al-Yagon 2007). Pearl, (1992) has put forth the problems faced by LD adolescents into three categories which are: 1. Poor interpersonal communication and behavioural problems. Interpersonal communication is the main component that develops social competence and empathy. Behaviour problems result due to conflicting patterns of communication. Interaction with peer groups requires selective attention, high levels of memory organization and cognition, social initiative, and active involvement in diverse interpersonal situations (Shores, 1998). LD students, in contrast to other students, exhibit a lower quality of interaction. They exhibit passive communication patterns and low initiative when it comes to suggesting interaction and co-operation with their peers, and a tendency to avoid social interaction out of fear of failure (Asher, 1988). 2) Inefficient social cognition. Social cognition refers to the knowledge and cognitive processes that an individual uses to interact and relate to others. It seems that the cognitive processes that affect academic skills also affect the LD students’ social ability (Tur-Kaspa& Bryan, 1994). 3) Emotional and motivational problems. Mood and affect difficulties are seen exhibited in LD adolescents. They also have difficulty empathizing with others and often misjudge the mood and emotions of others (Derr, 1986). LD adolescents experience high levels of loneliness, solitude, depression and behavioural difficulties. (Margalit&Efrati, 2002; Al-Yagon, 2007; Lackaye&Margalit, 2008).
CONCLUSION:
The literature documents LD adolescents’ difficulties in social skills, competence, and adjustment. This maladjustment stems out of their sub-average interpersonal skills and unhealthy coping strategies. Lack of problem solving skills, decision making, and empathy puts forth social challenges across them. They find it difficult to adjust to people and their stereotypical expectations. This social maladjustment makes them vulnerable to further psychological issues like depression, low esteem stemming out of rejection by peers, and other significant people in their environment. In addition to these issues, academic concerns aggravate and promote aggression in them leading to behavioural issues. Some studies opined that the cognitive processes that affect academic skills also affect the LD students’ social ability and adjustment. To combat this and help them deal with their overall adjustment, life skills training can be a useful asset. Making them self-aware, empowering them with healthy coping and problem solving, unlocking their empathy are few resilience promoting alternatives which are likely to bring desirable changes in adjustment.

A FOOTNOTE TO THE READERS: The presented paper is a research-based document unfolding the findings of researchers, exploring social adjustment in LD adolescents. This doesn’t claim to be the finest yet hope to be significant enough to provide literature information on the subject. There’s an avalanche of knowledge in the field yet to be explored, however, this paper is an attempt to give an insight into the non-academic area that affects LD adolescents’ holistic development with a great impetus. Let’s give them self-empowering tools equip them for a better adjustment and meaningful future, eventually make our youth force and nation stronger healthier.

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