

AUDITORY PROCESSING PROBLEM

Good listening is an essential skill for students. Indeed, the majority of what children learn in school is acquired through the auditory channel. Some students, however, have a problem in their ability to listen. They may have what is called an auditory processing problem—namely, difficulty in understanding spoken language in the absence of a hearing problem. Auditory processing may go by other names such as central auditory processing, auditory comprehension, auditory perception, and receptive language.

Auditory processing is different from hearing. In fact, a student who has difficulty processing auditory information typically hears normally. She hears the sounds accurately but her brain has difficulty making sense of what her ear is telling it. Just as a child with a reading disability typically has good visual acuity but a problem interpreting visual symbols, a child with an auditory processing problem usually has adequate hearing but difficulty interpreting auditory information.

A student with an auditory processing problem may struggle in school, especially if listening conditions are less than optimal. She may misunderstand what you say or confuse one word for another. You may give her directions, and she may stare at you blankly, having little idea of what she is supposed to do. Or she may respond immediately and confidently, only to do the wrong thing. Questions may elicit irrelevant responses. The problem is likely to be accentuated when the message is long, complicated, or spoken rapidly, or when there is a lot of background noise.

Children with auditory processing problems are typically of normal intelligence but they are prone to learning problems, especially in the areas of reading, spelling, and writing. A student who has difficulty telling speech sounds apart (for example, ba and da) is at risk for a reading disability. This is not surprising, since the ability to sound out words requires that a child be able to clearly hear the sounds that letters make. For some students, the sounds of the vowels and consonants may come at them too quickly for them to process accurately. A novel treatment approach that has shown promise in improving reading skills for students with this problem involves using computers to slow down and exaggerate different sounds, enabling them to discriminate sounds and decode words more accurately.

HANDWRITING PROBLEM

In this age of computers, handwriting is struggling to maintain its place in the educational landscape. Teachers today devote less attention to handwriting instruction, and students spend less time practicing penmanship than in the past. This shift in focus may not pose difficulties for students for whom handwriting comes naturally; for students with fine-motor difficulties, however, it can spell problems. The student who exhibits poor handwriting may become exasperated with written tasks. In addition, his handwriting deficiency may interfere with his written expression. As a result, what he puts down on paper may reflect only a small part of what he knows. For this student, and many others, the ability to write legibly and fluently is essential to school success, and formal handwriting instruction continues to be an important part of their education.

IDENTIFYING A HANDWRITING PROBLEM

Handwriting has various components: size of letters, shape, spacing, slant, and proportion. The student with poor handwriting may have difficulty in one or more of these areas, which may decrease legibility. In particular, he may exhibit some of the following characteristics:

- expends much effort writing
- produces papers that are messy and difficult to read
- a has a poor pencil grip
- uses too little or too much pencil pressure
- writes letters incorrectly (particularly a, e, r, and t)
- forms letters that are too small or too large
- slants cursive letters improperly
- uses upper- and/or lower-case letters incorrectly
- writes very quickly or very slowly
- allows too little space between words or letters

THE PERFECTIONIST STUDENT

Sarah is never quite satisfied with her work. In school, she will labor endlessly over a composition as she tries to produce the perfect paper. Her mother says it's the same at home; she will redo assignments countless times, and even then rarely feels that her final effort is good enough. To say that she is tough on herself is putting it mildly. Sarah considers anything less than perfection a failure. When she gets back a test, the first thing she does is look for mistakes. Even when she gets an A, she is upset if it is not the top grade in the class.

You probably have had students like Sarah. She is a perfectionist, a student who is not satisfied with merely doing well. Relentlessly self-critical, perfectionists set impossibly high standards for themselves and become frustrated when they fail to meet them. Usually bright and often gifted, perfectionist students are more motivated to avoid failure than to pursue success. Their wants and desires take second place to achieving the top spot in every activity. Extrinsic measures of success—grades, scores, records, awards, trophies—are of paramount concern to them. Even when they succeed, however, they find reason to be dissatisfied. The perfectionist athlete who wins the race may fret about not breaking a record. The perfectionist violinist who makes the regional orchestra may complain about not making first chair. The perfectionist student who wins the spelling bee may be upset because she got one word wrong.

The following are common characteristics of the perfectionist student:

- bases her self-worth on what she does rather than who she is
- exaggerates her failures and downplays her successes
- is easily discouraged and upset by minor failures
- a avoids taking risks and shies away from new experiences due to fear of failing
- is very influenced by the perceptions and expectations of others
- becomes anxious in evaluative situations such as tests and oral presentations

HOW TEACHERS CAN HELP

Diabetes is a serious disease with potentially significant physical complications. It can, however, be managed with close attention and monitoring, so teachers should not press the panic button if one of their students has diabetes. By following some basic guidelines, described below, school personnel should be able to handle almost any situation that arises in the classroom, and children who conscientiously follow their treatment program should be able to participate in virtually all school activities.

1. Find out the Relevant School Policies

Your school district may have policies for dealing with children with diabetes. For example, some schools require blood sugar testing to be done in the nurse's office, while others allow it to be done in the classroom. The school nurse should be familiar with these policies.

2. Develop a Written Plan with the Parents and School Nurse

Meet with the parents before or soon after school begins to spell out in writing how the school will manage the child with diabetes. The school nurse, and possibly the principal, should be in attendance. In addition, the child should be encouraged to attend and participate. Other school staff involved with the child should also attend or at least be informed of the plan. You and the school nurse will want to ask many questions of the parents about the specific nature of the child's disorder and helpful ways of responding. Figure 3-1 (next page) provides a list of questions to guide you in gathering information and developing a school plan. You, the nurse, and the parents should keep copies of the plan.

If the child qualifies for special services in school under Section 504 (see chapter on asthma for discussion of Section 504), this plan may meet the criteria for a 504 plan. A 504 plan must include a list of accommodations the school will make to deal with a child's disability. In the case of a child with diabetes, this may include the following provisions:

- ☛ Child will be allowed to eat snacks and lunch at specific times and given sufficient time to finish food.

Child will be allowed to test blood sugar level and administer insulin at a specific time and place, and will be given assistance, if necessary.