

25 / Learning Disabilities: Developmental Disorders

Edward Greenblatt and Rena Matison Greenblatt

Background

HISTORY OF THE DISORDER

The term *learning disabilities* was first used in the late 1950s and early 1960s to describe a discrepancy or difference between academic skill acquisition and intellectual capabilities as measured by standardized tests. That is, a learning-disabled child is of average or above-average intelligence but cannot perform adequately in school in one or more areas. This difficulty in performance results from unknown causes but usually is attributed to a possible central nervous system dysfunction.

Congenital word blindness and *strephosymbolia* (or twisted symbols) were the original terms used to describe one type of learning disability (Morgan, 1896; Orton, 1925, 1928). Today this disability would be referred to as a developmental dyslexia. In his seminal work, Orton attributed this disability to problems in cerebral dominance, implying that the difficulty was neurologically based.

The cluster of similar deficits found in brain-damaged patients and in the learning disabled provided further support for a neurological basis for learning disabilities. Strauss and Lehtinen (1947) used the term *minimal brain damage* to describe the subclinical damage in the learning impaired. Later Clements (1966) coined the term *minimal brain dysfunction (MBD) syndrome* to distinguish functional from structural deficits. The MBD syndrome includes children of near-average, average, or above-average intelligence with certain mild to severe learning or behavioral difficulties that are associated with central nervous system dysfunction. The impairment may affect perception, conceptualization, language, or memory, or it may impinge on control of attention, impulse, or motor function. However, unlike minimal brain damage syndrome (Strauss & Leh-

tinen, 1947), MBD does not include other major brain syndromes such as the epilepsies, mental retardation, deafness, blindness, or autism; it may however, include genetic determinants and early sensory deprivation as causative factors (Clements, 1966). Today, the term *MBD* usually is associated with behavioral disorders (i.e., attention-deficit hyperactivity disorder [ADHD] without learning disabilities) rather than with disorders of academic skill acquisition or learning disabilities. (Note that throughout the chapter, ADHD is used to include the former term *attention deficit disorder*.)

At first learning disabilities were defined as a retardation, disorder, or delayed development or lag in speech, language, reading, spelling, writing, or arithmetic resulting from a possible cerebral dysfunction and/or emotional or behavioral disturbance (Kirk, 1962). Later, when the term was defined in Public Law (PL 94-142), emotional or behavioral factors were excluded as causal factors. According to this definition: "the term includes such conditions as perceptual handicaps, brain injury, minimal brain damage, dyslexia, and developmental aphasia [but] does not include children who have learning problems which are primarily the result of visual, hearing, or motor handicaps, of mental retardation, or environmental, cultural or economic disadvantage" (U.S. Office of Education, 1977, p. 42478).

More recently, the National Joint Committee on Learning Disabilities (NJCLD), an organization comprising major professional and parent groups, has modified this definition to acknowledge co-occurring factors. The NJCLD sees "learning disabilities" as "a generic term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, or mathematical abilities." According to the NJCLD, learning disabilities are "presumed to be due to central