Creating Pathways of Learning Support for Employment Ontario Clients and Learners with Learning Disabilities

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Agenda

- Introduction

- Summary of Research Findings

- Ontario Voices: EO providers, learners and clients speak

- What can we do?

- Final Thoughts

- Questions

About the project

WHY?

- Strengthen the capacity of EO service providers to meet the needs of LBS and ES learners and clients with learning disabilities.

- Offer concrete ideas and strategies for practitioners to put into action , provide access, information, supportive resources and practices to make some of your work easier **– not to create any extra work!**

HOW?

- 9 month project which included:
  - literature review
  - intensive environmental scan,
  - 21 focus groups with stakeholders across Ontario (learners/clients and frontline practitioners)
  - 20 key-informant consultations with experts across Ontario.
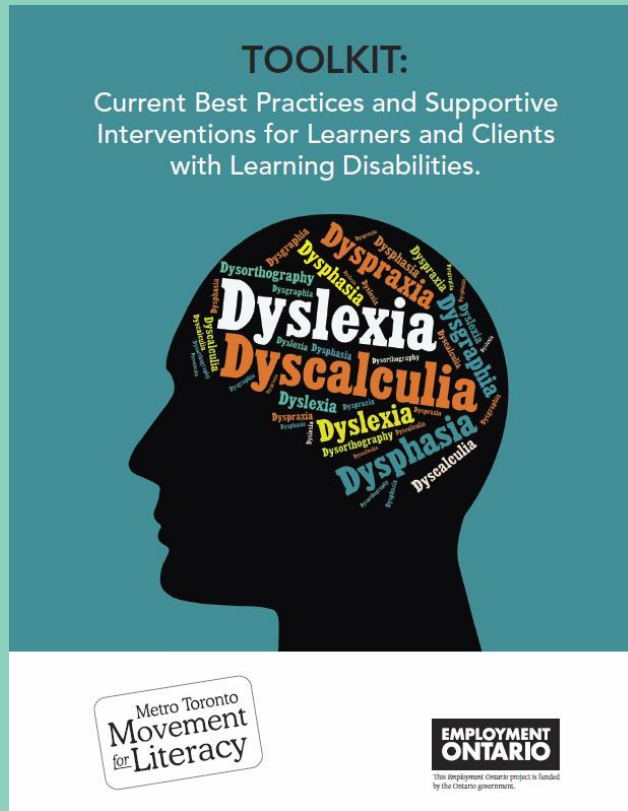
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Project Partners

- Employment Ontario

- Seneca College

- George Brown College

- Frontier College

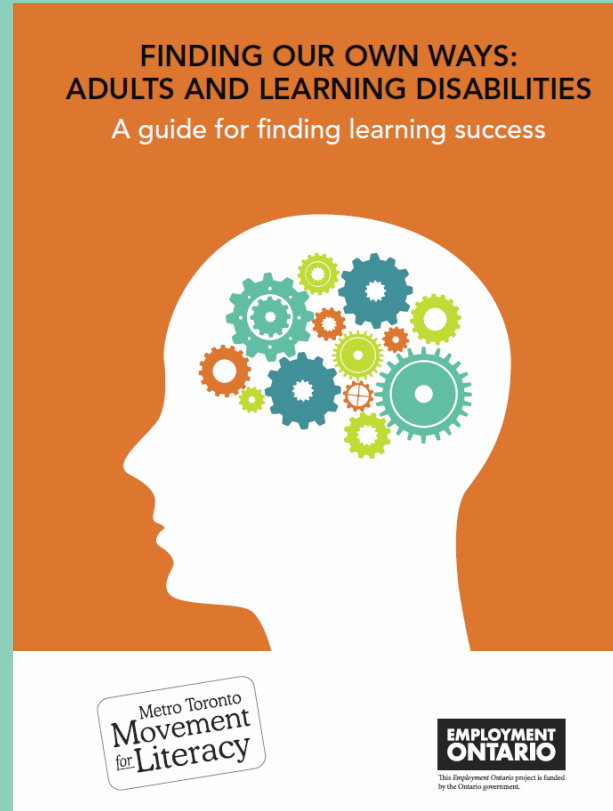- Learning Disabilities Association Toronto District

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Outcomes

- Practitioner's Toolkit
- Learner's Toolkit

- 2 Research briefs
- In-depth research report and environmental scan

Setting the stage

- People who struggle to learn make up **10% of our population** and are overrepresented in Employment Ontario programs.

- Those who struggle with learning disabilities (LD) encounter many barriers to participation in literacy and employment-related activities.

- Across the GTA and Ontario, there is a growing need for services for adult learners with LD.

- Evidence indicates their numbers are steadily increasing in EO programs.

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Adult Canadians with learning disabilities comprise:
30-70% of those incarcerated in correctional institutions
25-40% of those on income supports
15-30% of job training participants

More than a quarter of Canadians with learning disabilities aged 22-29 did not complete high school**, twice the number** of drop-outs in the general population

In 2006, the average annual income of Canadians with a learning disability was **$20,215**, compared to an average of $26,640 for all disability types

From *Difficult or Disability? It's Worth A Closer Look (LiNDR, 2012)*

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Your voice – interactive poll #1

- In your experience, of the individuals you serve how many would you estimate have a learning disability? (diagnosed or not diagnosed)

- 0-10%

- 11-20%

- 21-35%

- 36-50%

- 50% or more

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What do we mean by "learning disabilities?"

**LEARNING DISABILITIES HAVE NOTHING TO DO WITH INTELLIGENCE**

"Learning Disabilities" refers to a variety of disorders that affect the acquisition, retention, understanding, organisation or use of verbal and/or non-verbal information. These disorders result from impairments in one or more psychological processes related to learning (a), in combination with otherwise average abilities essential for thinking and reasoning. Learning disabilities are specific, not global impairments and as such are distinct from intellectual disabilities.

Learning disabilities range in severity and interfere with the acquisition and use of one or more of the following skills:
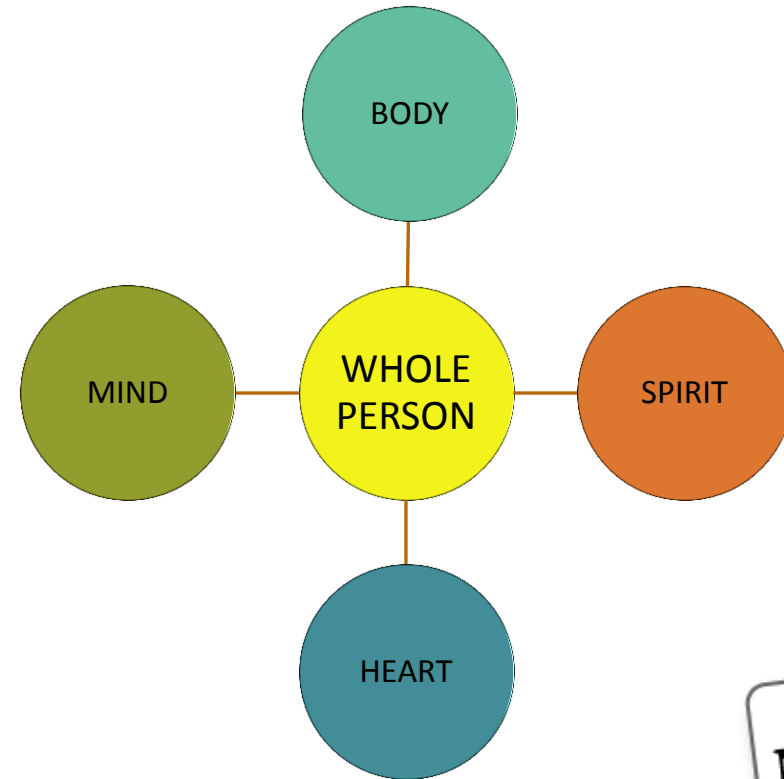
◦ oral language (e.g., listening, speaking, understanding)
◦ reading (e.g., decoding, comprehension)
◦ written language (e.g., spelling, written expression)
◦ mathematics (e.g., computation, problem solving)

Learning disabilities may also cause difficulties with organisational skills, social perception and social interaction
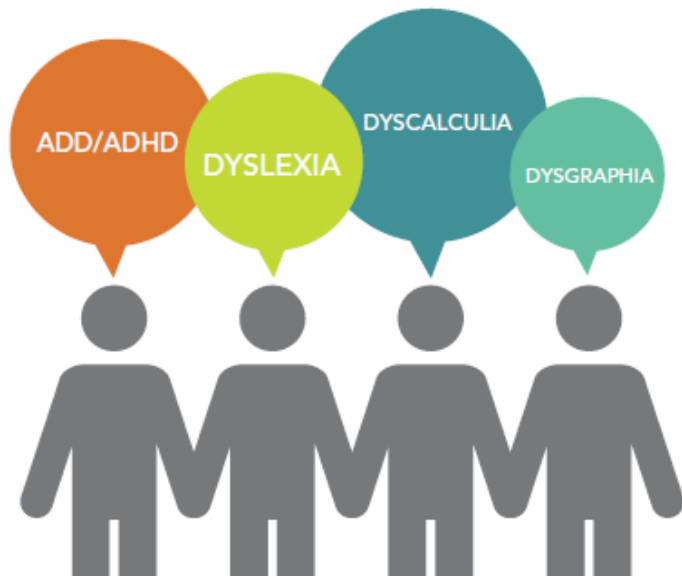
Labels
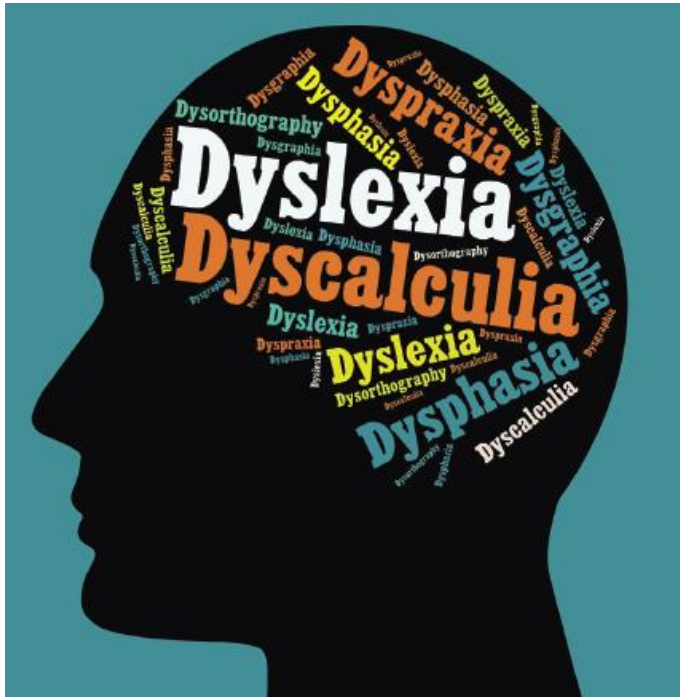
vs.

Labels don't adequately capture the truth of a whole person, and can be damaging.

Labels

- If used by individuals to self-identify, labels can be very useful.

- Labels can ensure access to supports, services, group memberships, medications and accommodations.

Characteristics and examples of learning disabilities

Surprising discrepancies in actual performance
- Speaks very well, but can't write down what they have said.

Performance can vary from day to day, and at certain times of the day
- Has learned how to use an app well, but *sometimes* forgets how to run it.

Inability to concentrate for long periods
- Easily distracted by noise, and unable to reconnect to the task they had been doing.

Problems with estimating time or distance
- Not able to plan a multi-stepped project because they have no sense of how long each step will take.

Uneven memory
- Cannot remember an instruction from earlier in the class, but can recite verbatim lines from a film they saw years ago.

Difficulty with abstract ideas and relationships
- Seems to behave "inappropriately" if they have difficulty picking up on social cues or interpreting the intent of a message.

Difficulty remembering order
- Leaves out important details in an assigned task because they received too many instructions at once.

Difficulty understanding cause and effect
- May not realize that they are likely to be penalized for being late all the time.

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Your voice – interactive poll #2

- How many individuals that you serve in your work have a **formal diagnosis** for a learning disability?

- none

- 0-5%

- 6-10%

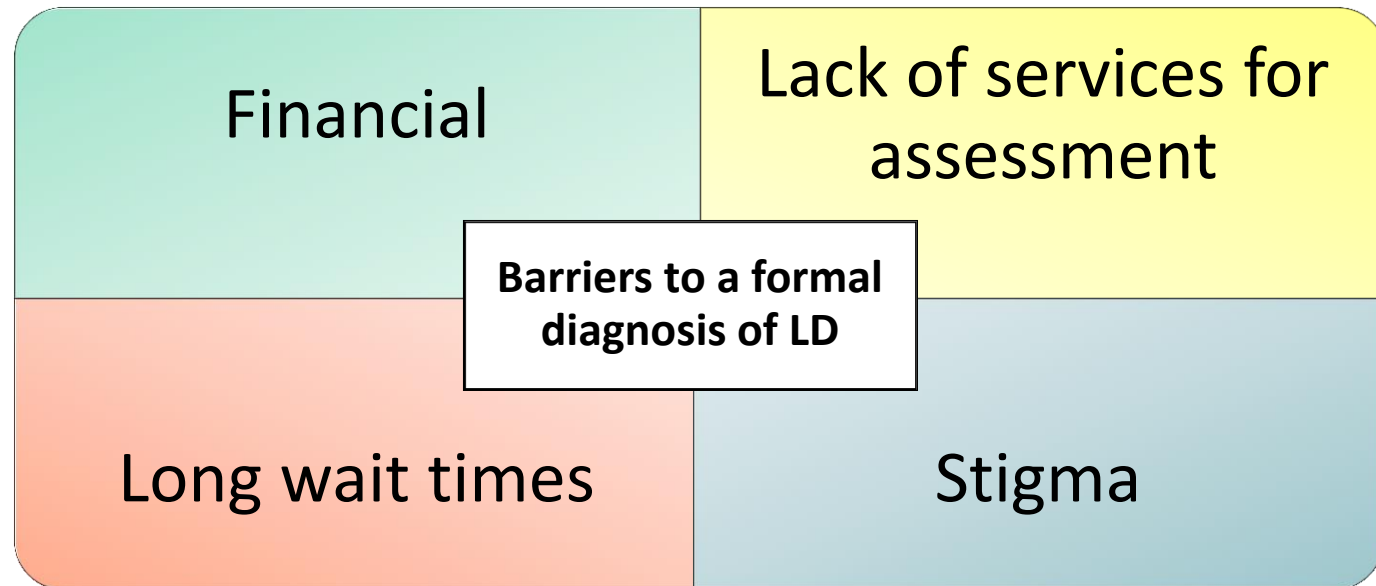- 11-15%

- 16-20%

- 20% or more

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Screening, assessment and formal diagnosis

- Formal diagnosis (a "psychoeducational assessment") must be done by a psychologist with training in learning disabilities.

- A high quality assessment is very involved and includes;
    - Testing of short-term memory, reasoning, inference etc.
    - Testing of literacy skills, such as reading comprehension.
    - Comparing results of the two to discover how the former helps explain the findings of the latter.
    - Analyzing results to determine cognitive strengths and weaknesses.

- Other related testing may be done by a pediatrician, psychiatrist or a neurologist.

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Barriers to a formal diagnosis

Financial	Lack of services for assessment
Long wait times	Stigma

Barriers to a formal diagnosis of LD

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Starting a conversation

- If you think you could more effectively teach, serve or accommodate someone by better understanding the nature of their learning challenges, you may want to open a respectful conversation with them about assessment.

- Accessible, accurate and robust assessment for LD is often a turning point in an adult's life.

- For some it is the first notion they are not "stupid" or "bad" or "wrong".

- The boost to self-esteem and the benefits of accommodations from having formal documentation cannot be over-stated.

- Helping people arrange assessments for LD is truly **the work of advocacy**

The duty to accommodate = the starting point

- The Accessibility for Ontarians with Disabilities Act (AODA) is a piece of legislation that obligates organizations to ensure that their practices are accessible.

- Under the Ontario Human Rights Code, which explicitly names learning disabilities, the principles that guide accommodation include:
  - Inclusive design
  - Full integration
  - Individualization
  - Respect for the dignity of the individual

Summary of Research Findings

- Culture and belief

- Concurrent concerns

- Interventions and supports
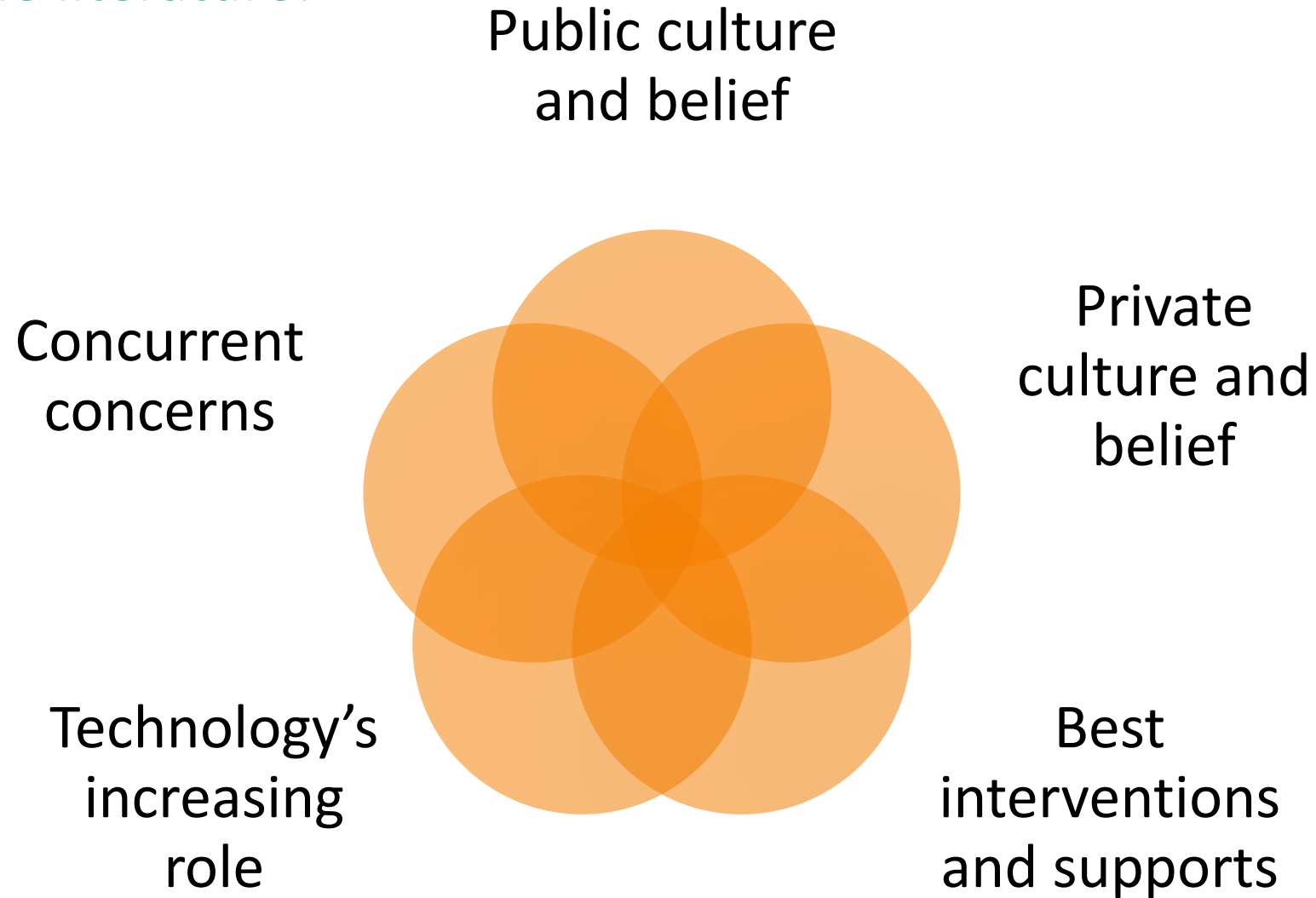
- Technology's growing role

Research Questions

- What practices are best serving adults with LD throughout Ontario, and in all LBS program streams (Anglophone, Deaf, Francophone, and Native Learners)? What approaches, environments and interventions are most supportive? What opportunities are there to share resources or coordinate efforts?

- Where are the gaps? What is the nature of the challenges really facing adults with LD seeking education, training and employment, and what needs to be in place to address them?

Themes in the literature:

Public culture
and belief

Concurrent
concerns

Private
culture and
belief

Technology's
increasing
role

Best
interventions
and supports

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Culture and belief

- Social stigma
  - Because LD are often invisible, they are often seen as "fake".
  - Linked to historical, incorrect associations with stupidity and slowness, laziness, or not trying hard enough.
  - Certain communities/cultures pose severe judgement based on intellectual/academic ability.

- Self-esteem
  - Robust self-esteem is required for a sense of self-efficacy.
  - Self-esteem is required to engage in practices of continuous learning.
  - Healthy self-esteem, especially in a competitive culture with limited resources to meet the needs of vulnerable individuals can be a challenge.

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Concurrent concerns

- Living with mental health issues

- Being racialized and/or poor

- Experience with violence and trauma

- People who are deaf

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Concurrent mental health issues:

- How concurrent mental health issues dovetail with LD is profoundly complicated, and it may be almost impossible to tell them apart, or definitively separate causes from effects.

- The compromised sense of personal agency of people who have undiagnosed/unsupported LD often leads to poor mental health, which in turn can compromise sleep and nutrition patterns, and exacerbate the risk of poverty. A structural analysis of the issue suggests that solutions are every bit as interlocked and complex as the problems.

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Being racialized and/or poor

- EO providers serve a deeply diverse community.

- Some cultural norms attach severe shame and stigma to difficulties with academic performance which prevent people from seeking accommodations.

- Racialized people are more likely to be un- or under-employed or living in poverty, earning just 81.4 cents for every dollar paid to Caucasian counterparts.

- Conversations around how diversity issues impact adults with LD cannot end here, however; critical analysis of how larger structures oppress certain groups must be kept in sight, always from a social justice perspective.

"Constant judgment about the way I look or dress or my background.   The cost of childcare, the rising cost of metropasses… I work but why do I have to choose between work and education? Food is too expensive."

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Experience with violence and trauma

- Violence impacts learning in profound and complex ways. This is because people who have experienced violence, trauma and neglect in their lives often develop brilliant strategies – internal and outward behaviours – in order to survive the unbearable.

- Students who act out or act helpless, who struggle with being physically or mentally present in classrooms, may be enacting, or unintentionally repeating, these survival/coping strategies. The problem is that these tactics are no longer serving the individual; they are getting in the way of learning.

People who are deaf

- Issues of LD are complex and understudied in deaf culture

- Linguistic and memory problems can be overlooked as factor's contributing to a person's learning difficulties because they may be misattributed to communication challenges common to Deaf people.

- Providers qualified to do the necessary assessments are rare.

- The most recent recommendations publically available are found in *A Guide to the Diagnosis of Learning Disabilities in Deaf and Hard-of-Hearing Children and Adults,* published in 1994 in the journal, American Annals of the Deaf.
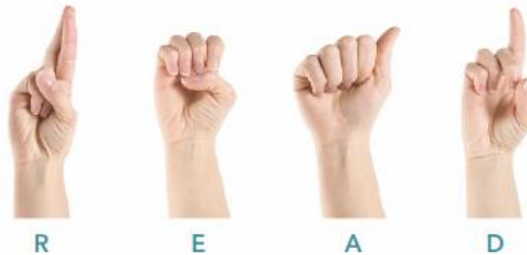
Interventions and supports

INTENSIVE INSTRUCTION

INDIVIDUALIZED DELIVERY

AUTHENTIC CONTEXTS

SELF-DIRECTED

TRUST

FUNCTIONAL

ADAPT

DIGNITY

MULTI-SENSORY

COLLABORATIVE

MENTORSHIP

FEEDBACK

RELATIONSHIPS

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Your voice – interactive poll #3

- How familiar are you with the various technologies used to support LD learners?
  - Very familiar
  - Somewhat familiar
  - Not at all familiar

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Technology's growing role

- Adaptive and assistive technologies are becoming more and more widely available, affordable, and understood.

- These include; E-readers, text magnifiers, screen readers and voice-to-text programs.

- Financial resources are required, but practitioner training and 'buy in' from learners must also be in place to ensure success.

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Types of assistive technology

- **Screen Reading Software**
  - Reads text on a computer screen

- **Speech/Voice Recognition Software**
  - Converts spoken word to text on a page or into computer commands

- **Word Prediction Software**
  - Presents possible words a user is looking for while typing text

- **Optical Character Recognition (OCR)**
  - Converts paper-based text into electronic text for use with screen readers.

- **Visual Organizers**
  - Presents ideas, concepts and information in the form of charts, tables, graphs, diagrams etc.

- **Electronic Organizers**
  - Hardware or software used for time management and resource organization
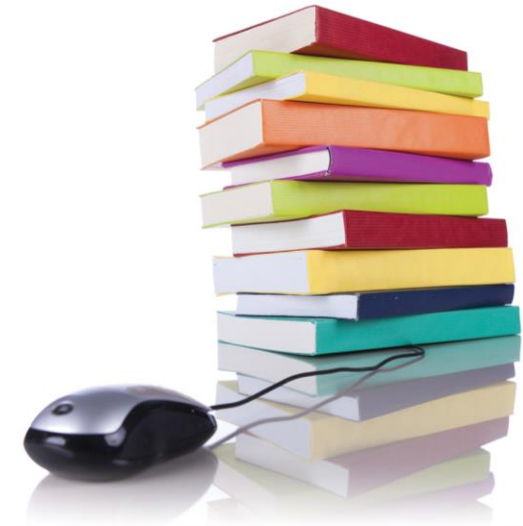
Ontario Voices

- Employment Ontario providers experiences with clients and learners

- Learner and client voices

- Deaf clients and learners

- Aboriginal clients and learners

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What EO providers are saying about their experiences with clients and learners

▪Interviews with key informants revealed a framework in which to consider EO structures and practices, in terms of best practices and gaps/unmet needs.

▪Four themes emerged from these conversations:

Learner and client voices

" To me it is about a lack of consistency between programs. Everyone is doing their own thing. I like a team approach where I can access all sorts of programs and not just EO. Allowing incentives like food, coffee and bus fare are helpful. We are all individuals and we need to be listened to. If you walk in and say you want an education and they tell you 'you don't fit my mandate' – well come on! And to get services, you have to tell them you have a disability. [It takes] a lot of courage. I shouldn't have to do that."

" There's a lot of stigma when you tell people you have a learning disability. I've experienced here that they talk to you like a little girl. You don't need to talk down to me; we're not stupid. In fact, we may be more intelligent because we've had to learn to deal with problems..."

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Deaf clients and learners

- Deaf individuals who may have an LD navigate a world and learning context which is often in hospitable.

- It can be near-impossible to get an assessment – and results are meaningless without expert interpretation.

" *When I'm reading, I'll look at a dictionary but I won't understand what's in the dictionary unless there's a picture attached to it. Attaching a visual to a written word helps, but I don't always understand the written word. I use a visual dictionary.*"

Aboriginal clients and learners

" I didn't notice until I was older and the teachers didn't notice and my family didn't notice. I dissociated because I came from an abusive home. I would fantasize and deliberately take myself out of the bad situation and put myself in the good situation. I missed a lot of school because of my abusive home. Teachers thought I was stupid and I thought I was stupid because I missed a lot of school and didn't know the material. I was called into the principal's office and was threatened with the strap because they thought I was intentionally not coming to school. I quit school at age 15…"

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What can we do?

- Assessments: access

- Accommodation: what it might look like

- Instruction: best approaches

- Universal design for learning

- Assistive technology

- Other online resources

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Universal design for learning

- The seven fundamental principles of **Universal Design for Learning**:
  - Be accessible and fair.
  - Provide flexibility in use, participation and presentation.
  - Be straightforward and consistent.
  - Ensure information is explicitly presented and readily perceived.
  - Provide a supportive learning environment.
  - Minimize unnecessary physical effort or requirements.
  - Ensure the learning space fits students' needs and instructional materials.

From George Brown College's Accessibility Awareness Training for Educators

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Final Thoughts

The outcome of improved supports for clients with learning disabilities will result in the start of:

- Enhanced self-confidence
- Lower frustration levels
- Greater success in reaching goals and navigating the system
- Lower numbers of individuals dropping out and re-joining programs periodically
- Better support and seamless integration of services for these clients.

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FINAL QUESTIONS?

Thanks to our project partners:

Heather Lash and Karen Gilmour, research team – George Brown College