Are You OK? Simple Interventions for Classroom Learning Difficulties

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Abstract

Globally, one in five students have diagnosed learning difficulties, with self and undiagnosed conditions pushing statistics higher. Ideally, all students would be screened for such disorders in early primary school and commence treatment and supportive education as soon as possible. The sad truth is however, that many students, especially those with milder conditions will never be screened and will experience difficulties in all aspects of their life because of this systemic failure. Students who manage to enter tertiary education will often have done so by optimizing familial and high school support systems, and by using masking and coping strategies that falter under the increased load that university places on their cognitive and executive functions. Due to the fact that learning and developmental disorders directly affect language development and information processing, foreign language teachers are often the best placed to identify these conditions and stop these student's failure cycle. Despite popular misconceptions that expertise in learning disorders is necessary to diagnose one, all that is really necessary is to be observant, compassionate and be prepared to give 10 minutes of your day to a struggling student. This paper will attempt to outline the basic characteristics of the major learning disorders, offer some practical strategies to identify them in students and maximize the learning experiences and life outcomes of these individuals.

Keywords: *Learning difficulties, Autism, ADHD, Dyslexia, Identification*

Introduction

For many educators the term learning disorders, conjures up images of students with severe impairments working in separate classes with specialist teachers on specialized individual programs. The thought of encountering a student with one of these difficulties in their class raises feelings of professional insecurity and a drastically increased workload. A prevailing attitude is that you need to be a highly trained specialist in order to approach a student who is possibly struggling with one of these disorders. In my experience however, these fears are unfounded. The difference between making a profound difference on a student's life and leaving

them alone to repeat cycles of failure is extremely simple. Just as a track coach would not ignore a limping athlete, nor a swim coach a swimmer nursing a sore shoulder, it stands to reason that educators whose mission is to help individuals learn, would gently pull a struggling student to one side and ask, “Are you OK?” In the 15 or so years I’ve been working with students of all ages and professions with learning and developmental disorders, I’ve realized that this simple question is all it takes to kickstart the student in question’s self-awareness and help them choose their own path away from a widening failure cycle. It is also an action that is well within the skill set and professional obligations of all education professionals.

I’m Not a Specialist

Colleagues’ reactions to the topic of learning difficulties tend to fall into one of two categories. Either they are concerned about their students and keen to do more, or hesitant and offer comments like: “I don’t know what to look for,” “I’m not a specialist,” “it’s not my business,” or “what if I’m wrong?” These are not unreasonable anxieties and seem to be universal. According to the US Department of Education (Burr et al., 2015) the predominant factors that contribute to educator challenges in identifying and supporting students learning and developmental difficulties are:

> **Lack of Understanding:** Teachers may lack sufficient knowledge about the reasons English learner (EL) students are not making adequate progress, including the distinction between learning disabilities and second-language acquisition challenges.
> **Inadequate Training:** Many educators are not adequately trained in evaluating the intersection between second-language acquisition and learning disabilities.
> **Cultural and Linguistic Barriers:** Teachers may struggle to differentiate between behaviors caused by cultural or linguistic differences and those indicative of learning disabilities.
> **Poorly Designed Referral Processes:** Ineffective or unclear referral processes can discourage teachers from initiating evaluations for suspected learning disabilities.
> **Fear of Misidentification:** Teachers may worry about misidentifying students, leading to inappropriate placements or interventions.
> **Limited Resources:** A lack of awareness of or access to appropriate tools, assessments, and support systems may make teachers hesitant to address potential learning disabilities.

Most of these fears have been reflected in conversations with colleagues over the years. Notably, much of their reluctance seems to be due to the fear of misidentifying a student and therefore somehow violating their human rights. Especially, as pointed out by a Japanese colleague, in a society where the general knowledge of learning and developmental disorders is low, and despite slowly changing attitudes, disabilities of any kind are considered shameful

(Mogul, 2016, October 13).

The reality is though, that a student is unlikely to claim harassment if a teacher expresses concern about their classroom performance and in them as human beings. All of the students I've approached were aware on some level that the difficulties they were experiencing were different to those of their classmates and were relieved to be able to both name the problem as one shared by a large percentage of the global population, and not an intellectual or personality defect.

A final, often heard concern is that of being locked into preparing time consuming specialist curriculums once a student has been identified with a learning difficulty and not having the specialist knowledge, time or energy to do so. However, very often the biggest impact on a struggling student's performance and life is made by an initial show of concern and a few empathetic questions, followed by a few practical classroom tweaks.

Learning Difficulties-What Are They?

Learning difficulties is an umbrella term for a wide variety of life-long, genetic conditions that occur on a spectrum, unique to every individual. Specifically, they affect:

Getting information into the brain (input)
Making sense of this information (organization)
Storing and retrieving information (memory)
Getting information back out (output)
Processing speed (speed of taking in, using or producing information)
Working memory (holding information in mind while also using the information)
Executive functions (planning and organizing)
(Integra, 2009)

Essentially, these conditions interfere with the uptake and processing of information between the brain and senses and are directly connected to difficulties with language development and use and the ability to speak, read and write (Learning Disabilities Association of America, 2018).

Obviously, any condition that impacts these fundamental processes and skills will have a have a profound impact on all aspects of affected individual's lives, education, socialization, life and career choices. Adult students who have received affirmative diagnoses late in life have often expressed deep regret at missed life and career opportunities. Students in my university classes with clinical or self-diagnosis have outlined years of self-doubt, shame and masking strategies, and expressed great relief at being able to even approximately identify their problems.

Global Prevalence

Globally, learning and developmental disorders affect 20% of the population. 6–7% are classified as having a learning disability, in reading and language processing, 13–15% of the population are estimated to show signs of dyslexia (Learning Disabilities Association of America, 2018). Self-diagnosed or undiagnosed individuals are typically not counted in official statistics indicating that true prevalence may be higher than officially reported. Advocacy and neurodiversity groups maintain that autism and ADHD are underdiagnosed in women, minorities, or low-income countries, especially since diagnostic models are traditionally based on male characteristics (Understood.org, 2024).

Personal experience indicates that this is the case. Most of the students with learning difficulties I've encountered in my classrooms have been initially undiagnosed, with the majority being female. Although this may possibly be due a reluctance of male students to admit to, or talk about perceived disabilities or weaknesses, as opposed to statistical gender bias.

In Japanese Universities

Officially, the Japan Student Services organization (JASSO) lists the total number of students with disabilities (all types) in universities and short-term colleges as 55,510 students as of May 1, 2024. Of these developmental disorders account for 11,923 students, and only include students holding a disability certificate or having a diagnosis or evidence of disability in a health check (Japan Student Services Organization [JASSO], 2025).

By institution type (national, public, private), private universities have the most students with disabilities nationally at 35,784 students, followed by national universities at 10,947 and public universities at 2,941 (ReseEd 編集部 [ReseEd Editorial Department], 2023).

In terms of support, national universities not only have a higher proportion of students receiving support, but also higher support rates compared to private institutions. It should be pointed out though, that while national institutions offer mandatory legal accommodations, private ones are only bound by a duty of effort, not strict legal obligation (fukushi.tv, n.d.).

Essentially, private universities account for the majority of students with disabilities in higher education (72% of total in 2022) with the lowest support rates (fukushi.tv, n.d.). Again, these numbers do not include self, or undiagnosed individuals. This means that while statistically, educators working in private Japanese universities are over three times more likely to encounter a student with learning difficulties than one in a national university, and over 12 times more likely to than an educator in a public university, the real figures are likely to be much higher.

Most Commonly Encountered Learning Difficulties

Experientially, dyslexia, autism and ADHD are the most statistically prevalent and the most visibly identifiable learning difficulties educators will encounter in university classes. The main traits of each difficulty and the classroom difficulties students with them have are

summarized below:

Dyslexia

Most common learning disability affects about 80% of individuals identified with LDs (International Dyslexia Association, n.d.).

Worldwide, up to 15% of the population shows signs of dyslexia (International Dyslexia Association, n.d.).

Most visible features: difficulties with reading, spelling, and writing.

Caused by phonological processing problems (International Dyslexia Association, n.d.).

Classroom Difficulties

Remembering verbal instructions

Retrieving stored information from memory

Sequencing and organizing information

Recognizing/discriminating sounds

Applying structures/vocabulary accurately

Accurate spelling

Coherent writing

Comprehension/content retention

Discrepancy between oral and written work (International Dyslexia Association, n.d.)

Autism Spectrum Condition (ASC)

Wide-ranging condition, from severe to mild/high-functioning autism (American Psychiatric Association [APA], 2013).

Prevalence: 1 in 36 individuals in the U.S. (Centers for Disease Control and Prevention [CDC], 2025); higher prevalence among males.

More individuals are being identified with mild/high-functioning autism (CDC, 2025).

Key Elements of an Autistic Profile

Difficulties in social interaction and communication:

Maintaining appropriate eye contact

Making appropriate contributions to conversations

Understanding underlying meaning of others' contributions (APA, 2013)

Limited or repetitive patterns of behavior or interests:

Fixed behaviors/routines

Difficulties coping with change/flexible thinking

Fixed interests (e.g., trains, timetables, anime)

Heightened sensitivity to light, sound, or other sensations (APA, 2013)

Anxiety (APA, 2013).

Classroom Difficulties

Understanding non-literal or idiomatic language

Recognizing conversational turn-taking cues

Coping with inconsistencies in language rules or words with multiple meanings

Role-playing from unfamiliar perspectives

Language classes may provide rare opportunities for authentic communication (APA, 2013; CDC, 2025).

ADHD

Neurodevelopmental condition characterized by difficulties with attention, impulse control, energy regulation, and working memory (APA, 2013).

Associated with emotional regulation difficulties, anxiety, and mental fatigue (APA, 2013).

Three types: predominantly inattentive, predominantly hyperactive-impulsive, and combined (APA, 2013).

Classroom Difficulties

Loss of concentration when reading/listening for extended periods without visual/practical support

Difficulty with social interactions and conversational turn-taking

Challenges following instructions and classroom activities

Poor time management (“time blindness”)

Excessive energy disrupting focus

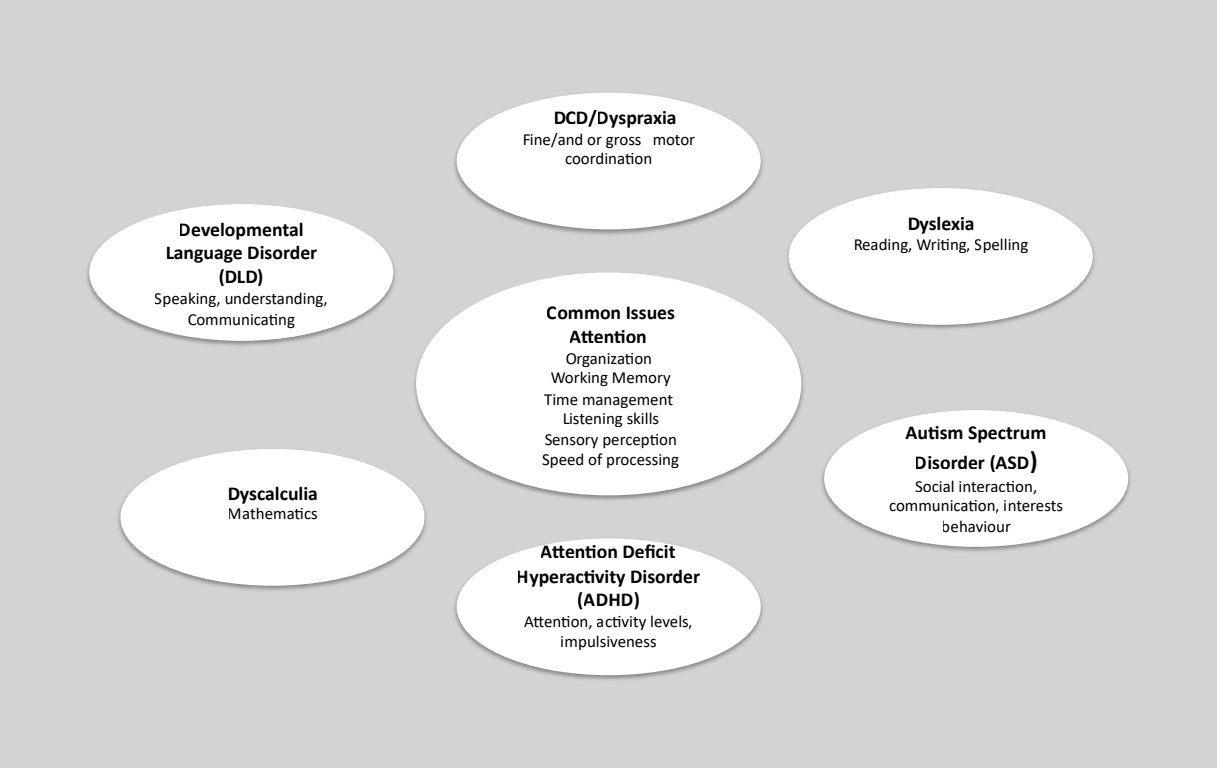
Weak working memory (APA, 2013).

What to Look for

Although primarily language and information processing disorders, very often it is problems with executive functions that will be the most visible. While each difficulty has its own unique symptoms, there is a high degree of overlap and concurrence as indicated below.

Figure 1

Common Issues Associated with Specific Learning Differences



Note. Adapted from A guide to specific learning differences (2nd ed.) p. 1. British Dyslexia Association, 2018.

Essentially, it is these common set of issues that are the best initial indicators as to whether a student is having difficulties or not, and these are usually the ones that the class teacher will likely notice a deficit in first. Often putting such deficits down to a lack of application or motivation. In my experience, persistent problems with self-organization and management are some of the best indicators that a student is struggling with a learning difficulty, especially dyslexia and ADHD. Colleagues will often interpret the lack of these skills as resistance or a lack of respect, while the students themselves will usually attribute them to personal defects such as laziness or a lack of discipline. Personally I regard resistance to a task, myself or to class in general as an indicator that a student is struggling in some form.

Noticeable level differences in student's skill sets are also good indicators of struggling students. In general, I have found that most students with either ADHD or dyslexia are quite fluent English speakers yet struggle visibly with one or two of the other core skills. As indicated in the diagram above, all disorders affect working memory and therefore the amount of information a student can process at a given time (British Dyslexia Association, 2018). Students with ADHD have told me that while they can focus for hours on tasks that are interesting to them, they struggle to follow conversations in a group and process information or instructions given orally. Dyslexic students obviously struggle to process written information but also have problems processing oral information and translating their thought into writing. All of the

dyslexic students I have uncovered so far follow a similar pattern. They are predominantly female, fluent English conversationalists with good people skills. When I ask them where they learned their English, meaning overseas or conversation school, they invariably answer "YouTube." When I respond "that's great, lots of natural input, do you read? If you read regularly as well, you will improve faster." They then inevitably respond that they have problems reading in Japanese and English and prefer to learn by aural methods or by visual methods that involve little reading.

Confronted with the possibility of having a learning disorder, the presence of either ADHD or dyslexia seems to be more readily acceptable to students than autism, although I have yet to have that conversation with a student. With the exception of one, all of the autistic students I have encountered in my classes have had some level of communicative and social impairments and have not self-identified, making it difficult to approach them regarding the subject. In this case, my approach after checking with the Support Centre as to whether or not they have self-identified, is to work around their difficulties and provide as much practical in class support as I can.

With ADHD and dyslexia though, once the conversation starts students tend to readily admit that they have problems and are open to a tentative diagnosis. When a possible diagnosis for the student's difficulties is reached between us, there is an initial surge of relief that they are not lacking in intelligence, and that there is a name for the problems that they have been facing all their lives. One 19-year-old student told me "Jason, for the first time in years I went home and slept like a dead woman." However, this relief is often followed by reluctance to take the next step and get a formal diagnosis, remedial treatment or training. As one student explained, going for a diagnosis and getting a negative result would mean that they were "just stupid after all." Other fears revolve around what a positive diagnosis made public would do to their future employment prospects and their position in society, rather than seeing such a diagnosis as legal protection and a path forward for an alternative future.

At this point, I stress to the students that get diagnosed or suspect themselves of having a learning difficulty, that their difficulties don't stop there. They still have to graduate and get a job, and their present problems will continue throughout their university career and into the workplace, affecting their choice of career and career path. Working with company managers and CEO's I often hear stories of problem employees who are not performing to expectations, and how these managers and CEO's struggle to coach them. Digging into the story, it becomes obvious that the employees display one or several of the common core traits of learning difficulties and that simple pep talks or reprimands from their superiors will not improve their performance. From the company's perspective the employee with problems is a consumer of company time and resources who will ultimately be shunted aside, demoted, forced to quit or fired. From the employee's point of view, the workplace is a constant source of pressure and disappointment. Whenever I teach adult classes and mention learning difficulties and the different types, many people come forward saying that they feel that they have symptoms,

especially of dyslexia and ADHD that it is revelatory for them, putting a name and perspective to their daily difficulties and also explaining many of their life choices. Managers especially those in Human Resources have also come forward saying that they realize that their present company regulations and training systems are inadequate for dealing with neurodivergent employees.

Why Me?

As previously stated, learning difficulties are language and information processing disorders, that impact language development and use, and specifically the ability to speak, read and write. Foreign language classes are ostensibly the only subjects that reteach these skills post primary. Recent trends in Applied Linguistics/ESL focus on communicative methodologies coupled with interactive, learner centered environments. This usually translates into smaller, communicative high input/high output classes which directly stress and highlight student's difficulties. Students find that existing masking or learning strategies cannot cope with the extra linguistic and cognitive loads, making learning difficulties easier to detect. This means that whether they realize it or not, language teachers are often the first to identify underlying neurodiversity in their learners (Oxford University Press, n.d.).

In addition, for many students, existing coping mechanisms were effective in primary and high school due to the tightly controlled curricular and extra-curricular schedules that were heavily assisted by their parents. However, the shift to university often exacerbates their learning difficulties due to a sudden increase in complex reading content and output loads, and expected autonomy in self-management, often including part-time jobs and living alone. All of these new demands overload the core difficulties common to all learning/developmental differences (Howard-Gosse et al., 2024; MacCullagh et al., 2017; Olofsson et al., 2012).

It is also worth noting that conditions such as ADHD and autism are not just about problems with learning. Marriages where at least one of the partners has ADHD are more likely to end in divorce than marriages where partners do not (University at Buffalo, 2008; Low, 2023) and marriages with autism are also more likely to have problems than those where autism is not (Rudy, 2023; Lazarony, n.d.). All LDs/Developmental conditions are highly genetic (Davis et al., 2009) and likely to be passed on to children. By helping students to identify their problems, seek help and learn more about their conditions, we are helping them to identify possible future problems and prepare for them and build healthier, more successful futures.

What to Do

Prescriptive lists can be intimidating and in reality, are not necessarily practical. It is usually around mid-to-late semester when we begin to suspect that a student is showing signs of having learning difficulties. This is when we start to recognize the individual characteristics of the students in the class, the first one or two assignments are due, and students with time management problems have reached their maximum allowed absences. Effectively this means

that there will only be four to five weeks left in the semester, and no time to make meaningful adjustments to the curriculum to assist any struggling learners. In which case, when such a learner is encountered, it is far more effective to:

- Pull them aside and ask “Are you OK?”
- Help them to identify the problem.
- Encourage them to widen their support networks/ contact the student support center/ get professional help.
- Help/encourage them to find learning strategies that suit them in the long term.
- Adopt a universal design mentality/assume learner differences from the start.

It only takes about five minutes to pick an opportune moment and quietly ask the student if they are okay. Something along the lines of; “Are you OK? I noticed that whenever we’re doing x, you’re doing Y.” Or, “you seem to struggle to get to class on time and hand in your assignments by the deadline. Is there something going on at home? Is it me? How are you doing in your other subjects? Do you have the same problems there, or is it just this class? Would you like to talk about it?”

I’ve never once had a student who has reacted negatively to this kind of concern. Even if they do not have any learning difficulties per se, you have acknowledged their presence in the class, shown genuine concern about their progress and performance, offered assistance and gently called them out. In almost 100% of cases, after this initial chat, there is increased self-awareness and an increase in performance, even in students with chronic ADHD self-management issues. Arguably, it is this increased self-awareness that is the most beneficial outcome of these conversations. Although educators are duty bound to do whatever they can to help these students learn inside their classrooms, these are intensely personal life-long conditions that the individuals themselves have to learn to manage and live with. By helping them to reflect on the nature of their problems, pointing out that 20% or more of the global population are experiencing the same difficulties, encouraging them to actively seek ways to manage their problems and seek professional help if necessary, we are encouraging them to seek lifelong solutions, rather than one semester fixes or tweaks to the in-class curriculum. In reality, this is probably the best we can do and the most impactful action we can take in the 14 or so weeks we are with these students.

Teaching Tips

In terms of teaching practice, recommended best practices in foreign language teaching often correspond to those in special education for providing student support. Practical, simple techniques such as those below can make a big difference and are within the skill set of every teacher.

- Give learners instructions in both oral and written form.
- Segment and sequence instructions clearly.
- Give learners adequate time to comprehend and respond to instructions.
- Present information in a variety of formats-audio/visual/text.
- Giving learners choice in formats as to how they demonstrate their learning.

Conclusion

Despite best intentions, the reality of a once-a week, fourteen-week semester is that by the time a student has been identified as possibly having a learning difficulty; counselled, been to the support center and reported back, there will be little time left in the semester to make meaningful adjustments to the curriculum. In which case it is far more meaningful to assume the presence of such students from the very beginning of the semester, incorporate the simple teaching practices above and have the courage to ask students if they are okay when it looks like they are not. Exaggerated as it may seem, a simple five-minute conversation can have a huge impact on the trajectory of a student's life. Early intervention is the key to managing these conditions in the long term, and students are usually both unaware of the nature of their difficulties and their accommodation and treatment options. By helping them to reflect on the nature of their difficulties and pointing them in the direction of professional help, educators can both fulfill their obligations as educational professionals and steer their students away from failure to success.

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