

Relationship Between Self-Esteem, Self-Efficacy and Learning Disabilities Among Primary School Children of District Haripur

Sidra Bibi¹, Dr. Shazia Gul², Zartasha Munawar^{3*}

¹ Lecturer, Government Girls Degree College Sarai Saleh, Haripur, Pakistan

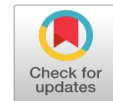
² Professor, Government Girls Degree College Sarai Saleh, Haripur, Pakistan

³ Lecturer, University of Haripur, Haripur, Pakistan

Abstract: Children with learning disabilities have to surface many difficulties regarding their self-evaluation, believe on their capabilities and academic adjustment. Therefore, the aim of study was to identify the prevalence of learning disabilities and relationship of learning disabilities with self-efficacy and self-esteem among primary school students. The sample included 200 female primary school students with age range 6-13 years. Data was collected by using purposive sampling technique, from different public sector primary schools of district Haripur. Learning Disabilities Checklist (Ashraf & Najam, 2014), Coopersmith Self-esteem Inventory (Coopersmith, 1967) and Self-efficacy in Peer Interaction (Wheeler & Ladd, 1982) were used in the present study. Reliability analysis, Correlation, t-test, and one way ANOVA were used in order to test relationship between variables. Cronbach's alpha reliability indicated that Learning Disabilities Checklist is valid screening tool of assessing learning disabilities among girls. Findings indicated that out of 200 students, 73 were identified with learning disabilities while 40 were at risk for developing learning disabilities in future. Results also confirm a significant negative relationship between learning disabilities and self-esteem and also between learning disabilities and self-efficacy.

Keywords: Learning Disabilities, Self-Esteem, Self-Efficacy, Interventions

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INTRODUCTION

Humans are creatures which learn and continue to live with what they learn. The learning experience begins with the ability to hear before birth and proceed with the expansion of the capacity to observe after birth. Learning disabilities may appear themselves in numerous combinations of impairments in language, memory, attention, perception and different motor functions. All of children do not shows all the symptoms of learning disabilities and these symptoms can vary in degree of severity.

The most frequently known impairment in learning concerned to educational accomplishment. Verbal learning deficits were considered to be the most common form of learning disabilities which includes difficulties in learning of reading, in the acquirement of spoken and written language (dyslexia) and in arithmetic which includes computation, mathematical facts and problems (dyscalculia). However, nonverbal learning is considered to be significant such as difficulty in understanding directional concepts, position of body, recognition of facial expressions and interpreting other behaviors etc.

Learning disability (LD) was firstly defined by Kirk (1963) and is usually used to define the individual (especially children) having specific problems in speaking, reading, language and communication. Various definitions have been given and formulated on learning disorder because of the complexity of the disorder. According to the National Joint Committee on Learning Disabilities (NJCLD), LD may be defined as a diverse group of numerous disorders of neurological systems that disturbs the brains capacity to receive, process, store, respond to and transfer information (Balammurugan, 2014).

*Corresponding author: Sidra Bibi

†Email: munawarzartasha0@gmail.com

Reading Disability

Reading disability is considered to be the most general form of LD and almost 70 to 80% students have disabilities in this academic area. These difficulties includes language comprehension, difficulty in smooth fluent letters, word and number recognition and they also have lower rate of speech as compare to non-learning disabled individuals. Furthermore, awareness of phonemes and letter combinations also become difficult for such individuals. Stanovich (1986) described such "Matthew effects" in reading and suggest that at initial stages, when children's word decoding ability is slower to develop, this can result in devastating effect on child's verbal IQ. These difficulties makes child less motivated to read to a material and he may try to ignore written material. As a result the vocabulary of such children developed at slower rate as compared to non-learning disabled group.

Writing Disability

Writing disability is defined as troubles in expression of written and printed material which in includes grammatical mistakes and errors in punctuation and mistakes. Due to diminished motor activities, Handwriting insufficiencies are not included in the criteria of writing disability (APA, 2013). Findings indicated that different cognitive methods i-e executive functioning and working memory are involved in certain types of writing disability which have a profound effect on child's written expression. There are several other factors which also influence the writing process of individual such as his personal experiences, level of motivation and individual's belief on his capabilities (Pajares and Valiante, 2006). According to sociolinguistic point of view, individual's situational variables, societal variables and emotional factors has intense effect on his written expression (Englert, Mariage, and Dunsmore, 2006).

Mathematical Disability

It is reported that about 7 percent of students are identified with mathematical disabilities (Barbarese et al., 2005). MD is regarded as troubles in learning mathematical ideas, calculations, values, unifying numbers, remembering mathematical facts and difficulty in understanding of numerical problems. Geary (2010) review indicated that children with MD are a diverse group and show one or more of three types of cognitive disorders. Geary, Hoard, Byrd-Craven, and DeSoto (2004) stated that mathematical decits are not cause by poor spatial abilities but by poor monitoring of steps involves in algorithm.

Self -Esteem

Rosenberg (1965) stated that self-esteem refers to an individual general optimistic assessment to the self. He also stated that when individual consider himself as valuable and respect himself, it can raises his self-esteem. Self-esteem is associated to individual opinions and beliefs about expertise, abilities, and societal interactions. It is also define as comprehensive indicator of self-evaluation comprising cognitive evaluations about common self-respect and emotional experiences of the self that are associated with these global appraisals (Murphy, Stosny and Morrel, 2005).

Self-Efficacy

Bandura (1997) defined, "Self-Efficacy as people's judgments or beliefs of their capabilities to organize and execute courses required attaining designated types of performances. It is concerned not with the skills one has but with judgments of what one can do with whatever skills one possesses". Self-efficacy is about how well an individual can carry out in task in challenging environment. A person's self-efficacy is a resilient element of their struggle, will power, planning as well as their following performance (Heslin & Klehe, 2006).

Bandura (2006) presented a set of procedures for the development of self-efficacy scales. He emphasized that self-efficacy is different from self-confidence and self-esteem. Self-confidence is a global quality of personality which refers to boldness of people to take actions in different situations and self-esteem is person's overall evaluation towards self. how boldly people take actions in most situations and self-esteem is the extent to which a person evaluates himself or herself and is more readily develop as compared to self-confidence (Heslin & Klehe, 2006).

Intervention

When working with learning disabled children, the major method of treatment is to provide them special educational services. This can include regular education, regular education with adjustments, and different mode of teaching and joint consultation with special education. A huge body of exploration has emphasized on the significance of timely intervention in recent years because early intervention is also important for preventions of children who are prone for developing learning disabilities.

Ashraf & Najam (2020) finding indicated a higher prevalence of learning disabilities in public sector schools of Pakistan. Arshad et al (2015) found that self-esteem and academic performance were significantly positively correlated with each other. Similarly, Fleming & Wated (2016) stated that academic performance has profound effect on student's self-efficacy. Those students who were identified as learning disabled can have academic problems and due to which their self-efficacy can also disturbed.

Objectives

The objective of this study is:

- To identify the prevalence of learning disabilities among primary school children of District Haripur
- To explore the relationship among self-esteem, self-efficacy and learning disabilities

Hypothesis

- Learning disabled students will be low on self-esteem and self-efficacy

MATERIAL AND METHODS

Research Design

The current study used correlational research design to explore relationship among learning disabilities self-esteem and self-efficacy. It determined how learning disabilities and self-esteem and self-efficacy interact with one another and how change in one variable produces change in other variable.

Sample

The population sample was selected from district Haripur through purposive sampling technique from grade 1 to 5. Two hundred female students from grade 1-5 were selected for identification of learning disabilities and from grade 3-5 for relationship between self-esteem, self-efficacy and learning disabilities.

Inclusion criteria. Only those students were selected for study who were have some kind of difficulty in writing, reading and mathematical areas. Those teachers and students were recruited who have daily classroom interaction from last 6 months.

Exclusion criteria. Those students were omitted from study who have ever appeared in a private school and they were not in the present school from last one year.

Instruments

Learning disabilities checklist: Learning Disabilities was measured by using Learning Disabilities Checklist (Ashraf & Najam, 2014) containing 35 items and three subscales i-e reading difficulties scale, writing difficulties scale and mathematical difficulties scale. Cronbach's Alpha reliability for overall total scale and subscales ranges from .81 to .94 which is satisfactory. The checklist contains no reverse scoring. All items under a sub-scale are summed up and can be utilized. By adding all three subscales, a composite score of learning difficulties/ disabilities (LD) can be obtained. Participants scoring 50% or more than 50% are categorized as with LD. Participants scoring 25% or less than 25% are categories as without LD. The group in between <25% and less than 50% of symptoms of LD may be considered a group with proneness of developing of symptoms in later life. Learning disabilities checklist is for age from 10-16 years old and researcher have validated it at primary school level.

Coppersmith self-esteem inventory school form: The Coppersmith Self-Esteem Inventory School Form (Coppersmith, 1967) is used to assess self- attitudes in different areas such as family, peers, school and societal engagements. It is designed for adolescents and adults. It consists of 58 items and it also contains a lie scale (defensive responses; eight items). The CSEI-SF is appropriate for ages 8-15 years. This scale also has an Adult Form (for age range 16 and above). It is a dichotomous scale ("like me" vs "unlike me") and its scores range from 0 to 58. Those

individuals who gets higher score on the scale means that they have higher self-esteem. The various forms of the CSEI have Cronbach's alpha of between .80 and .92 across diverse cultural populations.

Children self-efficacy in peer interaction : Student's self-efficacy was measured by using Children self-efficacy in Peer Interaction (Wheeler & Ladd, 1982) consist of 22 items with four point Likert type items. The time for the completion of test is 10-15 minutes. This scale was aimed to measure individual's awareness of their capability to be positive in societal relations. This comprises their skill to be influential towards peers in positive ways. The questionnaire has two subscales that measure social self-efficacy in conflict and non-conflict situations. The Cronbach's alpha for the conflict subscale is (Alpha=0.85), the Non-Conflict subscale (0.73) and the overall Self-Efficacy score (0.85). All 22 items can be summed to produce a total score of children's self-efficacy in peer interactions.

Procedure

Before the collection of data, permission was taken from concerned authorities. The data of 200 sample was collected from three government primary schools of district Haripur. In first phase of study, teachers were instructed to fill the Learning Disabilities Checklist (Ashraf & Najam, 2016) for students having any kind of reading, writing and mathematical difficulties along with demographic sheet. They were given a time period of one week for completion of checklist. Along with, Coppersmith Self-esteem Inventory-School Form (Coppersmith, 1967) and Children Self-esteem in Peer Interaction (Wheeler & Ladd, 1982) were also administered to same sample of students.

RESULTS

The aim of the current study was to investigate the association among self-esteem, self-efficacy and learning disabilities among primary school students. Statistical analysis were conducted to achieve the objectives of the study. The psychometric properties were established through analyzing the data. Internal consistency of the scale was established through Cronbach's alpha reliability coefficient. Descriptive statistics were compute to assess the prevalence of learning disabilities. ANOVA was conducted to evaluate the differences among learning disabled group, non-learning disabled group and at risk group. Furthermore, Pearson product moment correlation was calculated to study the correlation among learning disabilities, self-esteem and self-efficacy.

Table 1: Sociodemographic Characteristics of Study Participants(N = 200)

Demographics	Groups	N	%
Age	9-Jun	104	51.7
	13-Oct	96	47.8
Class	1	20	10
	2	39	19.5
	3	43	21.5
	4	49	24.5
	5	49	24.5
Socioeconomic status	Low	89	44.3
	Middle	111	55.2
Mother education	Educated	118	58.7
	Uneducated	82	40.8
Mother occupation	Working women	18	9
	House wife	182	90.5
Father education	Educated	112	55.7
	Uneducated	88	43.8
Father occupation	Driver	37	18.4
	Mechanic	27	12.9
	In foreign country	24	11.9
	Daily wager	49	24.4
	Other	63	31.3

Note. f = frequency, % = percentage

Table 1 shows that 51% participants were have age range between 6-9 years while 47% were between 10-13 years. The percentage of participants from class 1st, 2nd, 3rd, 4th, and 5th were 10%, 19%, 21%, 24% and 24% respectively. 44% participants belonged to lower socioeconomic status while 55% were from middle socioeconomic status. Results also indicated that 58% mothers of participants were educated while 40 were uneducated. Most of the mothers were house wives, with percentage of 90% while only 9% were working women. Similarly 55% fathers of participants were educated while 45% were uneducated and of them 18% were driver, 12% were mechanic, 11% were in foreign country, 24% were daily wager while 31% were belong to other professions.

Table 2: Psychometric Properties of Learning Disabilities Checklist, Coppersmith Self-esteem Inventory, Self-efficacy in Peer Interaction (N = 200)

Scales	No of items	α	M	SD	Range	
					Actual	Potential
RD	15	0.88	5.23	4.29	0-15	0-15
WD	10	0.83	3.55	3.07	0-10	0-10
MD	10	0.81	4.78	3.03	0-10	0-10
LDC	35	0.91	13.56	8.41	0-32	0-35
CSSEI-SF	58	0.76	37.55	7.11	25-58	0-58
CSEPI	22	0.92	63.87	17.52	Nov-88	Jan-88

Note. M = Mean, SD = Standard deviation, RD = Reading disabilities, WD = Writing disabilities, MD = Mathematical disabilities, LDC = Learning disabilities, CSSEI = Coppersmith self-esteem inventory-school form, SEPI = Children Self-efficacy in peer interaction.

Table 2 illustrates the means and standard deviations of all of the variables. The alpha reliability of reading, writing, mathematical subscales were .88, .83 and .81 respectively, while reliability of learning disabilities checklist was .91. Similarly, the Cronbach’s alpha of coppersmith self-esteem inventory-school form and children self-efficacy in peer interaction were .76 and .92 respectively.

Table 3: Item Total Correlation of Learning Disabilities Checklist (N = 200)

Item No	R	Item No	R	Item No	r
1	.56**	13	.59**	25	.66**
2	.64**	14	.59**	26	.55**
3	.61**	15	.57**	27	.45**
4	.54**	16	.61**	28	.45**
5	.46**	17	.54**	29	.45**
6	.47**	18	.45**	30	.33**
7	.56**	19	.54**	31	.23**
8	.50**	20	.51**	32	.23**
9	.40**	21	.56**	33	.45**
10	.39**	22	.46**	34	.46**
11	.43**	23	.41**	35	.55**
12	.57**	24	.54**		

** $p < 0.01$

Table 3 shows the total item correlation of learning disabilities checklist. It indicates that all the items of checklist are significantly correlated with each other at $p < 0.01$ and thus checklist have good construct validity.

Table 4: Prevalence of Learning Disabilities (N = 200)

Variables	Learning Disabled		Non-learning disabled		At-risk	
	F	%	F	%	f	%
RD	72	36	94	47	34	17
WD	59	29.5	83	41.5	58	29
MD	97	48.5	50	25	53	26.5
LD	73	36.5	87	43.5	40	20

Note. RD = Reading disability, WD = Writing disability, MD = Mathematical disability, Learning disability, f = frequency, % = percentage

Table 4 shows that 73 students (36.5%) were identified with learning disabilities, 87 (43.5%) were without learning disabilities while 40 (20%) students were prone for developing learning disabilities. mathematical disability

was more prevalent as compared to reading and writing disability.

Table 5: Mean Differences in Reading Disability, Writing Disability, Mathematical Disability, Self-Esteem Inventory and Self-Efficacy across Disability (N = 200)

Variables	M	SD	M	SD	M	SD	F(df)	p	Tukey
RD	1.11	0.33	0.18	0.57	1.08	0.98	58.63(198)	0	1>3>2
WD	1.22	0.54	0.52	0.85	1.03	0.95	17.39(198)	0	1>3>2
MD	1.1	0.34	0.84	0.9	1.25	0.7	5.43(198)	0.005	3>1>2
CSSEI	35.15	7.61	38.28	6.99	33.82	6.05	4.39(198)	0.014	2>1>3
SEPI	55.29	17.45	67.9	15.02	63.2	16.99	7.44(198)	0.001	2>3>1

$p < 0.01$

Note. M = Mean, SD = Standard deviation, RD = Reading disabilities, WD = Writing disabilities, MD = Mathematical disabilities, LDC = Learning disabilities, CSSEI-SF = Coppersmith self-esteem inventory-school form, CSEPI = Children Self-efficacy in peer interaction.

Table 5 indicates significant difference based on disability between groups; learning disabled, non-learning disabled and at risk. Findings shows that learning disabled participants scored high on reading disability ($M = 1.11$, $p < 0.01$), writing disability ($M=1.22$, $p < 0.01$) and mathematical disability ($M = 1.10$, $p < 0.01$) while low on coppersmith self-esteem inventory ($M = 35.29$, $p < 0.01$) and children self-efficacy in peer interaction ($M= 55.29$, $p < 0.01$) as compared to non-learning disabled and at risk group.

Table 6: Post-Hoc of Reading Disability, Writing Disability, Mathematical Disability, Self-Esteem and Self-Efficacy across Disability (N = 200)

Variables	Groups		Mean difference (I-J)	95% CI	
	(I)	(J)		LL	UL
RD	LD	NLD	0.04	-0.166	1.74
	At risk	LD	4.22*	2.4	6.05
		NLD	4.26*	2.48	6.05
WD	LD	NLD	0.92	-0.26	2.11
	At risk	LD	2.43*	1.15	3.07
		NLD	3.35*	2.1	4.61
MD	LD	NLD	0.72	-0.59	2.04
	At risk	LD	2.07*	0.65	3.48
		NLD	2.80*	1.41	4.18
CSSEI	LD	At risk	1.14	-3.61	5.91
	NLD	LD	3.09	-0.02	6.21
		At risk	4.24	-0.29	8.77
CSEPI	NLD	LD	12.38*	4.57	20.19
	At risk	LD	4.17	-4.03	12.38
		LD	8.2	-0.14	16.56

$*p < 0.05$

Note. RD = Reading disabilities, WD = Writing disabilities, MD = Mathematical disabilities, LDC = Learning disabilities, CSSEI-SF = Coppersmith self-esteem inventory-school form, CSEPI = Children Self-efficacy in peer interaction, LD = Learning disabled, NLD = Non-learning disabled, LL = Lower limit, UL = Upper limit

Table 6 indicates that there is a significant mean difference among all the variables except for reading disability across non-learning disabled (NLD) and learning disabled (LD) group i-e $0.04 < 0.16$. Additionally, the difference between non-learning disabled and at risk group across self-esteem was also found to be non-significant i-e $4.17 < 7.19$.

Table 7: Correlation between Learning Disabilities, Self-esteem and Self-efficacy (N = 200)

S. No	Scales	I	II	III	IV	V	VI	M	SD
1	RD	-	.64**	.42**	.33**	-.19*	-0.13	5.23	4.29
2	WD	-	-	.39**	.35**	-0.05	-.24**	3.55	3.07
3	MD	-	-	-	.31**	0.01	-0.15	4.78	3.03
4	LDC	-	-	-	-	-.23**	-.47**	13.56	8.41
5	CSSEI	-	-	-	-	-	.22*	37.55	7.11
6	SEPI	-	-	-	-	-	-	63.87	17.52

* $p < 0.05$, ** $p < 0.01$

Note. M = Mean, SD = Standard deviation, RD = Reading disabilities, WD = Writing disabilities, MD = Mathematical disabilities, LDC = Learning disabilities, CSSEI-SF = Coppersmith self-esteem inventory-school form, CSEPI = Children Self-efficacy in peer interaction.* $p < 0.05$, ** $p < 0.01$

Table 7 indicates a correlation among study variables. As predicted, the correlation between Learning Disabilities Checklist, Coppersmith Self-esteem Inventory and Self-efficacy in Peer Interaction was found to be significantly negative ($r = -.22, -.47; p < 0.01$). Similarly, the correlation between reading, writing and mathematical disabilities was also significant at $p < 0.01$.

DISCUSSION

Learning disabled individuals can surface unique challenges that are often persistent throughout the life time. These children can face anxiety, shame, frustration, and isolation which can have profound effects on child's psychological well-being. The present study targeted to find out the prevalence of learning disabilities and also to investigate the association between learning disabilities, self-efficacy and self-esteem. The sample of present study was comprised of 200 primary school children. The teachers were instructed to fill the Learning Disabilities Checklist (Ashraf & Najam, 2016) for students having any kind of reading, writing and mathematical difficulties along with demographic sheet. They were given a time period of one week for completion of checklist. Coppersmith Self-esteem Inventory-School Form (Coppersmith, 1967) and Children Self-efficacy in Peer Interaction (Wheeler & Ladd, 1982) were also administered to same sample of students.

The first step of analysis was to check the internal consistency of these questionnaires on selected sample which was found to be satisfactory. The Cronbach's alpha of reading disability subscale, writing disability subscale, mathematical disability subscale, learning disabilities checklist (Ashraf & Najam, 2014), Coppersmith Self-esteem Inventory-School Form (Coppersmith, 1967), Children Self-efficacy in Peer Interaction (Wheeler & Ladd, 1982) were .88, .83, .81, .91, .76, and .92 respectively (see Table 2). In addition, all the items of Learning Disabilities Checklist have significantly positively correlated with total scores which provide evidence consistency above ordinary level of construct validity and thus it is a valid tool for measuring learning disabilities at primary school level with Cronbach's alpha of .91 at $p < 0.01$ (see Table 3).

Findings revealed that seventy three students were identified as learning disabled, 87 were as non-learning disabled and 40 were at risk for developing learning disabilities. Mathematical disability was found to be more prevalent as compared to reading disability and writing disability. (see Table 4). Students with learning disabilities scored high on reading disability, writing disability and mathematical disability. These students also scored low on self-esteem $F = 4.39, p = 0.01$ and self-efficacy $F = 7.44, p < 0.01$ as compared to non-learning disabled and at risk group. (see Table 5 & 6). Previous literature showed that SLD are showed by 39% participants, 33% were diagnosed with dyslexia, 48% dysgraphia and 45% were have dyscalculic signs (Ashraf & Najam, 2020). Mostly primary schools of Haripur district are located in rural area where there is no check and balance on performance of teachers. Along with that, it was observed that quality of instruction that students received and teacher's behavior towards students were also very poor. This type of learning environment can contribute to high percentage of learning disabilities.

Findings indicated that learning disabilities have negative relationship with self-esteem i.e $r = -.23, p < 0.01$. These findings approved the first hypothesis of study that those students who will be high on learning disabilities will be low on self-esteem (see Table 7). Previous literature supports the findings and suggests that learning disabled

children's have disturbed self-esteem as compared to normal children (Alesi & Rappo et al, 2014). Similarly, Reddick et al (1999) study stated that reading disabled individuals have lower level of self-efficacy as compared to control group. Furthermore, it was indicated that students' self-esteem was significantly negatively correlated with their academic performance (Arshad, Zaidi & Mahmood, 2015).

Low self-worth and lack of identity can be a risk factor for juvenile delinquency because when children become a part of gang, it gives him a temporary sensation of belongingness with a group that give him acceptance (Clinton, Clark, & Straub, 2010). So, when a learning disabled child is continuously rejected and are stigmatized as 'dumb' and 'lazy', he experience a great deal of shame which can negatively affect child's self-esteem. Research has indicated it would be stigmatizing for a child he is categorized as learning disabled (MacMaster, Donovan, & Macintyre, 2002). Similarly, literature also confirmed that learning disabled students with low self-esteem consider them as useless and failure (Lahane & Shah et al, 2013).

Learning disabilities have been seen to be negatively related with self-efficacy as $r = -.47$, $p < 0.01$ (see Table 7). These findings also approved the first hypothesis of study 1 that those students who will be high on learning disabilities will have lower level of self-efficacy. These results are aligned with previous study conducted by Akram & Ghazanfer (2014) which stated that when students have positive self-efficacy beliefs, there academic achievements were also high. Those students who have learning disabilities also have less academic achievement and thus have lower level of self-efficacy.

Self-efficacy and self-esteem were significantly positively correlated to each other as $r = .22$, $p < 0.01$ (see Table 7). These findings also support the previous literature which stated that self-esteem has significant positive relationship with general self-efficacy (Saracoglu et al, 1989). In other words, when a child has positive self-evaluation and he consider himself as worthy, then he believes on their capabilities and are motivated to peruse a task even in difficult and shameful situations.

CONCLUSION

The disorder of learning disability can be treated by using proper and appropriate instructional methods. The timely identification of the problem is very important for corrective teaching and also for the development of self-esteem and self-efficacy, because in later stages the treatment of child is very difficult. In present study, a great number of children were identified as learning disabled. Overall, the relationship among learning disabilities, self-esteem and self-efficacy is explored in this research. Findings suggests that self-efficacy and self-esteem are negatively correlated with learning disabilities.

LIMITATIONS

- The sample of research includes only female students of primary schools while boys were not included for identifying learning disabilities
- Sample size was small; sample should be increased to increase the reliability of results.
- As the data was collected from primary school students, so it cannot be generalized over the upper grade levels and general population.
- As none of the participant have English as a native language and all the questionnaires were in English language.
- Results were made only on basis of teachers' reports without observing students.
- The data was collected from only public sector schools so it cannot be generalized to private schools.

SUGGESTIONS

- For studying comparison of learning disabilities across gender, boys should also include.
- Longitudinal studies should be conducted on the learning disabilities, self-esteem and self-efficacy on larger sample size to have a better insight of the variables and for the generalization of results.
- Learning Disabilities Checklist should be administered on directly on a child and observation may offer better, unbiased, and detailed information.
- The entire questionnaire should be translated in Urdu language for better understanding.

- Future research can be carried out in private sector schools in order to get better comparison across both medium of education.
- Future research can also contribute to initiate an awareness programme to accept child with learning disabilities.
- Future research should focus on identifying those features of learning environment that leads towards the development of learning disabilities.

RECOMMENDATIONS

In Pakistani perspective, there are numerous variables that that can serve as causal factor for high ratio of learning disabilities such as educational decline, unqualified teachers, outdated and on the whole lack of universal syllabus, over-crowded class rooms, ineffective teaching methods. Apart from this, writing and reading techniques, linguistic skills and vocabulary are not being taught to primary school children. Concerned authorities should promote the development of indigenous screening tools because it would be unfair to diagnose children from western cultural perspective because those skills are not taught in Pakistani school systems. Additionally, a large number of students are prone to developing Learning Disabilities. So, the concern authorities should also take an action for preventing these children from developing learning disabilities in future.

IMPLICATIONS

The present study has its implication for school authorities. This study has validated the Learning Disabilities Checklist at primary school level. As there was no such measures for assessing learning disabilities of students at primary school level. So it is a valid tool for screening learning disabilities in primary school students. Furthermore, intervention used in the present study could be beneficial to some extent for handling learning disabilities. These interventions will not only reduce the symptoms of learning disabilities but will also contribute to the improvement of self-esteem and self-efficacy in students because when students achieve academically, their self-evaluation and self-believe becomes positive. It suggest that learning disabilities have profound effect on child's self-esteem and self-efficacy so, students having any kind of learning disability can have many emotional and behavioural issues which also need assistance and supervision.

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