ABSTRACT #5

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Title: Barriers to Identifying and Treating Learning Disabilities in School-aged Children: A Qualitative Study of Child-facing Clinicians and Educators
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Background: Nearly 8% of all children are estimated to have a learning disability, yet fewer than 5% are formally diagnosed and receive services in public schools. Delayed diagnosis prevents timely remediation and may enhance emotional vulnerability. We aimed to assess barriers affecting front-line pediatric clinicians and educators in detecting learning disabilities in school-aged children.

Methods: We conducted a qualitative study with semi-structured individual interviews of child-facing professionals identified through theoretical sampling. We recruited professionals with a range of expertise and practice settings across the United States. Clinicians represented academic and community settings, and educators represented public, private, and charter school settings. Half had expertise in the recognition, assessment, and remediation of learning disabilities; the other half were generalists without specific training. We also made a deliberate effort to maximize diverse representation across age, gender, race/ethnicity, and geographic location. We professionally transcribed interviews and employed a constructivist grounded theory approach for analysis to identify themes and sub-themes reflecting barriers to detecting learning disabilities in school-aged children.

Results: Overall, 40 professionals participated (10 child mental health clinicians, 10 pediatricians, and 20 educators). We identified 2 main themes (and sub-themes) reflecting barriers to diagnosis: 1) areas requiring improved professional education (misconceptions that may hinder detection, confounding factors that may mask learning disabilities, and need for increasing engagement of parents or guardians in identifying learning disabilities) and 2) systemic barriers (time constraints that limited professionals’ ability to advocate for children and to delve into their emotional experience, inconsistent guidelines across institutions and inconsistent perceptions of professional responsibility for detection, and some professionals not screening routinely for learning disabilities in the absence of overt problems).

Conclusions: We capitalized on the experience of front-line professionals to identify actionable areas to improve the diagnosis of school-aged children with learning disabilities. Augmented training in screening and identification for clinicians and other child-facing professionals could enhance earlier detection of these prevalent, impairing, and remediable conditions.

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