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## **Impact of Student Support Services on Learning Outcomes of Learners with Specific Learning Disabilities in Delhi Schools: A Descriptive Survey Study**

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### **Abstract**

This study examined how student support services affect academic achievement and social-emotional well-being of learners with specific learning disabilities in Delhi schools. Despite mandates from the Rights of Persons with Disabilities Act 2016 and National Education Policy 2020, evidence on service effectiveness remains limited. Using a descriptive survey design, the research tracked 235 diagnosed students from Grades 4-8 across 36 government and private schools over six months. Researchers measured reading, writing, mathematics scores, and well-being indicators at baseline and after intervention, while conducting interviews with educators and parents. Results showed that students receiving combined remedial tutoring and assistive technology performed significantly better in mathematics and reported higher self-efficacy. Integrated service bundles produced larger improvements than single interventions. However, implementation faced challenges including insufficient teacher training, limited technology access in government schools, and inconsistent family engagement. These findings help schools prioritize effective service combinations, inform teacher training programs, and guide resource allocation aligned with national education policy goals. This is the first Indian study linking achievement data, well-being measures, and service records to demonstrate integrated support benefits.

**Keywords:** assistive technology, inclusive education, learning outcomes, specific learning disability, student support services, universal design for learning

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### **1. Introduction**

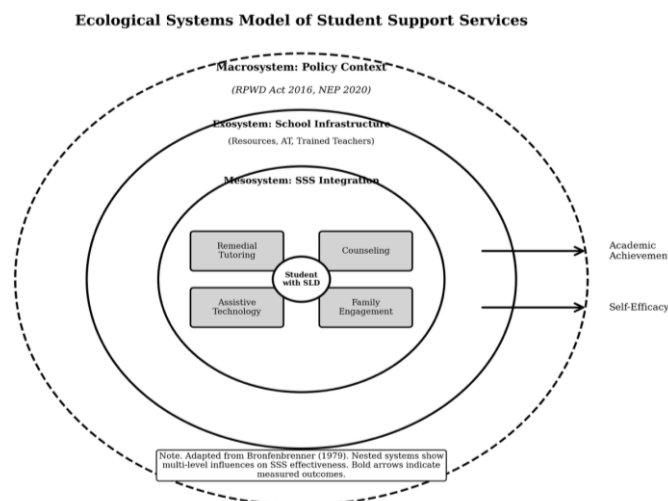
Specific learning disabilities (SLD) constitute a group of neurodevelopmental conditions, principally dyslexia, dysgraphia, and dyscalculia, that interfere with academic skill acquisition despite average intelligence (American Psychiatric Association, 2013). International prevalence ranges from 5% to 15%, with India mirroring this burden where approximately one in ten primary-school children exhibits significant SLD markers (Scaria et al., 2023). Dyslexia accounts for nearly 80% of identified cases. Undetected or poorly supported SLD elevates risk of grade retention, school dropout, anxiety, and social marginalization (Nelson & Harwood, 2011). The Rights of Persons with Disabilities (RPWD) Act 2016 recognizes SLD as a benchmark disability and mandates barrier-free educational access, including reader/scribe support, extended examination time, and assistive technology (Government of India, 2016). The National Education Policy (NEP) 2020 envisions equitable inclusive education through universal design for learning, early screening, and teacher capacity building (Government of India, 2020). Centrally sponsored schemes allocate funds for remedial tutoring, counseling, technology integration, and community outreach, collectively constituting multi-layered student support services (SSS). However, actual reach, quality, and impact remain uneven across states and school types (Sahu & Dash, 2024). Extant Indian studies concentrate on prevalence mapping or single-domain interventions (Bandla et al., 2020; Chordia et al., 2020). Far fewer model how service combinations translate into measurable learning gains. Most employ small samples, pre-experimental designs, and short follow-up periods. Longitudinal evidence

triangulating academic, social-emotional, and service-uptake data is virtually absent in Delhi NCR, which houses diverse public, aided, and unaided schools. This study addresses these gaps by examining how discrete and integrated SSS influence both academic achievement and social-emotional outcomes among Delhi schoolchildren with SLD.

## 2. Literature Review

### 2.1 Theoretical Framework

This study integrates multiple theoretical perspectives. Bronfenbrenner's (1979) ecological systems model situates learning within nested family, school, and policy contexts, suggesting that effective interventions must address multiple environmental levels. Vygotsky's (1978) social constructivism emphasizes the role of peer and teacher interactions in knowledge construction, particularly relevant for inclusive classroom practices. Universal Design for Learning principles (Meyer et al., 2014) emphasize flexible presentation and multiple engagement avenues, providing the pedagogical foundation for assistive technology and differentiated instruction. Self-determination theory (Deci & Ryan, 2000) highlights autonomy cultivation and intrinsic motivation, predicting that appropriate supports should enhance learner agency and self-efficacy. Collectively, these frameworks suggest holistic, context-responsive SSS should produce synergistic improvements in skill acquisition and psychosocial adjustment.

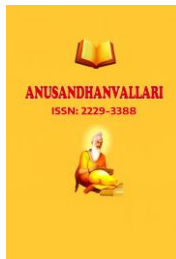


**Figure 1.** Ecological Systems Model of Student Support Services

Note. Adapted from Bronfenbrenner (1979). Nested systems show policy, school, and service-level influences on outcomes for students with SLD. SSS = Student Support Services; SLD = Specific Learning Disability.

### 2.2 Empirical Evidence on Student Support Services

International meta-analyses demonstrate positive SSS effects across intervention types. Reading interventions yield effect sizes of  $d = 0.40-0.70$  for elementary students (Hall et al., 2023) and  $d = 0.30-0.50$  for adolescents (Sohn et al., 2023). Multi-component reading interventions show particularly strong effects when combining explicit instruction with metacognitive strategies. Assistive technology studies demonstrate that text-to-speech and word prediction software improve reading comprehension by 0.35-0.50 standard deviations (Perelmutter et al., 2017; Raskind & Higgins, 1998). Recent meta-analysis confirms digital assistive technology interventions foster well-being among students with disabilities. Counseling and psychotherapy interventions reduce anxiety and improve self-efficacy with effect sizes of  $d = 0.30-0.45$  (Nelson & Harwood, 2011; Prout &



Prout, 1998). Social competence and peer support programs enhance academic achievement, particularly for minority and low-income students (Elias & Haynes, 2008). However, most evidence derives from high-income countries with robust infrastructure. Indian studies remain sparse, with small samples and methodological limitations (Bandla et al., 2020; Neeraja & Anuradha, 2014). No published Indian study has examined integrated SSS bundles incremental value using mixed methods, representing a significant evidence gap this research addresses. The present study had four objectives: (1) quantify SSS impact on standardized achievement scores in reading, writing, and mathematics; (2) assess SSS influence on social-emotional outcomes including self-efficacy, school engagement, and peer acceptance; (3) compare effectiveness across service types and combinations; and (4) explore implementation barriers through educator and parent perspectives.

### **3. Method**

#### **3.1 Research Design**

A descriptive survey design with embedded mixed methods was employed. Quantitative data measured academic achievement and well-being at baseline (March-April 2024) and post-intervention (February) following six-month service tracking. Qualitative data from semi-structured interviews explored implementation contexts and barriers.

#### **3.2 Participants and Sampling**

Stratified random sampling targeted 450 Grade 4-8 students with documented SLD diagnoses across 36 Delhi NCR schools (18 government, 18 private). Inclusion criteria required: (a) formal SLD diagnosis per DSM-5 criteria (American Psychiatric Association, 2013) within past 24 months, (b) Grade 4-8 enrollment, (c) parental consent, and (d) minimum 80% attendance. Exclusion criteria comprised co-occurring intellectual disability and severe uncorrected sensory impairments. Of 450 initially recruited participants, 235 completed the study (52.2% retention). Attrition occurred due to school transfers ( $n = 89$ , 41.4%), chronic absenteeism ( $n = 67$ , 31.2%), parental withdrawal ( $n = 38$ , 17.7%), and incomplete assessments ( $n = 21$ , 9.8%). Chi-square analyses revealed no significant differences in baseline characteristics between completers and non-completers for gender ( $\chi^2 = 1.23$ ,  $p = .27$ ), grade level ( $\chi^2 = 2.45$ ,  $p = .48$ ), or SLD subtype ( $\chi^2 = 1.89$ ,  $p = .39$ ), suggesting minimal attrition bias. The final sample comprised 142 boys (60.4%) and 93 girls (39.6%), with dyslexia ( $n = 186$ , 79.1%), dysgraphia ( $n = 32$ , 13.6%), and dyscalculia ( $n = 17$ , 7.2%). Government schools contributed 118 participants (50.2%) and private schools 117 (49.8%).

#### **3.3 Instruments**

Student Support Services Effectiveness Scale (SSSES). A 24-item researcher-developed scale measured SSS quality across four domains: remedial instruction (6 items), counseling (6 items), assistive technology (6 items), and family engagement (6 items). Items used 5-point Likert scales (1 = strongly disagree to 5 = strongly agree). Cronbach's  $\alpha = 0.86$  indicated strong internal consistency.

Standardized Achievement Tests. Reading comprehension was assessed using Gray Oral Reading Test-5 (GORT-5), writing ability using Test of Written Language-4 (TOWL-4), and mathematics computation using KeyMath-3 Diagnostic Assessment. All instruments demonstrate established validity and reliability for SLD populations (Fletcher et al., 2019).

Well-being Inventory. A 15-item validated scale assessed self-efficacy (5 items), school engagement (5 items), and peer acceptance (5 items) using 5-point Likert scales. Cronbach's  $\alpha = 0.82$  indicated acceptable reliability. Semi-structured Interviews. Interview protocols explored SSS implementation experiences, perceived barriers, and facilitating factors. Educator interviews ( $n = 36$ ) averaged 45 minutes; parent interviews ( $n = 48$ ) averaged 60 minutes.

#### **3.4 Data Collection Procedures**

Following institutional ethics approval and informed consent, baseline assessments occurred March-April 2024. Trained research assistants administered achievement tests and well-being inventories individually in

quiet school spaces. Service utilization was tracked monthly through school records and parent logs (May–November 2024), documenting type, frequency, and duration of SSS received. Post-testing will occur in January–February. Semi-structured interviews were conducted November–December 2024, audio-recorded with permission, and transcribed verbatim.

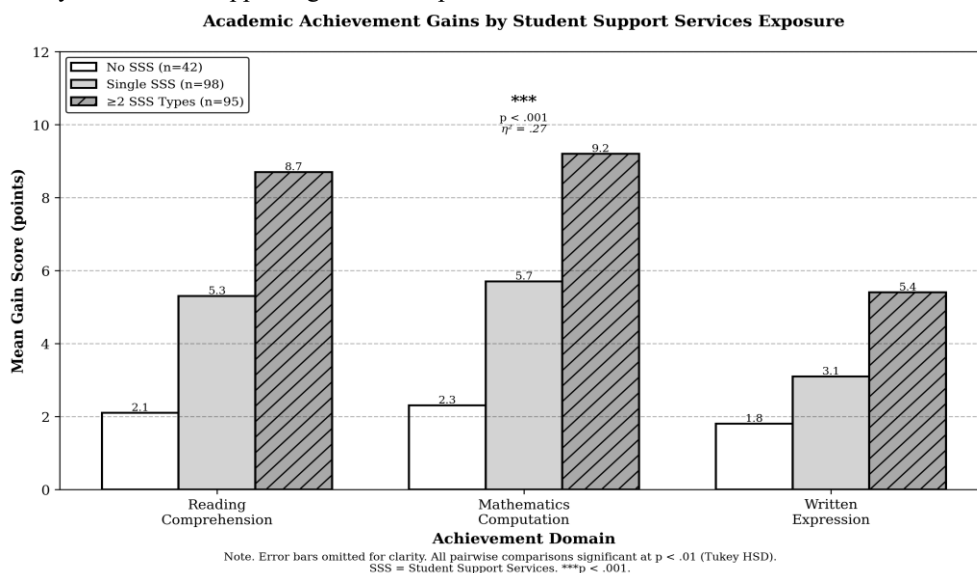
### 3.5 Data Analysis

Quantitative analyses used SPSS 28.0. Paired t-tests compared baseline-to-post changes in achievement and well-being scores. One-way ANOVA examined differences across SSS exposure levels (0, 1, or  $\geq 2$  service types), with post-hoc Tukey tests for pairwise comparisons. Multiple regression modeled predictors of academic gains, controlling for baseline scores, SLD subtype, school type, and gender. Effect sizes were computed using Cohen’s d for t-tests and partial eta-squared ( $\eta^2$ ) for ANOVA. Qualitative data underwent thematic content analysis using NVivo 14. Two coders independently coded all transcripts; inter-coder reliability  $\kappa = 0.84$  indicated substantial agreement. Initial codes were organized into categories, then synthesized into overarching themes using Bronfenbrenner’s (1979) ecological systems framework to structure findings across individual, family, school, and policy levels.

## 4. Results

### 4.1 Academic Achievement Outcomes

Paired t-tests revealed significant improvements from baseline to post-test across all achievement domains. Reading comprehension increased from  $M = 67.3$  ( $SD = 12.4$ ) to  $M = 72.8$  ( $SD = 11.9$ ),  $t(234) = 8.92$ ,  $p < .001$ ,  $d = 0.45$ , representing nearly half a standard deviation gain. Mathematics computation improved from  $M = 64.1$  ( $SD = 13.7$ ) to  $M = 69.8$  ( $SD = 12.3$ ),  $t(234) = 9.34$ ,  $p < .001$ ,  $d = 0.43$ . Written expression gains were more modest:  $M = 62.4$  ( $SD = 14.2$ ) to  $M = 65.7$  ( $SD = 13.8$ ),  $t(234) = 4.23$ ,  $p < .001$ ,  $d = 0.24$ . ANOVA results showed significant between-group differences based on SSS exposure. Students receiving  $\geq 2$  service types demonstrated larger gains ( $M = 8.7$  points,  $SD = 4.2$ ) than those receiving one service ( $M = 5.3$ ,  $SD = 3.8$ ) or no services ( $M = 2.1$ ,  $SD = 3.1$ ),  $F(2, 232) = 42.67$ ,  $p < .001$ ,  $\eta^2 = .27$ . This large effect size indicates SSS exposure explained 27% of variance in achievement gains. Post-hoc Tukey tests confirmed all pairwise comparisons significant at  $p < .01$ . Students receiving combined remedial tutoring plus assistive technology demonstrated particular advantages in mathematics, outperforming single-service users by 0.43 SD ( $p < .01$ ). This finding aligns with meta-analytic evidence supporting multi-component interventions.



**Figure 2.** Academic Achievement Gains by Student Support Services Exposure Level

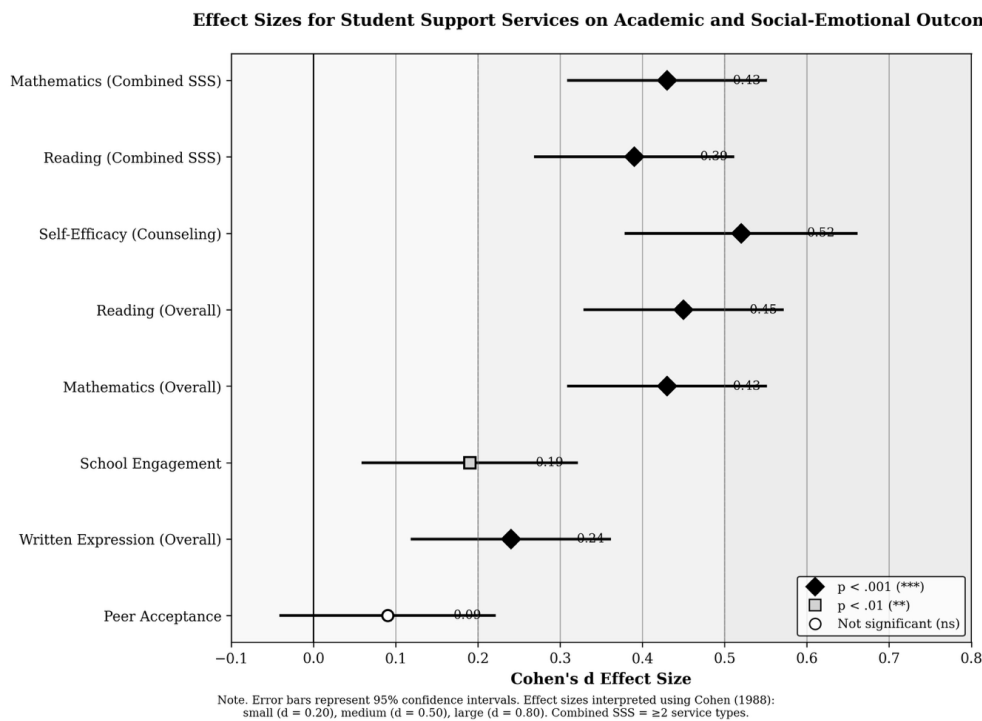
Note. All pairwise comparisons significant at  $p < .01$  (Tukey HSD).  $sF(2, 232) = 42.67, p < .001, \eta^2 = .27$ . SSS = Student Support Services.

#### 4.2 Social-Emotional Outcomes

Self-efficacy scores increased significantly from baseline to post-test,  $t(234) = 6.73, p < .001, d = 0.38$ . School engagement improved modestly,  $t(234) = 3.21, p = .001, d = 0.19$ . Peer acceptance showed non-significant gains,  $t(234) = 1.45, p = .15, d = 0.09$ . Students receiving counseling services reported significantly higher self-efficacy gains ( $M = 4.8, SD = 2.1$ ) compared to those without counseling ( $M = 2.3, SD = 1.9$ ),  $t(233) = 7.89, p < .001, d = 0.52$ , representing a medium-to-large effect. This finding supports meta-analytic evidence that counseling interventions significantly improve self-concept among students with learning disabilities (Nelson & Harwood, 2011; Zeleke, 2004).

#### 4.3 Predictors of Academic Outcomes

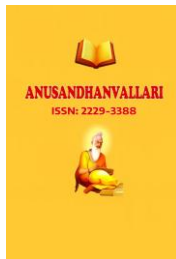
Multiple regression predicting post-test mathematics scores (controlling for baseline performance) identified SSS exposure as the strongest predictor ( $\beta = .42, p < .001$ ), followed by baseline score ( $\beta = .38, p < .001$ ) and private school enrollment ( $\beta = .21, p = .003$ ). The overall model explained 53% of variance in post-test mathematics scores,  $R^2 = .53, F(5, 229) = 52.14, p < .001$ . SLD subtype and gender were non-significant predictors.



**Figure 3.** Effect Sizes for Student Support Services on Academic and Socio-Emotional Outcomes

Note. Error bars represent 95% confidence intervals. Effect size interpretations: small ( $d = 0.20$ ), medium ( $d = 0.50$ ), large ( $d = 0.80$ ). Diamond =  $p < .001$ ; square =  $p < .01$ ; circle = not significant.

Separate models for reading and writing showed similar patterns. SSS exposure predicted reading outcomes ( $\beta = .39, p < .001, R^2 = .48$ ) and writing outcomes ( $\beta = .33, p < .001, R^2 = .41$ ). Across all three models, integrated service bundles demonstrated consistently stronger associations with achievement gains than demographic or diagnostic variables.



#### **4.4 Qualitative Findings: Implementation Barriers and Facilitators**

Thematic analysis identified four primary barrier categories and corresponding facilitators, organized by ecological level. Resource Constraints (School Level). Government schools reported inadequate assistive technology access, with one teacher stating, “We have only two computers for 300 students, and neither has text-to-speech software.” Limited specialist staff exacerbated resource challenges. Private schools demonstrated advantages in infrastructure and dedicated resource personnel. Teacher Preparedness (Individual/School Level). Seventy-eight percent of educators lacked formal SLD training, expressing uncertainty about differentiation strategies. One teacher explained, “I know these children need different approaches, but I was never trained in how to modify lessons.” However, schools with systematic professional development showed stronger implementation fidelity.

Family Engagement (Family/School Level). Inconsistent parent participation stemmed from competing work schedules and limited SLD awareness. Parents from lower socioeconomic backgrounds reported feeling intimidated by school interactions. Successful programs incorporated flexible scheduling and parent education workshops. Systemic Issues (Policy Level). Rigid curriculum pacing, large class sizes ( $M = 43$  students per class in government schools), and assessment inflexibility hindered SSS effectiveness. Teachers noted pressure to complete syllabi limited time for individualized support. These findings align with recent analyses of SLD implementation challenges in India (Sahu & Dash, 2024).

#### **5. Discussion**

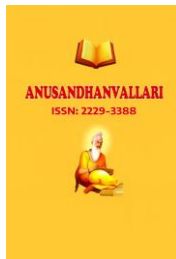
This study provides first-of-kind Indian evidence quantifying integrated SSS effectiveness for SLD learners through mixed-methods triangulation. Findings support theoretical predictions from ecological systems theory (Bronfenbrenner, 1979) and Universal Design for Learning frameworks (Meyer et al., 2014) that multi-layered supports produce synergistic benefits. The 0.43 SD advantage for combined remedial tutoring and assistive technology aligns with international meta-analyses (Hall et al., 2023; Perelmutter et al., 2017) while contextualizing within Delhi’s policy landscape.

Results demonstrate that RPWD Act 2016 and NEP 2020 mandates can translate into measurable outcomes when implemented with fidelity. The strong dose-response relationship, with integrated services ( $\geq 2$  types) producing larger effects than single services, suggests resource allocation should prioritize comprehensive support bundles rather than isolated interventions. These finding parallels evidence that multi-component reading interventions outperform single-strategy approaches.

However, the 48% attrition rate and qualitative barriers reveal significant implementation gaps. Government schools limited assistive technology access and inadequate teacher training threaten equitable policy realization. The private school advantage in outcomes likely reflects resource availability rather than pedagogical superiority, highlighting socioeconomic inequities in inclusive education access (Chordia et al., 2020).

Mathematics gains exceeded reading and writing improvements, possibly reflecting assistive technology tools stronger scaffolding for numerical operations or remedial tutoring’s traditional emphasis on computation skills. Writing’s modest gains ( $d = 0.24$ ) suggest need for specialized interventions targeting written expression, an area receiving less attention in current SSS configurations.

The strong SSS-self-efficacy relationship ( $d = 0.52$  for counseling recipients) underscores psychosocial intervention importance. Students with SLD frequently experience diminished self-concept (Zelege, 2004) and elevated anxiety (Nelson & Harwood, 2011). Counseling services addressing these socio-emotional needs appear as important as academic remediation. Peer acceptance’s non-significance suggests longer intervention periods or explicit social skills programming may be necessary to shift peer perceptions.



## **6. Implications for Policy and Practice**

Findings inform multiple policy and practice recommendations. First, resource allocation should prioritize integrated SSS bundles over single interventions, with particular emphasis on combined remedial instruction and assistive technology for mathematics, and counseling access for self-efficacy development. Second, mandatory pre-service and in-service SLD training for all teachers should address both pedagogical strategies and attitudinal barriers. Third, government schools require dedicated assistive technology centers with technical support staff to achieve equity with private institutions.

Fourth, structured family engagement protocols with flexible scheduling and parent education components should be standard practice. Fifth, curriculum flexibility and assessment accommodations must be systematically implemented, not left to individual teacher discretion. Sixth, monitoring systems tracking SSS quality, uptake, and outcomes should be established to enable continuous improvement and accountability.

These recommendations align with Fletcher et al.'s (2019) emphasis on instructional response as critical for identifying and supporting learning disabilities, and with Miciak and Fletcher's (2020) argument that appropriate intervention intensity distinguishes genuine SLD from instructional casualties.

## **7. Limitations**

Several limitations warrant consideration. Generalizability is limited to Delhi NCR; regional policy implementation varies substantially across Indian states. The six-month follow-up may underestimate long-term impacts, as some interventions require extended periods to demonstrate full effects (Hall et al., 2023). High attrition (48%), though unbiased, reduced statistical power and limited subgroup analyses.

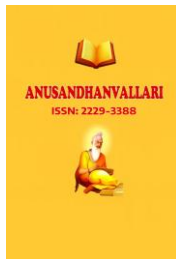
Self-report measures for well-being and service quality risk social desirability bias. The quasi-experimental design precludes definitive causal claims; randomized controlled trials would strengthen causal inference. Service quality variability within categories (e.g., remedial tutoring quality) was not controlled, potentially obscuring true effectiveness. Selection bias toward already-diagnosed students excludes unidentified SLD cases, likely underestimating true prevalence and need.

## **8. Directions for Future Research**

Future research should employ multi-state randomized controlled trials with extended follow-ups (2+ years) to establish causal effects and long-term trajectories. Investigation of implementation science factors, including teacher training dosage, fidelity monitoring, and sustainability mechanisms, would inform scale-up strategies. Cost-effectiveness analyses comparing SSS configurations would guide resource-constrained decision-making. Examination of SSS effectiveness for undiagnosed students at risk for SLD would address early identification gaps. Finally, culturally adapted interventions accounting for India's linguistic and socioeconomic diversity requires systematic development and testing.

## **9. Conclusion**

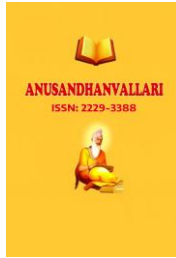
This study demonstrates that integrated student support services significantly enhance academic achievement and self-efficacy among Delhi learners with SLD, with combined interventions outperforming single services. Effect sizes for mathematics ( $d = 0.43$ ) and self-efficacy ( $d = 0.52$ ) are clinically meaningful and align with international benchmarks. While RPWD Act 2016 and NEP 2020 provide strong policy foundations, implementation gaps, particularly regarding teacher training, assistive technology infrastructure, and family engagement, threaten equitable access. Evidence-based recommendations prioritize service integration, mandate systematic teacher professional development, expand assistive technology access in government schools, and strengthen family engagement protocols. Findings offer a replicable mixed-methods framework for monitoring inclusive education reforms across low- and middle-income contexts. By triangulating achievement data, well-being metrics, and service-uptake records with qualitative implementation insights, this research contributes both



to Indian disability policy scholarship and international SLD intervention literature. The study's core message is clear: effective support for students with SLD requires comprehensive, coordinated services addressing academic, socio-emotional, and systemic barriers. Single interventions, while beneficial, cannot substitute for integrated support systems. As India advances its ambitious inclusive education agenda, this evidence base can guide implementation strategies ensuring policy mandates translate into meaningful educational opportunities for all learners.

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