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School Struggling Without Learning Disabilities

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It is widely believed that if a child struggles at school, the most common reasons are learning disabilities, such as dyslexia, dysgraphia, dyscalculia, dyspraxia, attention deficit hyperactivity disorder (ADHD), and many more. Nevertheless, sometimes children, undiagnosed with the forenamed conditions, are unfocused during the lessons, unfollow the teacher's instructors, do homework carelessly, or do not do it at all, and find any reason not to go to school. Sometimes, they are happy to be sick and stay at home. As a result, they miss the material, get low grades, and even give up school. The reasons vary: it can be bullying at school, toxic relationships in the family, unemployment of one or both parents, poverty, or challenging situations in the country. The forenamed challenges often cause depression and other psychosomatic diseases and unwillingness to learn. This article researches the sources of school struggle and how to tackle and predict this problem.

Keywords: learning difficulties, depression, lack of motivation, struggling, bullying, psychosomatics

Introduction

Many parents face the following situation: their child wakes up in the morning, complains that he feels bad, and does not want to go to school. Sometimes, he imitates sickness, but sometimes, he feels bad and has symptoms like headache, nausea, dizziness, or a cold that does not happen on weekends, public holidays, and school vacations. Some parents do not believe him and send him to school. Some allow their child to stay at home. In both cases, he suffers because when he attends school, he might be bullied or ignored there, and when he stays at home, he misses the teachers' explanations and struggles with homework.

Everyone understands that constant failures do not allow the child to develop personally. There is also a medical aspect of the problem of school difficulties. Constant failures, anxieties, and fears lead to a secondary violation of children's mental health. Children's adaptive resources, or the ability to adapt to a difficult situation, are relatively low in the entire population. As a result, they might get depression, which causes learning difficulties and communication challenges. Kamal and Bener (2009) claim that depression may also happen for reasons such as parents' divorce, poverty, lack of interest and attention to children, and many more, causing school absences, incomplete homework, low grades, and examination phobia. Therefore, a decrease in learning success is not long in coming, and those who used to be excellent students in elementary school do worse and worse in junior high and high school, even being undiagnosed as having dyslexia and other learning disabilities. In many cases, the forenamed problems can be caused by school-related stress (Geisthardt & Munsch, 1996).

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Sources of Failure

Problems With Socio-Psychological Adaptation

Problems of school difficulties are being raised all over the world. This is a serious problem precisely because it is social, psychological, medical, and pedagogical. Kids are often overwhelmed and anxious and are afraid of making mistakes or failing tests (Scott, 2022). School failures are understood as the whole range of problems that arise in a child during systematic education and lead to a deterioration in health or a violation of socio-psychological adaptation.

Each child has an individual level of memory development, thinking, attention, and a limit of possibilities. Some students learn quickly and get high grades easily, while others must make great efforts to pass a test. Nevertheless, sometimes quick learners lose their motivation and do not do well at school. It often happens when they have problems with socio-psychological adaptation (Kamal & Brener, 2009). They find it challenging to integrate into the new school, to accept new teachers and co-students, and to be accepted.

In some countries, including Israel, children finish elementary school, and when they start junior high school, they move to a different school, which is always stressful. Most children overcome it quite well and adapt to the new environment successfully. In contrast, others may struggle, especially when they used to be accepted in the previous school, but for some reason, their new classmates do not accept them; otherwise, they do not get on well with new teachers. As a result, kids become unfocused during the lessons and do not follow the teacher's instructions. Some of them misbehave in protest, and the teacher sends them to the principal's office or writes a warning letter to their parents. A homeroom teacher advises parents to consult with the clinical psychologist, but the child might be undiagnosed with any learning disabilities despite low grades.

Learning Differences, Disabilities, and Difficulties

In many scientific works, we can see the abbreviation LD, which can mean "learning differences", "learning disabilities", and "learning difficulties". These terms are often confused, although they differ a lot, as I have noticed for 30 years of my practice as a teacher. Moreover, nowadays, kids diagnosed as neurodivergent are often called "students with learning differences" who study according to their own abilities and rates (NCCD, 2023). Thus, the most common learning disabilities are dyslexia, dysgraphia, dyspraxia, dyscalculia, ADHD, and many more. They may be innate or acquired due to brain trauma or disease (Siemann & Petermann, 2018). According to NCCD (2023), learning differences are various interests, motivation levels, strengths, and weaknesses. Thus, some children are good at math and struggle with languages and vice versa. They might have some learning disabilities, but all the students generally differ; they learn and complete the school curriculum differently.

This article does not research learning disabilities. It deals with school failures caused by social factors, which make kids with unconfirmed learning disabilities struggle at school. Wenz-Gross et al. (1998) claim that such problems are caused mainly by a lack of support from parents, peers, and teachers. As a result, kids go to school and study under pressure due to the obligation to go to school and get good grades, but in case of failure during the lesson and peers' bullying during the break, they acquire school stress (Geisthardt & Munsch, 1996). The situation gets worse if they see angry parents at home who punish them for low grades or misbehavior at school.

Peer Pressure and Bullying

Many high school students try their best to be accepted by their peers, but they do not always do good things. Thus, friends might notice their lack of assertiveness and become their patrons or leaders. At first glance, it may be good, but leaders might later press on their weak friends and blackmail them. Tracy, Lutgen-Sandvik, and

Alberts (2006) call them “demons and slaves”, respectively. Thus, “demons” make “slaves” start smoking, drinking alcohol, and, what is worse, shoplifting for them. On the one hand, the “slaves” know it is illegal, and they might end up at the police station. On the other hand, they cannot resist the “demon’s” blackmailing to avoid bullying. In less challenging cases, they miss lessons together with “demons” and get low grades.

Cyberbullying also makes children suffer (Scott, 2022). Moreover, blackmailing, slandering, and threatening online work much more quickly, and victims often do not know how to deal with this problem. They do not want to say anything to their parents, teachers, or school psychologists, which makes them overwhelmed and helpless. “Repeated abuse can result in emotional responses such as helplessness, anger, despair, and shock” (Tracy et al., 2006, p. 6). In any case of bullying, kids lack self-confidence and avoid communicating with peers and teachers, and their behavior reminds them of autism spectrum disorder (ASD). However, they might have many friends in different places and behave with them differently.

In stressful situations, the level of cortisol increases. Cortisol is a biologically active hormone that is produced in stressful situations. If there is too much of it in the body, a person may experience insomnia, loss of muscle mass, or obesity (Mao Clinic, 2023). Thus, if children have done something terrible following their “leaders” instructions, a guilty conscience keeps them away all night, increasing their anxiety level (Carlisle et al., 2007). The next day, they have a headache and stay home; otherwise, they go to school and daydream during the lessons, making the situation worse. I have noticed many cases when children did much better after changing the environment, for instance, moving to a parallel class or a different school. However, it does not always work if a child grows up with abusive parents (Schwartz, Dodge, Pettit, & Bates, 1997). Offenders are good at recognizing the emotional state of others, and they tend to use it by manipulating others (Lodge, 2014).

Dysfunctional Family

An American educator, Nicolas Ferroni (2014), claims that students whose parents love them come to school to learn, while those who are ignored at home come to school to be loved. It is difficult to disagree with Ferroni because parents are responsible for children’s mental health. Families of child victims of school bullying are characterized by a weak internal structure, which is manifested in the fuzzy personal boundaries of each family member, lack of coordination in the actions of parents, impaired communication, and lack of shared values and ethical standards, which makes it difficult to transfer them from parents to the child. Some studies have found that bullying victims at school were either physically abused at home or witnessed aggressive behavior patterns in the family (Schwartz et al., 1997).

In most cases, a lack of assertiveness and susceptibility to other people’s influence are sourced from a dysfunctional family. The following characteristics can describe this type of family (Nittle, 2023):

- Low income.
- Unemployment of one or both parents.
- Alcoholism.
- Divorce.
- Bad relationships between parents and conflicts with other relatives.
- One or both parents shout at their kids, insult them, or hit them.
- Indifference to kids and lack of support.

Therefore, since kids do not feel comfortable at home, they prefer spending their time at their friends’ houses or wandering around the streets. Moreover, facing double bullying at school and home, they stop going to school

and huddle with similar outsiders. Furthermore, they might start bullying younger or physically weaker kids (Lodge, 2014). As a result, they might join the ranks of young criminals. In my childhood, I knew some co-students who got excellent grades in elementary school, and some years later, they ran away from home for the reasons mentioned above. Some of them even ended up in prison.

I worked in a boarding school, starting my career in the 1990s, and taught endangered children. Some of my students were immigrants from the former Soviet Union whose parents faced severe difficulties in the new country and neglected their children's needs or practiced physical punishment. Not all the kids were from dysfunctional families, but they were taken to boarding school because they felt lonely and not accepted at school—therefore, they decided to study with other new immigrants. Others ended up there because it was a way of rehabilitation after hospitalizing due to depression. I noticed that some months later, their grades significantly improved with the help of psychologists and tutors, and they felt more assertive in the classroom.

Emotional and Physical Problems and Their Consequences

Preventing and Tackling School Difficulties

The education system affects a particular school class and individual children through teachers. It is crucial to observe the child in the learning process. It is vital to know how one education system differs from another. It is essential to understand that the immaturity of the child's body and the immaturity of the child's brain can prevent him from mastering a particular program. Problems caused by the physiological characteristics of the activity of the brain, as a rule, cannot be compensated only by measures of pedagogical and psychological influence, and clinical assistance is also required in such cases (Cleveland Clinic, 2023).

In those cases, when it comes to the inability and unwillingness to obey the existing requirements, educators' efforts need to be aimed at creating a positive attitude towards the rules, developing educational motivation, actualizing the need to be accepted, and, possibly, restructuring the entire system of norms and rules of conduct (Gelb, 2018). This may require a long time and deep joint work of the children themselves, their parents, the homeroom teacher, and the psychologist.

All children are different. One will have one problem, another will have another, a third will have a third, and so on. Many psychologists divide children into the "right hemisphere" and "left hemisphere" (MacDonald, 2018). It is believed that they should be taught in different ways. Nevertheless, I have been researching for 30 years how the brains of children of different ages function, and I can say with all responsibility that no children would "work" only with the right hemisphere or only with the left hemisphere. Both hemispheres need to develop constantly with the help of specific activities suitable for each child, depending on his individual needs.

Thus, some children are excellent at some subjects but not very good at others. Even kids without dyslexia or dyscalculia are ready to read aloud or give presentations in front of the class, which may be a sign of social anxiety. "The higher the trait anxiety, the higher the state anxiety during a speech task, and the more negative evaluative thoughts the children experienced." (Van Niekerk et al., 2017, p. 490). Furthermore, they may write excellent compositions or submit excellent works in math or physics, but when the teacher asks them to do a task on the board or answer orally, they get a blackout, which causes extra stress. As a result, stress affects the child's emotional state and causes depression and many more diseases.

Teenage Depression

A lack of motivation to learn results from the various difficulties mentioned above. Failures, conflicts, frequent criticism of teachers and parents, and a constant feeling that he is worse than others often lead to isolation and depression, which is more often diagnosed in junior high and high school students than in elementary school ones (Thapar, Collishaw, Pine, & Thapar, 2012). In this case, it is necessary to understand the primary problem and pay special attention to its solution.

Adolescence is a stage of life that is accompanied by numerous physical, emotional, psychological, and social changes (Zaky, 2016). Unrealistic academic, social, or family expectations can create a strong sense of rejection and lead to deep disappointment. When things go wrong at school or at home, teens may overreact to these changes and stresses. Many young people feel that life is unfair and feel stressed and confused. It is even worse when teenagers are bombarded with conflicting messages from parents, friends, and teachers. Today, they see all the good and bad life offers on television, in magazines, on the Internet, in school, and on the street. When a teenager's mood day after day can disrupt his social functioning, this may indicate a serious emotional or mental disorder that requires special attention—adolescent depression (Cleveland Clinic, 2023).

Based on studies, it has been proven that disturbances in neurotransmitter activity in the neurons of the limbic system of the human brain play an essential role in the pathogenesis of depression, for example, the release and interaction with the postsynaptic cleft receptors of mediators such as serotonin, dopamine, histamine, norepinephrine, and glutamic acid changes (Antropov, 1999). Micro- and macro-scopic changes and failures in some brain structures also accompany depression. Also, the disease leads to a change in neuroplasticity, which serves as the basis for the further development of depression (Hasler, 2010).

There are many hypotheses about the reasons why the disease develops. The main one is the monoamine hypothesis, based on the theory that "depression develops due to a lack of serotonin, dopamine, and norepinephrine in the synaptic cleft." (Hasler, 2010, p. 155). The second hypothesis is the theory of excitotoxicity. It is based on the cytotoxic effect of excess excitatory glutamate and aspartate (Ferrero et al., 2005).

One of the symptoms of depression is slow thinking. It can be confused with ADHD because students are often unfocused, and their inability to concentrate on the lesson's material causes difficulty remembering information and doing tasks. Also, the slowing down of thinking is reflected in the patient's speech—frequent and long pauses appear in the conversation, speech becomes slurred, and mostly monosyllabic answers are used (Bapat, 2022). Motor retardation includes slowness. It manifests itself in a lack of strength to perform even the most elementary tasks, such as getting out of bed, washing, and changing clothes. Facial expressions become thinner and more monotonous. The most common facial emotion is disappointment and longing (Hasler, 2010).

All disorders are interconnected. Thus, the human body has a direct connection with its psyche. When mental activity is suppressed, and the psyche becomes vulnerable, the body does not stand aside when a difficult situation arises (Antropov, 1999). It reacts to stress on a biochemical level, and such reactions are manifested in the form of various kinds of bodily suffering. If the stress lasts too long, then changes begin to occur in the body, affecting the organs' functioning, and psychosomatic diseases come (Rasheed, 2016).

Psychosomatics

Antropov (1999) claims that the emergence of psychosomatic disorders in childhood and adolescence is associated with the period of ontogenesis, morphological and functional state, weakness and overstrain of individual organs and systems, their congenital or acquired inferiority, the predominant nature of the mental or

affective response, as well as the personal characteristics of children and adolescents. Thus, depression leads to psychosomatic disorders of the nervous, digestive, motor, and endocrine systems and skin problems, such as allergic reactions (Rasheed, 2016).

Homnick et al. (2000) claim that too often colds, acute respiratory viral infections, runny nose, stuffy nose, cough, and bronchitis are psychosomatic diseases. As a remedial teacher, I have noticed that kids from families with a nervous atmosphere get respiratory diseases much more often than those with good relationships with their parents. Moreover, poor contact with close relatives, internal dissatisfaction, the inability to change anything, and suppressed anger cause depression and its consequences. On the one hand, toxic parents punish children who get low grades or do not want to be obedient; on the other hand, they care for them when sick.

Alternatively, some children have psychosomatic problems with the gastrointestinal tract, such as stomachache, diarrhea, and nausea, which are the consequences of fear (Antropov, 1999). Thus, many years ago, I had a pupil who missed many lessons due to the aforementioned problems in the morning. Her parents said that she did not have such symptoms at the weekend or during school holidays—perhaps it was a school fear since she was afraid to get low grades. The disorder was over after she had had a course of psychological treatment. Cherry (2023) claims that stressed children often get sick because their bodies try to eliminate the unpleasant as soon as possible.

Ways of Overcoming Learning Challenges

The Role of Parents

Many parents want to be proud of their child's success, and they dream that he gets only good grades at school. Nevertheless, what efforts should the child himself make for this? Can he always meet their expectations? High demands, especially when combined with various punishments for not meeting them, often give the child the feeling that parents love and accept him only when he is successful and has something to be proud of. And then, if the child can fulfill the requirements of the parents, he learns well at any cost, including the price of lack of sleep, refusal to communicate with friends, hobbies, etc. This can lead to overwork, nervous breakdowns, depression, fear of making mistakes, and other negative consequences (Nittle, 2023).

It is even sadder if the child cannot fulfill the parents' requirements for various reasons: lack of abilities, insufficient willpower to sit for hours on textbooks, etc. For instance, if the father failed to be an outstanding mathematician, musician, artist, or football player, he makes his son work hard and do what he could not do at his age. The boy tries a lot but fails. Then, faced with failure, the child is acutely experiencing it. Parents often exacerbate the situation with their criticism and discontent. All this is repeated occasionally; the child feels helpless and gradually ceases to believe in himself. As a result, the child loses interest in learning, refusal to do homework, absenteeism, double diaries (for parents and for school), etc. Thus, feeling stressed at home, children want "to be adopted" by their teacher or their friend's parents (Skavitina, 2021).

Many parents try to help their children to help them to do their homework, but not all of them know how to explain the material. Others hire private teachers, but it does not always work well, especially if the child is not interested in math, physics, or English and does not want to work hard to have excellent grades. They can overcome learning difficulties caused by social reasons and progress if they get on very well with their tutors and schoolteachers. Only trusty relationships can prevent low grades and deviant behavior in teens (Zaky, 2016).

The Role of Educators

Unlike dyslexia, dysgraphia, dyscalculia, and other learning disabilities, depression and psychosomatic diseases are treated successfully (Mao Clinic, 2023). While a mild form of depression is successfully treated with medication or a clinical psychologist's help, the severe form requires hospitalization. Therefore, educators, social workers, psychologists, and medical practitioners can help children if they recognize the problem before it is too late.

First, teachers must create a friendly atmosphere in the classroom so that each student will feel comfortable there. Moreover, the teacher's relationship with teenagers should be built on courtesy and respect: if students trust their teachers, they will not be afraid to ask for help. Neither will they be afraid of making mistakes during the lesson and being mocked by their classmates. One of the most essential responsibilities of the homeroom teacher is preventing bullying that causes a lack of motivation to study (Scott, 2022).

Failure and backwardness are interrelated. Poor progress results from the struggle (Kamal & Bener, 2009). If a student still struggles with one or more subjects, there are some ways to help. Depending on the type of challenge in learning, appropriate educational work is carried out with students according to the level of difficulties in specific subjects. Overcoming the episodic failures is facilitated by consultations with the teachers or other students who know the material well. I have noticed that, as a rule, they are eager to be helpful to their co-students who have missed some lessons due to sickness, to overcome the persistent difficulties in one or more subjects and improve the teaching methods and development of students' thinking (Wenz-Gross et al., 1998). When teaching students in a heterogeneous class, teachers must differentiate the task depending on the level of the students and provide them with activities to develop their interest in learning and fill the gaps in knowledge.

Conclusion

Children need to understand and assimilate a growing flow of information every day. Adults introduce new methods of early development, increase the requirements for educational programs, and come up with more and more complex tests. Children not only have to live and experience all this but also adapt to constantly changing conditions, get on with their classmates and teachers, and at the same time try to learn about the world around them. Overloads often do not go unnoticed, and the child's psyche might not withstand constant stress. As a result, low grades, misbehavior, school bullying, and parents' abuse are not long in coming. As a result, children struggle at school more and more, and finally, they get depression and other psychosomatic disorders.

School difficulties have enormous social consequences, manifested not only in limiting the choice of profession due to functional illiteracy. However, these are also the difficulties of social adaptation because a person who has not found himself or mastered his profession cannot become a full-fledged member of society. Multiple stressful situations cause depression, which causes psychosomatic disorders, such as neurological and heart diseases, high blood pressure, high cholesterol, digestive, motor, and skin problems, and many more. Nevertheless, such symptoms disappear when children change their environment; for instance, they transfer to a different school or leave their abusive parents and move to loving and caring grandparents.

A supportive home environment equips students with the emotional stability to focus on learning, while those lacking this foundation often seek affirmation and love within the school's confines. This underscores the multifaceted role of schools and educators, necessitating an education system that integrates both academic and socio-emotional learning, as they are equally pivotal in nurturing a student's holistic development.

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