

Case Study

## Intellectual Ability and Subjective Well-Being of Slow Learner: A Case Study with Academic and Behavioral Intervention

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### ABSTRACT

**Introduction:** It is degrading to label a child as “Slow Learner”. However, in order for them to learn and develop, they require additional support and specialized instructions. Although they may learn slowly, this does not necessarily indicate that they are unable. **Objectives:** This paper is an attempt to explore the significance of academic and behavioral intervention for slow learner. **Methodology:** This is based on Case Study of a 14 years old boy. It includes case records, mental status examination, Raven’s Standard Progressive Matrices developed by J.C Ravens (1938) and Subjective well-being scale developed by Ed. Diener (1984). The study includes pre-test and post-test scores on the tools and implementation of the intervention for the period of two months. **Conclusion:** The study and overall analysis reveals that there is significant improvement in the intellectual ability and subjective well-being of the slow learner after implementation of academic and behavioral intervention. It also reveals that integration of Art therapy, Music therapy and Graphical Organization improves cognitive ability, attention, memory, behavioral and social skills.

**Keywords:** Case Studies, Subjective Well-being, Slow Learner, Art therapy, Music therapy and Intervention

One of the most crucial elements of growth and development, not just for adults but also for children, is wellbeing. Mental, behavioral, emotional, and social functioning are all components of well-being in addition to physical health and development. Family hence has an impact on a child's wellbeing to some level. The way a country takes care of its children—their health and safety, their material security, their education and socialization, and their sense of being loved, valued, and included in the families and societies in which they are born—is the real test of its standing, according to UNICEF (UNICEF, 2007). In the recent years, awareness regarding mental health and well-being has increased among people. However, in case of children with slow learning abilities, the attitude and awareness still needs to improve.

Well-being of children is determined by physical, mental, emotional and social aspects and it is affected by developmental stages, family environment, parenting style, care giver, school, peer group, relationship with teachers and society. Therefore, parents hold an important role in the growth and well-being of children. A survey report on child well-being

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stated that India needs to invest effort and resources in child well-being (India Child Well-being Report, 2019).

It is observed that in the present scenario, either due to situational demands, financial stability and personal choice both married couples prefer to work as a professional. However, it has both positive as well as adverse impact in their personal life, family life and professional life and its significance is not limited to them alone but it directly affects over all well being of their children. A study revealed that culture, expectations and knowledge along with experience plays a crucial role in growth and development of a child. (Isidienu, 2017).

A key factor in a child's overall emotional and psychological health is their relationship with their parents. According to the Attachment Theory in one study. It was proposed that children have a natural need to bond. It helps to guarantee that the youngster is taken care of and protected. Youngsters who experience care and assistance on a regular basis are more likely to adopt a secure attachment pattern. As a result, children who suffer from mental illness have poor mental health (Bowlby, 1969).

Training, special education, therapy sessions, a supportive family environment, and parental advice can all help to enhance it. A study provided evidence that a child's home environment, educational background, and social environment all have a significant impact on their mental health (Hussein, 2009). This demonstrates how important and beneficial it is for parents and educators to provide the highest level of care, attention, and vigilance in order to promote good mental health (Aly et al., 2009) Earlier there was a tradition of joint family in India where the entire family plays the role of support system to a child from infancy stage to the later adulthood. This part is missing in the present generation as most of the couples preferred to live in nuclear family. This has led to the behavioral, emotional and psychological problems in children.

One of the biggest challenges faced by parents is to have slow learner children. According to the APA, slow learner means a child with below average intelligence. Slow learner is also defined as a child who is not successful in learning because of his minimum cognitive n psychological abilities. It requires more time to train a slow learner as compared to other children who have intact intellectual ability. It was reported that Developmental milestones including speech, motor abilities, and social interactions may be delayed in slow learners (Aziza, 2023).

Slow learner children have difficulty to retain topics, immature social behavior, and difficulty in the identification of sound, often have difficulty in visual motor skills, difficulty to express feelings through language (Travancore National School). Slow learners also have weak memory, poor attention and concentration. It is also evident from the pre-operational stage of Piaget's developmental theory in which children between 2 to 6 ages learn to use language, understand concrete logic, and are unable to take the point of view of other people. If parents are not playing active role at the early stages of development then it also results in emotional and psychological space.

A study has defined slow learner as a child who is very retarded in basic subjects and hence, they need special assistance (Chauhan, 2011). The IQ of slow learner ranges between 70 to 85. However, it was reported that slow learning children are divided into a group of

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backward in which IQ ranges from 67 to 89 a sub normal group in which IQ ranges from 90 to 100 (Peatling, 2011). It is important to understand that slow learner children are not mentally disabled, they just need unique treatment mainly in education and skilled activities.

### *Causes of Slow Learning:*

There are following factors that could cause the process of slow learning they are mentioned below:

- 1. Poor health:** It is mostly observed that children with slow learning have poor physical health because they are careless about their physical health. They sometimes lack in understanding the importance of physical health for their personal and academic benefits.
- 2. Developmental stages:** During prenatal period if mother was not taking proper care of her mental and physical health, this in turn would adversely affect the sensory and cognitive ability of the unborn child. In a study it was reported that adverse prenatal experience are a risk for early childhood and later adulthood stage (Dawes et.al, 2015).
- 3. Mental ability:** It is observed that children with slow learning have poor attention, poor memory and impaired cognitive ability. They also have defective vision because they are unable to understand and relate well with language and concepts.
- 4. Emotional management:** Studies have reported that slow learners are not abnormal, but because of stereotypes against slow learners society has negative attitude towards them, that results in worst emotional condition. A neglected child feels unsecured and rejected. It may not just affect his emotional development but also hamper social skills.
- 5. Parents and care giver:** It is one of the most important factors for slow learners. The education , both parent are working, quality time spent with children, parental well-being and mental health, parents having any kind of addiction or drug abuse , family environment , parenting style and relationship among both parents is very crucial not just for slow learners but for any child. It is difficult to identify slow learners prior to school admission. Trouble in understanding their child's conduct with unmet expectations might expand hazard of slow learners for low quality parent child interaction and connection (Fenning et al., 2007). Parenting can play a part in encouraging adaptive abilities and socio emotional development of slow learning youngsters. (Guralnick, 1997).  
The care giver needs to have emotional connection with the child which the child may experience. The role of care giver is not just to fulfill basic need but to also develop self concept of the child with patience, strategy and understanding. They play a vital role in developing overall well-being of slow learners.
- 6. School and Teacher:** This is another very important aspect for slow learners. Prior to NEP, 2020, Education and mental health were different concepts and education was emphasized at the cost of mental health. The NEP, 2020 has established a connection between education and mental health in a very strategic way from foundational to secondary education system.  
The school has fixed curriculum and a big number of students to work on. The goal of most schools is to produce good result and multitalented students. This becomes challenging for children with slow learning ability. Students with marginal scholarly working require more practice open doors when contrasted with students of normal capacity (Shaw, 2000). All the schools don't have facility for special educator and trainers for slow learners and special children.

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It is also a complicated task for teachers as their focus is mainly on completion of syllabus and gives good result. No matter what their impediments, slow learners do learn. They can gain progress in the classroom if the educating and materials utilized are at their suitable degree of learning. To some extent such practices are good but for children with slow learning ability, it is double pressure for them and for their parents also. In such cases either students drop out from the school or they just struggle with the system and this gets worst for their well-being.

7. **Peer Group:** Children with slow learning abilities are bullied for they don't match with other children. They feel neglected and sometimes they don't get good opportunities in the class due to such differences.

These are the causal factors, but they can also work as remedial factors provided they work in a supportive way for slow learners.

### *Objectives of the Study*

1. To analyze the Mental Status Examination of Slow learner and prepare the overview on the basis of case records, interaction, training and counseling sessions.
2. To analyze the significance of academic and behavioral intervention plan in intellectual ability and subjective well-being of the slow learner.

## **METHODOLOGY**

The method of assessment was case study method. This method provides entire details about early life, childhood, family background, education and peer group. Data was collected through case records, interaction with parents and special educator, questionnaire and mental status examination. This study followed observation based on counseling sessions, training and performance. The duration of the study was two months.

### *Sample*

The case under the study was taken from ASMITA Centre for Slow Learner and Mental Health Care, Lucknow.

### *Tools*

The study was conducted by using Mental Status Examination, Case History Record, Training Kit, Raven's Standard Progressive Matrices developed by J.C Ravens (1938), and Subjective well-being scale developed by Ed. Diener (1984).

### **Raven's Standard Progressive Matrices (RSPM)**

The non-verbal mental age (MA) of children is frequently evaluated with the RSPM. The sixty diagrammatic problems that make up the RSPM are arranged into five sets, A, B, C, D, and E (Lovett et al., 2007; Raven et al., 2000). Each set consists of twelve items. The client was asked to select the missing part from six or eight options given below each matrix. A participant's score is the number of correct answers, ranging from 0 to 60. The objects are arranged in sets that increase in difficulty over time. Easy items start each set, and then progressively harder ones follow (Jensen, 1980; Raven, 1941; Raven et al. 2000). The subject must choose the optimal completion answer from a range of options for each item, which consists of a single missing cell in a matrix that is always at the lower right corner (Jensen, 1980; Lovett et al., 2007; Raven, 1941)

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### Subjective well-being Scale (SWBS)

The Subjective well-being Scale was developed by Ed. Diener in 1984. Traditionally, scales initially developed for use in adult samples were adapted for use with children. The scale consists of eight statements that measures happiness, positive and negative effect of an individual. The responses consist ratings from 1 strongly disagree to 7 strongly agree. The possible range of scores is from 8 (lowest possible) to 56 (highest possible score). A high score represents a person with many psychological resources and strength.

### *Academic and Behavioral Training Interventional Plan*

It is important to understand that slow learner children are the part of society just like others. It is desired to have best academic and behavioral training and intervention of slow learners. The following steps were undertaken to implement the academic and behavioral training of the child:

- 1. Meeting with parents and tutor:** The tutor of the child was guided to consider that child needs a little flexible teaching method. The tutor was asked to teach topics in small units. Parents were suggested to spend some quality time with the child daily. They were also suggested to communicate with the schools and consider the condition of the child.
- 2. Daily good behavior exercise:** The Trainer of ASMITA centre introduced few “Good model behavior” to the child through role play activities. The same activities were suggested to parents also and practice at home with the child. Some basic social skills were exercised before the child like, “How to greet elders” , “How to ask for something from anyone” etc. These activities were designed to assist slow learner in resolving issues with motivation, poor initiative taking, and interpersonal communication.
- 3. Basic Academic Training:** Training of reading English and Hindi, puzzle solving activities to upgrade mathematical and logical understanding were exercised in the centre. It also included written dictation.
  - (a) Mnemonics Strategy:** They are mental strategies to improve one’s memory, basically long term memory and furthermore known to accelerate learning.
  - (b) Graphical organization:** A Graphical organizer is a visual portrayal that depicts the relationship among logic, terms and thoughts inside linear text. It changes over straight text into non - linear visual format. Graphical organizers are additionally termed to as information maps, concept maps, story maps, mental coordinators, advance coordinators, or concept charts. The subjects like science, social science were covered under Graphical organization.

The same strategies were also guided to the tutor and the child was monitored during the training through observation and performance.
- 4. Art and Puzzle Solving Activities:** The child regularly exercised Mandala drawing and color book and puzzle solving activities which ranged from easy to difficult as per potential of the child. It aimed at improving concentration and attention of the child.
- 5. Music Therapy:** Specific raga based songs were exercised with the child to enhance his self concept and develop interest with focus. Songs like basic sargam “Sa re sa re ga re ga ma ga.....”, “Humko munn ki shakti dena – Rag Kedar”, “ Vande Matram..- Rag Desh” etc.
- 6. Inter group activity-** To enhance social interaction; child was rewarded to communicate in the group with other children of the centre.

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- 7. Weekly assessment:** At the last working day of the week, overall assessment of academic and behavioral performance was done.

### *Procedure*

Prior to the commencement of this intervention program, written informed consent was sought from the parents and tutor for slow learner. Initially, a baseline assessment (pre-test) of intellectual abilities was conducted. The intellectual abilities of the slow learner were evaluated using the RSPM before any treatments were implemented. Prior to the intervention, the parents and tutor were undertaken for counseling session. The case record was also analyzed and the mental status examination was prepared.

In the second step, the academic performance was analyzed prior to the implementation of the intervention. In the third step, the child was exposed to the academic and behavioral intervention plan for a period of two months for five days/week and three hours/day in a mainstream room set up which was inclusive of different abilities level. At fourth step, after completion of the intervention period, post –test of Intellectual ability and Subjective well-being was taken through RSPM and Subjective well-being scale respectively. The result was prepared on the basis of comparison between pre test and post test scores.

## **RESULT AND DISCUSSION**

The strategies used under academic and behavioral intervention were found to be effective in enhancing academic performance and awareness for subjective well-being of the child. Prior to the implementation of the intervention plan, the mental status examination of the child was prepared on the basis of observation, counseling session and case records. The reports of the mental status examination represented that SHO, a 14 yrs old boy. He came from a Hindu middle class family and educated up to VIII standard. He was not responding well when he came to ASMITA. He started coming to ASMITA one year back with the chief complaints as mentioned by the informant: mood swing, lost in self, attention deficit, lack of communication, poor academic performance and behavioral issues. Mild mode of onset, with continuous course of illness and progress of illness was fluctuating. No record of family history of psychiatric illness was found in patient's family.

The mental status examination was followed by the pre test of intellectual ability by Raven's Standard Progressive Matrices and Subjective well-being by Subjective well-being scale. In the next step academic and behavioral intervention was exercised for two months followed by the post test of intellectual ability by Raven's Standard Progressive Matrices and Subjective well-being by Subjective well-being scale. The findings indicate an unexpected improvement in the intellectual ability, academic and behavioral response. It also indicated slight increase in subjective wellbeing scores of the student.

Table 1 reveals that there is significant difference between pre-test scores and post-test scores of the slow learner. It also reveals that there is significant improvement in the intellectual ability and subjective well-being of slow learner after the implementation of academic and behavioral intervention.

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*Table 1 shows the pretest and post test scores of the Slow Learner on Raven’s Standard Progressive Matrices and Subjective well-being scale.*

<b>Tools</b>	<b>Pre test Score</b>	<b>Interpretation</b>	<b>Post Test Score</b>	<b>Interpretation</b>	<b>Difference of scores between Pre Test Scores and Post Test Scores</b>
<b>RSPM</b>	37	Below Average Intellectual Ability	45	Intellectually Average	8 Scores i.e. Improved from Below Average to Average Intellectual Ability
<b>SWBS</b>	16	Slightly dissatisfied with life	21	Somewhat satisfied with life	5 scores i.e. improved from slightly dissatisfied with life to somewhat satisfied with life.

*Note: RSPM: Raven’s Standard Progressive Matrices; SWBS: Subjective well-being scale. The interpretation of the scores is done with the Manual of both the instruments.*

This further reveals that there was improvement in the problem-solving skills, pattern perception and logical thinking after the intervention based exercise. It indicates improvement in the cognitive ability and learning ability of slow learner. His cognitive ability about object, shape, size and its use was improved. There was slight improvement in attention also. His parents were also very alert about the progress of the student.

The findings also revealed that there was slight improvement in positive effect, happiness, life satisfaction of slow learner. Intervention based activities taught the student how to ask for what he wanted, accept it when he gets it, express thanks, and deal with setbacks. Furthermore, it appeared that the multilevel interventions had a positive impact on the receptive and expressive communications skills, as evidenced by the observation of empathetic behavior—that is, the ability to comprehend the thoughts, feelings, and emotions of others—as well as the ability to recognize facial expressions and maintain appropriate eye contact. Additionally, by helping the student comprehend the model conduct that protects them from harm, these interventions contributed to their increased sense of safety; they also seemed to be more morally conscious and proud of their own successes.

It is fair to state that the student seemed to have maximum benefit of this intervention. The exercises like Good model behavior through role play helped him to learn some basic behavioral and social skills to communicate with people. This model helped him to increase safety sense and ways to protect him. At the same time the academic interventions through mnemonics and graphical representation also provided better learning opportunities that also enhanced his self concept and confidence. Project based learning effectively helps as learning model to cope with slow learners (Hartini et.al, 2017). This also helped in speed of learning. Music therapy improves academic functioning of slow learners (Sharma. M, 2012).

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Moreover, similar feedback was obtained from his tutor and parents. As reported by parents, his classroom performance was also improved a little bit. His school teachers had also observed some improvement in his behavior. As reported by his subject teachers, he has started to respond in class questions. His handwriting has also improved. The student has started interaction with his classmates in better way.

The implication of Art therapy and Music therapy had intense impact in enhancing the attention and concentration of the student. It has also developed interest and positivity in the student. Art therapy improves cognitive ability and develops divergent thinking of slow learners (Case study, Art therapy Resources, 2023). Similar findings were reported that Art therapy improves both short term and long term memory of slow learners and it also improves their confidence (Blessy et.al 2024).

Integration of active and passive Music therapy with education has affected memory and well-being of the slow learner. It was reported that music brings change in brainwave activity long after therapy has ended, allow the brain to change speeds more quickly on its own. Similar findings have been reported that when it comes to spelling, math, writing, cognitive skills, working memory, auditory attention, and rapid auditory processing in learning challenged children, music therapy—whether used in conjunction with or apart from cognitive therapy—is an effective auxiliary component of rehabilitation therapy (Mina, Darweesh et.al, 2021).

This is also important to note that counseling sessions of tutor and parents at regular intervals have also helped in multidimensional way. Meanwhile counseling sessions of the student twice in a week were effective for his overall well-being.

### CONCLUSION

Slow learners are not mentally retarded they just need extra effort to learn. Every child is God's gift and it needs good care and guidance at every stage of development. The finding of the study indicates that the academic and behavioral interventions were very effective in enhancing the intellectual ability and subjective well-being of slow learner. The study also reported that academic and behavioral intervention also helped to improve the academic and social skills of slow learner.

Additionally, it also reveals that integration of Mnemonic strategy, graphical organizer, Art therapy and Music therapy in intervention improves cognitive ability, organized thinking, learning, memory with other intellectual abilities and social skills. The findings also reveal that implementation of intervention showed significant improvement in subjective well-being of slow learner that was reflected in improves life satisfaction, happiness and positivity. The present study has both practical and theoretical implications for schools in education sector, child psychologists, counselors, family counseling and policy makers.

### *Future Direction*

The present study can be administered on small group of slow learners to study the significance of intervention plan. The present study is confined to explore the significance of intervention in intellectual ability and subjective well-being; however, it does not examine the cause and effect relationship between intellectual ability and subjective well-being of slow learner. Therefore, further studies may be conducted to analyze significant difference and relationship between intellectual ability and subjective well-being of slow learners. The



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duration of intervention was limited for two months; therefore studies may be conducted to analyze the effectiveness of intervention in long duration like four to six months or more. Similar study can be conducted on slow learners between age range 6 to 11 years.

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### ***Conflict of Interest***

The author(s) declared no conflict of interest.

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