



The Extent of Depression Symptoms among Learning Disabled Students from their Teachers' Perspectives

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Abstract

The current study aimed to identify the extent of the prevalence of depression symptoms among students with learning difficulties from their teachers' points of view in Jerash Governorate. To achieve the objectives of the study, questionnaires were distributed to the teachers of a sample of (72) male and female students with learning difficulties in the third and fourth grades enrolled in resource rooms. The members of the study sample were chosen from 6 schools: (3 boys' schools and 3 girls' schools) during the second semester of the academic year 2016-2017. After conducting the statistical analysis, it was evident that the level of depression among students with learning disabilities was average, and that there were no statistically significant differences at statistical significance ($\alpha \leq 0.05$) in the level of depression among the students with learning difficulties depending on the variables of grade and gender. Recommendations are made to provide humanitarian initiatives aimed at reducing depression among students with learning disabilities. Additionally, provision should be made to prepare the staff of educational institutions to deal with students with learning disabilities.

Keywords: Academic grade variable, Gender variable, Jerash Governorate, Prevalence of depression syndromes, Resource room, Students with learning difficulties, Teachers' points of view.

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Contribution of this paper to the literature

The current study is distinguished from previous studies by addressing the grade variable by applying the study instrument to students of the third and fourth grades of basic education. As these students represent the first stage of basic education, this study is an attempt at early detection of the existence of a relationship between the manifestation of learning difficulties and the symptoms of depression. Also, this study attempts to develop a framework to measure the presence of such symptoms, which can be used in conducting further studies.

1. Introduction

The acquisition of academic skills is linked to a student's behavioral and social abilities (Khasawneh, Damarah, Al-Harsh, & Al-Khawaldeh, 2016). Failure to succeed in school is often associated with stress and depression (Al-Waqfi, 2012) which places students with learning disabilities at an increased risk, as their emotional development is different from their peers'.

The National Joint Committee on Learning Disabilities defines learning disabilities as a heterogeneous set of disorders that appear as significant difficulties in acquiring and using the ability to listen, speak, read, write, reason, or use mathematics. The disability arises from an internal disorder within the individual, is assumed to be caused by a dysfunction of the central nervous system and may manifest during different stages of life. It may be accompanied by problems with self-regulation behaviors, social perception, and social interaction, but these are not learning difficulties in themselves. In addition, learning difficulties may coincide with and be exacerbated by other disabilities (e.g. sensory disability, mental disability, serious emotional disorders) or with specific external influences (e.g. cultural variations, inadequate or inappropriate teaching (Khasawneh et al., 2016).

One aspect of note in the above definition is that learning difficulties may be accompanied by problems in social interaction. Previous studies (Al-Qamish & Al-Ma'ayta, 2012; Al-Waqfi, 2012; Khasawneh et al., 2016) have pointed out that scientific evidence indicates that pupils who are non-verbal due to social and emotional problems have a greater tendency towards depression, as a result of the rejection and social isolation that they may go through. Furthermore, a large proportion of this population suffers from verbal abuse. Students with learning difficulties are confronted with both psychological and educational problems in the school setting. This study posits that the academic weaknesses of students with learning difficulties lead to an increase in their depression. The members of this group feel fear and tension when confronted with academic situations that expose their weaknesses, such as dealing with numbers and mathematical symbols, reading and writing, or studying any other subject (Al-Smadi & Al-Shamali, 2017).

2. Study Questions

Any good educational system makes the issue of mental health one of its priorities, as it is a critical element in building pupils' personality. Mental health is therefore embodied in schools' various educational practices. Consequently, this is an effective entry point for achieving education along with its goals and functions.

Previous researchers (Al-Qamish & Al-Ma'ayta, 2012; Al-Smadi & Al-Shamali, 2017) have pointed out that although not all students with learning disabilities suffer from psychological and social problems, they are more prone to depression, social rejection, suicidal thoughts, and loneliness.

Al-Qubtan (2011) and Hallahan, Kauffman, Lloyd, Weiss, and Martyz (2007) also noted that about 30% of students with learning disabilities are officially diagnosed with depression, excessive motor activity, or any other disorder aside from learning difficulties. Many of the studies conducted on this group of students have concluded that they have difficulties with social skills compared to their peers or suffer from emotional or behavioral disorders (Al-Qamish & Al-Ma'ayta, 2012).

To investigate the level of depression among students with learning difficulties, the following study questions were formulated:

2.1. What are the levels of depression among students with learning disabilities from their teachers' point of view?

2.2. Do the levels of depression among students with learning disabilities vary according to the grade (3rd, 4th) from their teachers' point of view?

2.3. Do the levels of depression among students with learning disabilities vary by gender (male, female) from their teachers' point of view? The current study was applied to third and fourth - grade students through the teachers' response. It is because teachers are the ones who follow students academically and continuously throughout the school day in the classroom. Besides, it is the duty of the teacher of learning difficulties to uncover any observations or indicators pointing to any behavioral disorder.

3. Study Objectives

The current study aims to:

1. Identify the average level of depression among students with learning disabilities in the third and fourth grades.
2. Identify whether there are differences in the severity of depression between male and female students.

4. Study Importance

4.1. Theoretical Importance

This study derives its theoretical importance from the fact that it enriches our understanding of the cognitive and psychological aspects of those with learning disabilities, particularly as related to depression. Specifically, an instrument is provided to identify the distinctive indicators of depression among students with learning disabilities.

4.2. Practical Importance

The results of this study will help special education teachers and parents effectively plan to treat depression in those students who are suffering from it, as depression stands as a barrier to students' achievement of academic and social success.

5. Study Limitations

The results of the study are restricted by:

5.1. Academic Limit

This study was limited to students in the third and fourth grades when determining the average level of depression among students with learning disabilities.

5.2. Spatial Limit

This study was limited to Directorate of Education schools in the Governorate of Jerash, including the resource rooms and classrooms of the third and fourth grades (male and female) of six schools.

5.3. Human Limit

This study was limited to a sample of students from the third and fourth grades who were enrolled in public schools, and the results were determined by the responses of the teachers of the resource rooms.

5.4. Time Limit

The study was carried out in the second semester of the academic year 2016-2017.

6. Procedural Definition of Study Terms

6.1. Students with Learning Disabilities

Students who are enrolled in the learning resource rooms for part of the school day in the schools of the Directorate of Education in Jerash Province, and who have been diagnosed using tests approved by the Ministry of Education.

6.2. Resource Room

The resource room is a class in the school, which provides individual educational services to students with learning disabilities enrolled in the school, within educational programs according to the number of classes required by each student.

6.3. Depression

Depression is defined as an emotional condition, either temporary or permanent, experienced by a student with learning disabilities with symptoms of sadness, disability, social withdrawal, feelings of tiredness and incompetency, loss of appetite, insomnia, lack of concentration, and loss of self-esteem. In this study the degree to which the evidence suggests that the number of cases is linked to the use of substances is not known.

7. Theoretical Framework and Previous Studies

Students with learning disabilities that are accompanied by psychological and behavioral disorders face greater challenges than students with learning difficulties alone (Al-Dahini, 2017; Al-Khatib, 2009; Al-Qamish & Al-Ma'ayta, 2012; Al-Qubtan, 2011; Al-Smadi & Al-Shamali, 2017; Ghneim, 2016; Khasawneh et al., 2016; Learner & Jones, 2014; Silver, 2006) and face the below learning and social challenges:

- Difficulty in taking social responsibility.
- Repeated behavior that becomes inappropriate because it is unnecessary.
- Social withdrawal, characterized by laziness and a lack of social contact with others.
- Dependency and increasing reliance on parents, teachers or others.
- A self-view that is negative or displays low self-esteem.
- More prone to depression, social rejection, loneliness, and suicidal thoughts.

One of the emotional and social challenges faced by students with learning disabilities is that they are more prone to depression. Symptoms of depression in students include: physical symptoms such as fatigue, headache, muscle pain, and stomach pain; school absenteeism; poor achievement; complaining about boredom; a lack of interest in playing with friends, and others signs of social isolation; extreme sensitivity to rejection or failure; problems in relationships with others; and increased aggressiveness and anger (Al-Qubtan, 2011; Al-Sarhan, Al-Khatib, & Habashneh, 2003).

Ibrahim (2009) and Al-Zayer (2005) identify a number of factors that are possible causes of depression in school children. Environmental factors include a lack of environmental support for the positive behaviors of the student, when the family is divided about the treatment of the child, a lack of interest in helping the student develop social skills, and academic failure. The organic factors are changes to the brain chemistry, including serotonin and noradrenalin, which contribute to the incidence of psychological depression. Finally, social factors include social misalignment, isolation, family disintegration, discrimination in treatment between children, neglect, the disturbance of the relationship between the parents, and the exposure to shock through sad circumstances and experiences.

Two types of depression can be distinguished (Ibrahim, 2005; Mahmoud & Saber, 2004). The first is an external depression called reactive depression, which is caused by a defect in the ecosystem in which the individual grew up or currently lives, such as the separation of parents, the death of a parent, exposure to physical, emotional or sensory abuse, rejection by friends, or school failure. The second type is internal depression. For this type it is

difficult to identify an external source or specific environmental pressure that caused it, and the mood or psychological state of the individual appears to depend largely on internal processes that appear to be chemical in nature.

Al-Zayer (2005) and Ibrahim (2005) mention multiple psychological theories that can be used to explain depression. The theory of psychoanalysis describes depression as an emotional conflict between the conscious and unconscious mind, characterized by a state of unbalance between instinctive impulses, e.g. love and aggression. On the other hand, behavioral theory sees depression as a result of the individual's experiences with their environment, resulting in abnormal responses and habits that the depressed individual dwells on. The depressed individual loses interest in a wide range of activities, loses appetite, has less interest in sex, and suffers from a decrease in self-esteem. From the cognitive viewpoint, depression is the result of negative cognitive patterns and final mental judgments. The biological theory asserts that emotional experiences affect the chemical activity of the brain. Therefore, feelings, thoughts, and behaviors may change depending on the chemical changes within the brain, and depression essentially occurs due to defects in neurons, or a lack of certain chemicals, or a defect in the reception cells.

8. The Relationship between Depression and Learning Difficulties

As noted by Al-Sartawi, Taibir, Al-Ghazou, and Mansour (2013); Florian (2007); Kavale (2007); Learner (2000); Mercer (2004), one of the hypotheses explaining the relationship between learning difficulties and the psychological state is the existence of a syndrome that combines learning difficulties with other disorders such as depression, whereas other hypotheses posit a causal relationship between the two. These can be summarized as the possibility that learning difficulties lead to a decline in self-esteem and a rejection by peers, or the possibility that poor social relationships lead to lower achievement and an increase in learning difficulties, or the possibility that learning difficulties and deficiencies in social skills arise from the same nervous source, or the possibility that learning difficulties make individuals more susceptible to various mental illnesses. Hence, the obvious challenge in addressing and studying the relationship between learning difficulties and depression is the ambiguous relationship and potential overlap between cause and effect.

The emotional growth of ordinary students differs from that of students with learning difficulties, as ordinary students have experiences of success that help them to develop their self-esteem and to endure frustration. On the other hand, students with learning disabilities have a sense of frustration rather than a sense of achievement due to their repeated failures to master educational tasks, therefore their self-esteem is low, and parents do not feel proud of them, which leads to parents reacting with rejection or over-protection (Al-Qubtan, 2011).

Learner and Jones (2014) stressed that depression among students with learning disabilities is a reaction to the stress and frustration of school requirements, their lack of friends and social interaction, or could possibly be caused by biochemical disorders. The signs of depression they identify include a loss of energy, loss of interest in friends, difficulty concentrating, and a sense of hopelessness expressed by talking about suicide.

A review of previous studies in this field revealed some statistically significant results. One statistically significant difference was in the prevalence of depression symptoms among students with learning difficulties compared to ordinary ones (Alesi, Rappo, & Pepi, 2014; Balouti, 2013; McGillivray & McCabe, 2010; Mercer, 2004). A number of studies showed statistically significant differences in depression symptoms according to the gender variable, with female students showing increased symptoms of depression (Al-Alami, 2010; Al-Qubtan, 2011; Al-Zayer, 2005; Alesi et al., 2014). In addition, the results of some studies revealed statistically significant differences in the symptoms of depression according to the variable of school grade, with students in higher grades showing more depressive symptoms (Al-Zayer, 2005; Schraufnabel, 2003). However, the results of other studies showed no statistically significant differences in depression symptoms attributed to the variable academic grade (Al-Qubtan, 2011; Mercer, 2004).

Based on the reviewed studies, there is a clear case to be made for the existence of a relationship between learning difficulties and depression in some students. The current study distinguishes itself by revealing the extent of the symptoms of depression among students with learning difficulties from the point of view of their teachers, as these are the people closest to them, and who interact with them the most.

9. Study Procedures

The sample community: the sample community consists of all schools under the Directorate of Education of Jerash Province where there are resource rooms for students with learning disabilities. The total number of students in this community numbers 312, while the total number of teachers numbers 20.

Table-1. Distribution of study students among schools and according to the gender and grade variables.

No.	School Name	Grade	Number of Students		Total
			Male	Female	
1	Al-Me'radh Elementary School for Boys	Third Grade	7	-	13
		Fourth Grade	6	-	
2	Sakeb Elementary School for Boys	Third Grade	7	-	15
		Fourth Grade	8	-	
3	Al-Kettah Elementary School for Boys.	Third Grade	6	-	10
		Fourth Grade	4	-	
4	Mixed Elementary Housing Neighborhood School	Third Grade	-	7	13
		Fourth Grade	-	6	
5	Amana Bint Wahab Elementary School for Girls	Third Grade	-	5	12
		Fourth Grade	-	7	
6	Mixed Thaher Assaraw Elementary School	Third Grade	-	4	9
		Fourth Grade	-	5	
Total			38	34	

The study participants: six resource room teachers participated in the study of 72 male and female students with learning disabilities in the third and fourth grades, who were enrolled in the resource rooms.

They were selected from six schools (three boys' schools and three girls' schools) during the second semester of the academic year 2016-2017. The distribution of study students is shown in Table 1. The teachers observed the students and responded to the study instrument.

9.1 Study Instrument

Based on a review of previous studies related to mental disorders, especially related to depression among students with learning disabilities, and in particular (Al-Qubtan, 2011; Al-Zayer, 2005; Alesi et al., 2014; Awad, 2011), a depression measure for students with learning disabilities was formulated.

In its initial form this covered 27 properties, each of which referring to a symptom of depression, and was split into four thematic domains.

9.2. Instrument Validity

The questionnaire was initially presented to ten referees with experience and competence in the field of special education, psychological and educational guidance, educational psychology, measurement, and evaluation, for the purposes of judging its suitability and integrity.

The referees were asked to consider each item on the scale, to what the extent the items fit each thematic domain, as well as the validity and suitability of the scale to measure what was intended. The items were then modified according to the referees' opinions. Only those items that obtained an agreement rate of at least 80% among the referees were adopted into the study.

The structural validity of the scale was extracted by applying the scale to a sample of 30 male and female students with learning difficulties from the third and fourth grades from outside the study sample.

The correlation between the field score and the overall degree of the scale was extracted, indicating that the field measures the same concept measured by the overall grade of the scale.

Table 2 shows the correlation coefficients for the association of each field with the overall degree of the depression scale.

Table-2. The correlation coefficient for each field and the total score for the depression scale.

Number	Domain	Significance level	Correlation coefficient
1	Melancholy and despair	0.01	0.715
2	Physical and motor activity disorder	0.01	0.732
3	Decreased morale	0.01	0.78
4	Emotional dulling	0.01	0.772

Table 2 demonstrates the positive correlation between the domains of the depression scale and the overall total of the scale, as indicated by the significance level (0.01).

After ascertaining the integrity and validity of the content through the referees and the constructive feedback, three items were excluded, and so the scale, in its final form, consisted of 24 items distributed across four thematic domains (see appendix 1) as follows:

- 1- "Melancholy and despair" consists of 5 items, represented by (1-5).
- 2- "Physical and motor activity disorder " consists of 7 items, represented by (6-12).
- 3- "Decreased morale" consists of 6 items, represented by (13-18).
- 4- "Emotional dulling" is composed of 6 items, represented by (19-24).

9.3. Instrument Stability

To ensure the consistency of the instrument, the questionnaire was distributed to a survey sample consisting of 25 respondents from outside the study sample twice, two weeks apart, extracting the Pearson Correlation coefficient of their scores in all domains of the instrument both times.

All correlation coefficients between the two applications were statistically significant both for the questionnaire as a whole and the questionnaire domains, and this indicates the consistency of the instrument for the study. Table 3 illustrates this.

Table-3. Pearson Correlation Coefficients between the domains of the questionnaire and the answers of the respondents in the two test applications:

Domain	Statistical significance	Correlation coefficient
Melancholy and despair	0.00	0.7.
Physical and motor activity disorder	0.00	0.71
Decreased morale	0.00	0.68
Emotional dulling	0.00	0.75
The questionnaire as a whole	0.00	0.72

Table 3 shows that the correlation coefficients between the scores of the sampled individuals in the two test applications of the study domains ranged from 0.68 to 0.75, which are statistically significant values at the level of indication ($\alpha \leq 0.05$). The value of the correlation coefficient between the two applications of the questionnaire as a whole (0.72) is also a statistically significant value which, in turn, indicates the stability of the instrument.

The Cronbach Alpha equation was applied to the first application of the sample items of the questionnaire domains as shown in Table 4. The Cronbach Alpha stability coefficients for the domains of the questionnaire ranged from 0.70 to 0.75, which are acceptable values for application purposes, as the generally held acceptance rate for the stability coefficient is 0.60.

Table-4. Cronbach Alpha stability coefficients for the domains of the questionnaire.

Domain	Stability coefficient
Melancholy and despair	0.70
Physical and motor activity disorder	0.75
Decreased morale	0.77
Emotional dulling	0.76
The questionnaire as a whole	0.79

9.4. Instrument Correction

To analyze the data and answer the study's research questions, a Likert-Triple Scale was applied to the respondents' answers, as shown in Table 5, to provide the arithmetic means of interpreting the survey respondents' answers to each of the questionnaire items.

Table-5. Likert- Triple Scale.

Degree	1	2	3
Approval level	Never	Sometimes	Always

As for the limits adopted by this study to determine the degree of approval with each item statement, three levels were identified (high, medium, low) based on the following equation:

$$\text{Length} = (\text{upper limit of alternative} - \text{minimum alternative}) / \text{number of levels} = (3-1)/3 = 2/3 = 0.66$$

The levels are therefore defined as in Table 6 (Sekaran, 2006) which shows the measure used for determining the level of agreement for use in commenting on the calculated means.

Table-6. A measure of the level of agreement for calculated means.

Mean	Level
1-less than 1.66	Low
1.66-less than 2.33	Average
2.33-3.00	High

9.3. Study Design and Statistical Treatment:

In this study, the descriptive method was used, which included the following independent variables:

- Grade has two levels: third and fourth.
- Gender has two levels: male and female.

The dependent variable in the study was depression. The questions in this study were answered by calculating mathematical averages, standard deviations, and conducting Independent Samples T-Tests.

10. Results and Discussion

In this section the results of the study that aimed at assessing the prevalence of depression among students with learning disabilities are presented, in order to provide answers to the study questions.

The first question was: What are the levels of depression among students with learning disabilities from their teachers' points of view? To answer this question, means and standard deviations of the respondents' answers to the thematic domains of the questionnaire were calculated as shown in Table 7:

Table-7. Means and standard deviations of the respondents' answers to the thematic domains of the questionnaire are ranked by decreasing mean.

Rank	Number	Domain	Mean	Standard deviation	Level
1	4	Emotional dulling	1.87	0.40	Average
2	3	Decreased morale	1.83	0.49	Average
3	1	Melancholy and despair	1.68	0.44	Average
4	2	Physical and motor- activity disorder	1.66	0.39	Average
The questionnaire as a whole			1.76	0.32	Average

Table 7 shows that the means for the respondents' answers as to the level of depression prevalence among students with learning difficulties ranged from 1.66 to 1.87, which is to say that the level across all domains was average. The domain of "emotional dulling" had the highest mean (1.87). In the second place came "decreased morale" with a mean of 1.83. "Melancholy and despair" came third with a mean of 1.68. In fourth and final place was the domain of "physical and motor activity disorder" with a mean of 1.66. The calculated mean of the

questionnaire as a whole was 1.76, which was an average level, indicating that the level of depression among students with learning disabilities was average. This finding may be attributed to the provision of psychological and social means of support for students with learning disabilities, provided by some schools and associations that contribute to providing better conditions for them, although it does not help them overcome the depression resulting from their circumstances entirely. Schools and institutions provide counseling, and psychological and educational services that help pupils with learning disabilities adapt to their situation, but the psychological services and guidance provided do not sufficiently reduce the psychological syndromes associated with depression. The finding is consistent with the studies of McGillivray and McCabe (2010), Alesi et al. (2014), Al-Zayer (2005), and Schraufnabel (2003), which found statistical differences in the incidence of depression among students with learning disabilities and their normal peers, with students with learning disabilities having a higher incidence of depression. On the other hand, this result does not agree with the study of Al-Alami (2010), who found that there were no statistically significant differences between those with learning disabilities and their normal peers in terms of the incidence of depression.

To give a more detailed image of the depression levels among students with learning disabilities, the means and standard deviations of the respondents' answers to each item within each dimension of the questionnaire was calculated individually. Tables 8-11 show the results.

Table-8. Means and standard deviations of the respondents' answers to "melancholy and despair" items are ranked by calculated mean.

Rank	Number	Item	Mean	Standard deviation	Level
1	2	He or she feels bored while performing tasks.	1.91	0.71	Average
2	5	He or she feels upset many times.	1.72	0.62	Average
3	4	I notice that he or she constantly feels sad.	1.70	0.65	Average
4	1	He or she always feels miserable.	1.63	0.59	Low
5	3	I feel that he or she will cry most of the time.	1.46	0.54	Low
The "melancholy and despair" domain as a whole			1.68	0.44	Average

Table 8 shows that the calculated means of the respondents' answers to the items in the "melancholy and despair" domain ranged from 1.46 to 1.91. The first place was for item (2) with a calculated mean of 1.91 and an average level. Unlikely, the last place was for item (3) with a calculated mean of 1.46, and thus a low level. The calculated mean for the domain as a whole was 1.68 with an average level.

An explanation for this result could be that most students with learning difficulties will have experienced some painful experiences which contribute to raising the level of depression among them. Additionally, the previous painful experiences they have undergone, especially the experiences of repeated academic failures, and the negative responses of teachers and family members may have contributed to a melancholy type of depression among students with learning disabilities.

Table-9. Means and standard deviations of the respondents' answers to "physical and motor activity disorder" items are ranked by calculated mean.

Rank	Number	Item	Arithmetic means	Standard deviation	Level
1	2	He or she looks tired while performing motor skills.	1.82	0.73	Average
2	3	His or her sleep is disturbed.	1.75	0.63	Average
3	4	He or she wakes up during his or her sleep several times.	1.74	0.58	Average
4	1	He or she shows signs of swaying.	1.72	0.67	Average
5	5	He or she has disturbing dreams.	1.63	0.56	Low
6	6	He or she has a decreased appetite.	1.54	0.60	Low
7	7	I notice that his or her weight is constantly decreasing.	1.40	0.56	Low
The domain of "physical and motor activity disorder" as a whole			1.66	0.39	Average

Table-10. Means and standard deviations of the respondents' answers to "decreased morale" items are ranked by calculated mean.

Rank	Number	Item	Arithmetic means	Standard deviation	Level
1	4	He or she feels hesitant when being asked to answer questions.	2.05	0.72	Average
2	6	He or she is characterized by a lack of productivity in performing the required duties.	1.96	0.65	Average
3	5	He or she loses the ability to enjoy the joys of life.	1.88	0.71	Average
4	2	He or she feels useless.	1.74	0.64	Average
5	3	He or she spends long hours alone.	1.70	0.65	Average
6	1	He or she feels the futility of life.	1.67	0.66	Average
The domain of "decreased morale" as a whole			1.83	0.49	Average

Table 9 shows that the calculated means of the respondents' answers to the items in the "physical and motor-activity disorder" domain ranged from 1.40 to 1.82. The first place was for item (2) with a calculated mean of 1.82 and an average level. Item (7) came last with a calculated mean of 1.40 and a low level. The mean of the domain as a whole was 1.66 with an average level. The reason for this result is that students with learning difficulties have been exposed to unpleasant psychological and physical experiences as a result of teachers' and family members' dissatisfaction about their academic performance, leading to the emergence of such behaviors (fatigue during the performance of motor skills, swaying, and sleep disorders) which, in turn, affect their physical and motor activity.

Table 10 shows that the calculated means of the respondents' answers to "decreased morale" items ranged from 1.67 to 2.05. The first place was for item (4) with a mean of 2.05 and an average level. The last place was for item (1) with a calculated mean of 1.67 and an average level.

The mean for the domain as a whole was 1.83 with an average level. This result can be explained by the definition of depression as a mood that lasts for more than six months, that manifests in a range of social, behavioral, organic, and moral symptoms, the level of which is affected by variables of financial support, social situation, and work. The fear that occurs among students with learning disabilities as a result of their academic inability makes them reluctant to answer questions, and less productive in carrying out the required homework. This, in turn, affects the opinions of those around them, such as teachers and family members; these opinions can negatively or positively affect the morale of students with learning disabilities.

Table-11. Means and standard deviations of the respondents' answers to "emotional dulling" items are ranked by calculated mean.

Rank	Number	Item	Arithmetic means	Standard deviation	Level
1	2	He or she has poor attention during the lesson.	2.14	0.72	Average
2	3	I notice he or she is daydreaming when he or she is alone.	2.04	0.76	Average
3	6	He or she feels that he or she is less capable than his or her colleagues in academic achievement	1.84	0.68	Average
4	4	He or she feels that his or her friends do not love him or her.	1.77	0.71	Average
5	5	He or she isolates themselves and hardly communicates with others.	1.75	0.66	Average
6	1	He or she practices annoying things.	1.70	0.71	Average
The domain of "emotional dulling" as a whole			1.83	0.49	1.87

Table 11 shows that the calculated means of the respondents' answers to the "emotional dulling" items ranged from 1.70 to 2.14. The first place was for item (2) with a mean of 2.14 and an average level. On the other hand, the last place was for item (1) with a calculated mean of 1.70 and an average level. The mean for the domain as a whole was 1.87 with an average level. This result can be attributed to the emotional state which prevails in the minds of students with learning difficulties that leads to feelings of sorrow, despair, and distress. And this in turn leads to the short attention span they have while listening to the teacher, and the constant daydreaming when they are alone. In addition, their low self-esteem, especially in the area of their academic performance, makes them feel that their friends and parents, who are around them, do not like them. Thus, they isolates themselves (McGillivray & McCabe, 2010) acting and engaging in disturbing behaviors.

The second research question was: Do the levels of depression among students with learning disabilities vary according to their grade (3rd and 4th) from their teachers' points of view? To answer this question, the means and standard deviations of the respondents' answers were calculated for all thematic domains of the questionnaire and the questionnaire as a whole depending on the variable 'grade', and an Independent Samples T-Test was carried out on the domains of the study and the questionnaire as a whole according to the variable 'grade'. The results are presented below:

Table-12. Independent Samples T-Test results on the study domains and the questionnaire as a whole depending on the variable 'grade':

Domain	Grade	Mean	Standard Deviation	T	Statistical significance
Melancholy and despair	Third	1.67	0.46	0.32	0.75
	Fourth	1.7	0.41		
Physical and motor-activity disorder	Third	1.70	0.40	0.82	0.41
	Fourth	1.61	0.39		
Decreased morale	Third	1.84	0.48	0.18	0.86
	Fourth	1.82	0.51		
Emotional dulling	Third	1.81	0.4	1.38	0.17
	Fourth	1.95	0.39		
The questionnaire as a whole	Third	1.76	0.35	0.15	0.88
	Fourth	1.77	0.28		

Table 12 shows that there are no statistically significant differences at the level of indication ($\leq \alpha 0.05$) between depression levels among students with learning disabilities in grades three and four, since all T values were not statistically significant. This may be attributed to the fact that the students study in similar schools in terms of educational possibilities and conditions.

Also, all students with learning difficulties show one or more difficulties in the fields of reading, writing, and mathematics (Al-Qubtan, 2011) meaning that they do not differ greatly from each other in their achievement levels,

and therefore their emotional state in the classroom is not affected because frequent academic failures lead them to experience a state of depression. This result is in agreement with the conclusions of (Al-Qubtan, 2011) study that showed no statistically significant differences in the severity of depressive disorders according to the academic grade. However, the result of the current study conflicted with Al-Zayer (2005) conclusions which showed the presence of statistically significant differences in the symptoms of depression among students with learning difficulties attributable to the 'grade' variable.

The third research question was: Do the levels of depression among students with learning disabilities vary by gender (male and female) from their teachers' points of view? To answer this question, the means and standard deviations of the respondents' answers were calculated for all thematic domains of the questionnaire, and the questionnaire as a whole, according to the variable 'gender'. Also, the Independent Samples T-Test was applied to the domains of the study and the questionnaire as a whole according to the variable 'gender', producing the following results:

Table-13. Independent Samples T-Test results for the study domains and the questionnaire as a whole, depending on the variable 'gender':

Domain	Gender	Mean	Standard Deviation	T	Statistical significance
Melancholy and despair	Male	1.65	0.39	0.85	0.40
	Female	1.76	0.54		
Physical and motor-activity disorder	Male	1.79	0.31	1.05	0.33
	Female	1.72	0.40		
Decreased morale	Male	1.79	0.43	1.01	0.32
	Female	1.94	0.62		
Emotional dulling	Male	1.83	0.38	1.37	0.18
	Female	1.99	0.45		
The questionnaire as a whole	Male	1.77	0.26	0.41	0.69
	Female	1.73	0.43		

Table 13 shows no statistically significant differences at the level of indication ($\leq \alpha 0.05$) in the depression levels of students with learning disabilities in terms of their gender. All T values were not statistically significant, and this might be attributed to the fact that the male and female subjects of the study are in similar learning environments.

The psychological factor, which is the repeated stumbles and failings in the academic context, leads to frustration in both male and female students, and this causes depression in students with learning difficulties, compared to their normal peers (Al-Qubtan, 2011; Hallahan et al., 2007). Students (both male and female) with learning disabilities have a sense of frustration rather than a sense of achievement due to the repeated failure to master tasks and therefore suffer from depression regardless of gender. This result contradicted the results of previous studies (Al-Qubtan, 2011; Al-Zayer, 2005) which showed statistically significant differences in the severity and prevalence of depressive disorders according to gender, with female students suffering the greatest effects.

11. Conclusion

The current study examined the relationship between learning difficulties and the psychological and emotional state, specifically manifesting as depression. The study concluded that students with learning difficulties - from the viewpoint of their teachers - have an average level of depression in the four thematic domains of the study. The most frequently observed symptoms were in the domain of "emotional dulling", secondly in "decreased morale", thirdly in the "melancholy and despondent" domain, and finally in "disturbance of physical and motor activity". This average level of depression was not affected by the gender or grade variables. This result suggests that counseling and psychological services provided in schools may help students to adapt to their situation. However, these provided services should focus on reducing the psychological symptoms associated with depression.

Recommendations based on the above results:

1. Work to provide humanitarian initiatives aimed at reducing depression among students with learning disabilities.
2. Prepare the staff of educational institutions to deal with students with learning disabilities to enable them to provide advanced psychological and social support services for this group of students.
3. Set up programs for early detection of mental disorders (depression) associated with learning difficulties among students with learning disabilities in schools.
4. Prepare appropriate guidance and awareness programs for teachers of students with learning disabilities who have depression.

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