

Greek Young Adults with Specific Learning Disabilities Seeking Learning Assessments

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Citation:

Bonti, E., Bampalou, C. E., Kouimtzi, E. M., & Kyritsis, Z. (2018). Greek Young Adults With Specific Learning Disabilities Seeking Learning Assessments. *Learning Disability Quarterly*, 41(2), 119-126 <https://doi.org/10.1177/0731948717727439>

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Abstract

The purpose of this study is to investigate the reasons why Greek young adults with Specific Learning Disabilities (SLD) seek learning assessments. The study sample consisted of 106 adults meeting Diagnostic and Statistical Manual of Mental Disorders criteria for specific learning disorder. Data were collected through self-report records (clinical interview) of adults with SLD as well as from case records that included information on cognitive and learning assessment. The majority of the participants mentioned academic issues regarding different types of academic exams as the main referral reason for learning assessment. SLD females have more possibilities to seek learning assessments compared to males and adults with writing difficulties have more possibilities to seek learning assessments compared to adults without writing difficulties. The reasons for referral in adulthood, at least within the Greek cultural context, are mostly socio-educational and less psychologically oriented. The findings are discussed in terms of postsecondary education services and early screening and identification.

Keywords: young adults; learning assessment services; request referral reasons; specific learning disabilities; types of learning disabilities;

According to the National Joint Committee on Learning Disabilities (NJCLD) specific learning disabilities is a general term that refers to a heterogeneous group of disorders (Cortiella & Horowitz, 2014). They are neurobiological in origin and are characterized by difficulties with one's ability to process, organize, and retain verbal or nonverbal information (Cortiella & Horowitz, 2014; Harrison, Nichols, & Larochette, 2008; Oga & Haron, 2012). The main types of Specific Learning Disabilities (SLD) are impairment in reading, written expression and mathematics (Selekman & Diefenbeck, 2014). The research body of information on SLD focuses in childhood while research in SLD during adulthood is limited within the last three decades (Fafard & Haubrich, 1981; Levine & Nourse, 1998; Polloway, Smith, & Patton, 1984; Seo, Abbott, & Hawkins, 2008).

Even less is known about the reasons an adult chooses to refer for learning assessments and the possible relations between the reasons and other factors, such as gender and type of SLD. Generally, it is known that within the general population females are more likely to refer and make use of mental-health services (Bertakis, Azari, Helms, Callahan, & Robbins, 2000; Eisenberg, Goldenstein, & Golluck, 2007; Hunt & Eisenberg, 2010; Wilkins, Payne, Granville, & Branney, 2008) and they have more positive attitudes toward helpseeking (Mackenzie, Gekoski, & Knox, 2006). However, as far as learning disabilities are concerned, male adults more likely report having SLD (1.8 % vs. 1.5 %) (Cortiella & Horowitz, 2014). In contrast to the general female population, young women with SLD seem to get married and raise children at a younger age and in greater proportion than the males with SLD (Levine & Nourse, 1998).

In fact, as far as we have been able to find, the existing literature does not include research data in the specific area of referral requests by young adults with SLD and their characteristics; and accessing this population poses many obstacles and is a lengthy process.

SLD prevalence in adulthood is difficult to estimate and is subject to considerable variability (Cortiella & Horowitz, 2014; Taymans, 2012). Adults rarely refer to psychoeducational services for learning assessments, given the fact that the vast majority of them have already been referred at a younger age.

However, there is a considerable number of young adults referring to diagnostic centers in order to seek help with their learning difficulties. Research shows that college students who disclosed their disability and received learning support for their SLD were more likely to achieve high grades and complete their studies (Troiano, Liefeld, & Trachtenberg, 2010). Therefore, SLD students who find that their disability is an obstacle in pursuing academic success and have a negative impact in their vocational choices and employment status seem to be willing to receive accommodations.

According to the Greek legislation, students with SLD have the right to be examined orally in all academic examinations through Secondary Education and also in the very competitive National Exams for entrance to higher education. Once in higher education, accommodations are offered so that SLD students are not disadvantaged relative to their nondisabled peers (Anastasiou & Polychronopoulou, 2009). Therefore, these facilitative measures may motivate adolescents and young adults to seek a diagnosis which will ensure their academic success in higher education, a sought-after goal for Greek adolescents and their families. Sociological studies have shown that entrance to higher education has acquired great importance, especially for Greek families following World War II, as higher education studies offer high social prestige (Anastasiou & Polychronopoulou, 2009).

At the international level, education also seems to be central among the population of young adults with SLD as it provides better job prospects (Flannery, Slovic, Benz, & Levine, 2007). Epidemiological studies report that three in four adults with SLD have completed high school (Cortiella & Horowitz, 2014; Ferrari, 2009). Participation in special education support

programs in childhood and the provision of appropriate test accommodations for the high school exit exams (exception from exit exams, reduction of performance criteria for a regular high school diploma) may explain the high rate of adults with SLD who have a high school diploma (Cortiella & Horowitz, 2014; Ferrari, 2009).

Moreover, legislative and educational changes in public policy have increased services for school students with SLD (e.g., learning strategy tutoring, reduced course load, extended time on exams), thus producing more adult learners who are eligible for postsecondary education (Harrison, Nichols, & Larochette, 2008; Hughes & Smith, 1990; Levine & Nourse, 1998; Luftig & Muthert, 2005; Trainin & Swanson, 2005; Troiano et al., 2010). Therefore, despite their persisting academic difficulties, the number of adults with SLD entering postsecondary education is increasing (Cortiella & Horowitz, 2014; Dadeppo, 2009. Harrison et al., 2008; Hughes & Smith, 1990; Levine & Nourse, 1998; Luftig & Muther, 2005; Sanford et al, 2011; Sitlington & Frank, 1990; Trainin & Swanson, 2005).

Another reason for the increase of young adults with SLD entering post-secondary and higher education is that a university degree is becoming more essential for employment success. Generally, adults with SLD tend to be employed at slightly lower rates as adults without SLD. They work in lower status and lower paid jobs (Levine & Nourse, 1998; Seo, Abbott, & Hawk ins, 2008; Sitlington & Frank, 1990; Mellard & Patterson, 2008). Therefore, many adults with SLD are seeking to improve, through postsecondary education, their employment prospects and avoid unemployment or low-paying jobs (Flannery et al., 2007; Newman, Wagner, Cameto, & Knokey, 2009).

Given the fact that young adult students with SLD have difficulty processing words in their mother language, young students with SLD, as expected, report serious obstacles in foreign language learning (Heiman & Precel, 2003; Hughes & Smith, 1990). In foreign language exams there are helpful accommodations (e.g., extended exam time in written

exams) for students diagnosed with SLD. All study programs in higher education institutions in Greece include compulsory foreign languages courses for all students (Law 4009/2011). Thus, young adults who choose higher education inevitably may face the above difficulties in foreign language learning.

Postsecondary education colleges and other academic institutions requiring foreign language courses provide appropriate academic adjustments, accommodations, and learning support to students with SLD. To receive such accommodations, young Greek students may decide to refer for learning assessments in order obtain an official SLD documentation that will allow access to services (Anastasiou & Polychronopoulou, 2009). This seems to be in contrary with research data from their US counterparts who may be unwilling to disclose their disability status and seek academic support (Blanco et al., 2008; Eisenberg, Golberstein, & Gollust, 2007; Newman et al., 2011; Troiano et al., 2010) and receive accommodations in post-secondary education (Cortiella & Horowitz, 2014; Wagner et al., 2005).

Interestingly, research data indicates that more than half of the students who receive special education services during high school do not consider themselves as having a disability by the time their transition to postsecondary education takes place (Cortiella & Horowitz, 2014). Furthermore, college students with SLD seem to compensate for their cognitive and learning difficulties using increased cognitive, metacognitive learning strategies and help-seeking behaviors (Elbro, Nielsen, & Petersen, 1994; Seo et al., 2008; Trainin & Swanson, 2005). They also make conscious efforts to recruit family, friends, educators and public agencies to support their academic attempts (Ruban, McCoach, McGuire, & Reis, 2003; Trainin & Swanson, 2005) without the need to seek learning assessments.

Taking into account the literature findings, this study investigates the reasons Greek young adults seek formal diagnosis of SLD and the possible associations between selfreferrals and gender and type of SLD. The following research questions were posed to address the purpose of this study.

- a) Why do adult Greek students seek formal diagnosis of SLD?
- b) What is the relationship between the reasons young adults seek diagnosis and their gender and type of SLD?

Method

Participants

The study sample consisted of 98 adults of whom 69.38% ($n = 68$) were male, meeting the DSM-IV-TR (American Psychiatric Association [APA], 2000) criteria for specific learning disorders. Their mean age was 25 years ($SD = 6.76$) and all of them were native Greek speakers from urban and rural areas of Greece. All participants had been referred, assessed and formally diagnosed prior to the research study by a State Certified Diagnostic Center for Learning Difficulties of the Psychiatric Department in a University General Hospital in a period from 2012 to 2014.

Approval was obtained from the Director of the psychiatric department where the diagnostic center is situated. This study analyzed data from confidential self-report records collected from adults with SLD through clinical interviews (to obtain background information, developmental histories and demographic data) in the broader context of the learning assessments. Also, data were collected from case records that included information on cognitive and learning assessments. Not all the case records were complete nor fully documented in the above mentioned main categories. Data from partial documented records also were included. A basic inclusion criteria, however, was defined according to the recommendations of relevant studies (Ferrari, 2009); the psychoeducational report had to unambiguously state that an adult met the criteria for an SLD or stated that a prior diagnosis of an SLD was supported by the present results.

For the present study, the SLD diagnosis of the collected case records was given after completion of the diagnostic procedure which was conducted in the daily routine of the Diagnostic Center by a psychologist, an educational specialist, and a psychiatrist, according to the DSM-IV-TR diagnostic criteria. The definition of learning disorders incorporates exclusion criteria such as absence of extreme behavior, absence of neurological problems or sensory impairments, and absence of problems presumed to be the result of environmental, economic, or cultural factors (APA, 2000).

The diagnostic assessment included the following.

1. The Wechsler Adult Intelligence Scale, WAIS-III (Wechsler, 1997); to meet accepted diagnostic criteria, and to exclude individuals of mental retardation, all participants had Verbal, Performance, and Full Scale WAIS-III IQ scores of 70 or above.
2. Appropriate clinical and psychometric assessments documenting a history of academic difficulties; this established the presence of the DSM-IV-TR criteria that require marked impairment of academic skills.
3. Achievement tests regarding learning processes mainly in reading, writing, mathematical calculation and mathematical reasoning; concerning the achievement tests, it is worth noting that a significant barrier to the assessment of learning disabilities in adults internationally is the scarcity of standardized, normed-referenced tests which demonstrate adequate reliability and validity (Harrison, Nichols & Larochette, 2008).

In Greece there are several standardized ability/skills or achievement tests, each one of them assessing a particular cognitive or academic area (e.g., language, phonological skills, mathematics). These tests are time consuming and they provide information only for a single ability or academic area, or they are not standardized for use with adults. As in the

international context, so in Greece, there is no widely accepted assessment tool among the State Certified Diagnostic Centers, so clinicians are forced to use their own non-standardized assessment tools (Anastasiou & Polychronopoulou, 2009). For the present study, the SLD diagnosis of the collected case records was based upon assessment tools that have been constructed for the assessment of adults referred for educational and learning problems (Bonti, 2013) and are used in daily practice by the clinicians in the State Certified Diagnostic Center for Learning Difficulties of the Psychiatric Department in the University General Hospital. This assessment battery consists from a number of tasks evaluating academic skills in the areas of literacy, language and mathematics, which provides a full, sufficient, and clear picture of the different specific academic area skills of the adults being evaluated, albeit within a short period of time.

Furthermore, in Greece, partly due to the scarcity of standardized tests, the identification process of SLD is based on the criterion of a severe discrepancy between intellectual ability, as measured by the Greek WISC-III for children and WAIS-III for adults, and academic performance as assessed by non-standardized tools (Anastasiou & Polychronopoulou, 2009). “Thus, estimation of the discrepancy is based on clinical judgments on the part of the multidisciplinary teams, particularly with respect to the child's reading, spelling, and mathematical performance. It is not confirmed by results of standardized tests measuring academic achievement” (Anastasiou & Polychronopoulou, 2009, p. 57).

Materials

Confidential self-report records. The self-report records used in this study included background information, developmental histories and demographic data which were obtained from adults with SLD through clinical interviews. Interviews were conducted prior to the present study by the clinicians in their daily practice of the learning assessments in the State

Certified Diagnostic Center for Learning Difficulties of the Psychiatric Department in the University General Hospital.

Case records. Case records included information on cognitive and learning assessments. The records were also completed by the clinicians of the Diagnostic Center prior to the study following the above mentioned diagnostic procedure which is the usual for the Greek context.

Referral request. Referral request was defined by determining the reason why the adult requested the learning assessments. This data was derived from the confidential self-report records described earlier. The response categories that were classified as (a) graduation exams from secondary education, (b) final national exams for entrance to higher education, (c) exams in the context of postsecondary or higher education (i.e., academic term exams and final exams for postsecondary diploma or University degree), (d) exams for foreign language certification, (e) driving license exams, (f) military use (i.e., postponement of a call to compulsory military service), and (g) personal reasons/self-awareness.

Results

The majority of the participants mentioned academic issues regarding different types of exams as the main referral reason for requesting the learning assessments. In particular, 26.5% (n=26) of the young adults were prompted to seek learning assessments in adulthood as a result of participating in postsecondary or higher education exams, 20.4% (n=20) due to participation in the national exams for entrance to higher education, and 16.3% (n=16) due to participation in secondary graduation exams. 14.3% (n=14) reported personal reasons (selfawareness) for this request. Fewer participants (see Table 1) reported that they needed the diagnosis documentation for foreign language certification exams (n=10, 10.2%), driving license exams (n=8, 8.2%) and for military use - postponement of a call to compulsory military service (n=4, 4.1%).

INSERT TABLE 1

To answer the second research question concerning the relation between the reasons young adults seek diagnosis and their gender and type of SLD the chi-square test was used (see Table 2). The study investigated which of the independent variables (sex, type of SLD, mixed SLD) could be used to predict the referral request. The referral requested (a) graduation exams from secondary education, (b) national exams for entrance to higher education, and (c) exams in the context of postsecondary or higher education were grouped in one category which was renamed "Exams for academic reasons." The request referring to military use concerned only male participants and, therefore, it was excluded from the analysis and we studied 94 of the 98 participants. The other three types of requests (exams for foreign language certification, driving license exams and personal reasons) were grouped in one category which was named "Other reasons." In the following table the arithmetic data of "Yes" indicate the case records that unambiguously stated that an adult met the criteria for an SLD or for mixed SLD, or stated that a prior diagnosis of an SLD was supported by the present assessment results. The "No" indicates the case records that did not state the corresponding SLD diagnosis. Therefore the "Yes" and "No" refer, respectively, to the adults of the sample that did and did not met the criteria for the each mentioned SLD diagnosis as this data derived from the relevant case records of cognitive and learning assessments conducted prior to the present study according to the diagnostic procedure mentioned above.

INSERT TABLE 2

From the above analysis it was revealed that there is a statistically significant relation between gender and request referral ($\chi^2 (N = 94, 1) = 3.870, p < 0.05$). It was more likely that female participants would seek learning assessments ($n = 24, 80\%$) than males ($n = 38, 59.4\%$). Significant relation also was observed between writing difficulties and request

referral (χ^2 (N=94, 1) = 6.521, $p < 0.05$); adults with writing difficulties were more likely to seek assessments for exams ($n = 58$, 70.7%) than adults without writing difficulties ($n = 4$, 33.3%). Finally, a significant relationship was observed between reading difficulties and request referral (χ^2 (N=94, 1) = 3.985, $p < 0.05$). Interestingly, participants without reading difficulties ($n = 14$, 87.5%) were more likely to seek assessments than those with reading difficulties ($n = 48$, 61.5%).

Discussion

The current study investigated the reasons Greek young adults seek formal diagnosis of SLD and the possible associations between self-referrals and gender and type of SLD. The first research question examined the reasons why a young adult would seek learning assessments. The results showed that exams, in the context of postsecondary or higher education, were the most frequently reported reason. These exams include academic term exams and final exams for a postsecondary diploma or University degree. The second most frequent reason for seeking assessments reported was national exams, which are used for entrance to higher education. The third reason was to request graduation exams from secondary education.

Over half of the young adults with SLD who participated in the study reported academic reasons for requesting learning assessments. This finding should be interpreted within the wider Greek socio-educational context where education is highly valued. According to the Greek legislation, students with SLD diagnosis can be tested orally, instead of having to take a written assessment in the national exams for entrance to higher education (around their 18th year of age); the same holds true for postsecondary education exams as well. This accommodation may function as a strong impetus for adult students to turn to diagnostic services in order to secure the relevant certificate which brings them closer to the “Greek Dream” of higher education (Anastasiou & Polychronopoulou, 2009). In that way, adults with SLD wish to improve their employment prospects and avoid unemployment or low-paying jobs (Cortiella & Horowitz, 2014), which

seem to be more common in the population of adults with SLD than in the general population (Levine & Nourse, 1998; Seo et al., 2008; Sitlington & Frank, 1990). This finding should be considered in the broader Greek context of the existing economic crisis, which possibly makes the above need of adults with SLD more urgent, given the high unemployment rates currently seen among young adults.

Directly related to academic reasons are the requests for foreign language certification exams, the fifth frequently reported reason. As mentioned above, Greek young adults with SLD are academically oriented both for cultural and employment reasons. Therefore, they request learning assessments in order to receive the SLD certificate needed to receive accommodations (Cortiella & Horowitz, 2014).

The fourth most reported reason regards personal issues, or self-awareness, such as the need to know “what is going wrong with me?”. Such a response might be related to parents’ refusal to investigate their children’s persistent learning difficulties during the school years, which were often accompanied by repeating grades. The self-awareness reason reveals that, within the Greek families, there are negative stereotypes and possible fears of labelling and stigmatizing associated with learning assessments and a SLD diagnosis during childhood.

Driving license exams and military use (postponement of the call to compulsory military service) are the most rarely reported reasons. University or post-secondary students with SLD are entitled to extend the official duration of their studies and therefore to postpone the call to military service. It is likely that this referral request is indirectly connected to academic reasons, which once again underlines the central role of education among Greek adults with SLD when they refer for learning assessments.

A possible assumption concerning the overall age view delay of referral for learning evaluations, which is indirectly reflected in the survey data, can be derived from the existing literature. Some children and adolescents with SLD do not consider themselves as having a disability (Cortiella & Horowitz, 2014), given the fact that they are probably able to

use compensatory strategies to achieve academic success (Ruban et al., 2003; Seo et al., 2008; Trainin & Swanson, 2005). When the academic demands increase, which occurs when studying for academic exams, adolescents and young adults with SLD begin to perceive their learning difficulties as a major problem and they seek learning assessments in order to make use of available accommodations.

The second research question examined the relationship between self-referrals and gender and type of SLD. Regarding the relationship between sex and the referral request, it was found that females with SLD are more likely than males to refer for psychoeducational diagnostic services for academic reasons. This finding agrees with research finding reporting that women have higher health and mental health service utilization compared to men (Bertakis et al., 2000; Eisenberg et al., 2007; Hunt & Eisenberg, 2010; Wilkins et al., 2008). Although SLD is typically not considered a mental health problem, in Greece the adult Diagnostic Centres, such as the one where the present study was conducted, are part of Hospital Psychiatric Departments.

On the other hand, that fact that more women sought learning assessments disagrees with the existing research data which indicate that (a) among adults, males are more likely to report having SLD (Cortiella & Horowitz, 2014); and (b) many young women with SLD are married and raise children at a younger age, which inhibits further education and employment opportunities (Levine & Nourse, 1998). Within the current Greek cultural context, however, many young women with SLD are now similar to young women in the general population, who postpone marriage and parenthood to pursue further education and career (Levine & Nourse, 1998). One possible reason may be that, for the Greek socioeconomic culture of current economic crisis, the socially acceptable indicators of success for the population of Greek women, including those with SLD, are education and employment and not the traditional roles of wife and mother. Thus, when young Greek women deal with SLD-related obstacles, they tend to use the available services. This fact, combined with the finding that females generally are more willing that makes to refer

themselves to services associated with mental health (Bertakis et al., 2000; Eisenberg et al., 2007; Hunt & Eisenberg, 2010; Wilkins et al., 2008), may again help explain the cited gender differences.

The second research question examined the relationship between self-referrals and type of SLD. It was found that adults with writing difficulties are most likely to seek learning assessments for academic reasons. These writing deficits result in low literacy skills, affect vocational choices, and may lead to unemployment or to low-paying job opportunities (Mellard & Patterson, 2008). Such challenges may prompt young adults with writing difficulties to seek learning assessments to improve their educational and employment prospects. Furthermore, all types of exams in Greek education system are written, which makes young adults with writing difficulties the most vulnerable group among adults with other types of SLDs. A possible diagnosis gives them the opportunity to be examined orally (Anastasiou & Polychronopoulou, 2009). The finding implies that the reason for referral in adulthood, at least within the Greek cultural context, are mostly socio-educational, probably with a socioeconomic orientation and less psychological (e.g., self-awareness, motivation).

Limitations

Even though the current study provides new information about self-referrals for SLD among adults, the findings of the current study should be interpreted with caution because of the relatively small sample size; some of the cells were very small. The issue of missing data and incomplete data also sets limits to the generalization of the results. Also, the current study did not investigate the relationship between reasons for the referral requests with other important factors such as the existence of prior diagnosis. Not all case records were complete,

and full documentation regarding the existence of prior diagnosis in childhood were unavailable. Another limitation is that the age variable among adults was not taken into account; reasons for seeking learning assessments may vary according to different age groups (i.e., young adults versus older adults). The present study dealt only with young adults. Finally, as with all correlational studies, cause-and-effect interpretations should not be made. However, despite the above mentioned limitations, a significant positive element is that the data were collected directly from young adults with SLD and not indirectly from different informant sources, like parents, relatives and teachers. Moreover, despite the above mentioned small size of the sample, the sample of the current study represents many geographic areas and contains participants of different education levels. The study also provides comparisons of these outcomes among different SLD subtypes.

Future research

Issues among adults who have SLD have not been adequately investigated in Greece. Further investigation in the Greek population of adults with SLD is needed to address such issues as epidemiology, demographics, gender differences, success factors of education, and employment. Future research should also examine learning strategies used by adult students with SLD and appropriate teaching methods that could assist them with their academic responsibilities. In addition, the existence or not of a prior diagnosis in childhood may differentiate the reasons an adult seeks learning assessments. Similarly, different age groups may face different challenges. Therefore, future studies taking into account the prior diagnosis and the age variable may enrich the interpretation of referral requests. Finally, future research regarding the development of a more comprehensive diagnostic system, which takes into account the SLD adults' needs for and their transition to adult life, is also recommended.

Implications

The data collected from the present study raise issues for researchers and clinicians to consider, specifically the significant delay among a significant proportion of the Greek

adult population in seeking learning assessments as well as in terms of considering possible ways through which self-referrals could be prevented. Such investigations may include more systematic and effective screening procedures during earlier stages of childhood and adolescence for all students and, especially, directed to students at risk for developing writing difficulties during the school years. Appropriate early intervention programs may also prove useful for their educational and employment future during adulthood.

In addition, given the fact that the most reported reason for referral are exams in the context of postsecondary education, it is understood that those providing postsecondary education services must be adequately educated concerning the nature of SLD and in terms of providing appropriate study guidance to young adult students with SLD. Males especially may need this provision, given that the current research data confirm that males are less willing than females to self-refer for diagnostic services. Postsecondary advisors could assist students in the process of matching program studies with students' individual needs, strengths, and weaknesses and provide the appropriate accommodations. Finally, the study raises questions as regards the "taboo" issue concerning the "SLD diagnosis" in Greece, thus emphasizing the need for timely information of parents and educators around the nature, diagnosis and intervention policies of SLD.

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Table 1
Referral reasons for requesting learning assessments

	<i>n</i>	<i>%</i>
Referral reasons		
Graduation exams from secondary education	16	16.3
National exams for entrance to higher education	20	20.4
Exams in the context of post-secondary or higher education	26	26.5
Exams for foreign language certification	10	10.2
Driving license exams	8	8.2
Military use	4	4.1
Personal reasons	14	14.3

Table 2

Crosstabulation for independent variables and referral reasons

		Referral Reasons					
		<i>Exams</i>		<i>Other reasons</i>			
		N	%	N	%	χ^2	p
Gender	Male	38	59.4	26	40.6	3.870	0.021*
	Female	24	80.0	6	20.0		
Reading difficulties	No	14	87.5	2	12.5	3.985	0.018*
	Yes	48	61.5	30	38.5		
Writing difficulties	No	4	33.3	8	66.7	6.521	0.002*
	Yes	58	70.7	24	29.3		
Arithmetic difficulties	No	40	62.5	24	37.5	1.696	0.653
	Yes	22	73.3	8	26.7		
Reading and writing difficulties	No	14	58.3	10	41.7	0,172	0.578
	Yes	48	68.6	22	31.4		
Reading and arithmetic difficulties	No	48	68.6	22	31.4	0,172	0.578
	Yes	14	58.3	10	41,7		
Writing and arithmetic difficulties	No	44	64.7	24	35.3	1.068	0.760
	Yes	18	69.2	8	30.8		

Note. The sample size differs (N=94) because the request referring to military use concerned only male participants and, therefore, it was excluded from the analysis.

* $p < 0.05$