

# PARENTING THE LD CHILD

... a day in the life

Megan L.'s son Terry is nine years old. Two years ago, he was diagnosed with dyslexia and other non-verbal learning disabilities. So she turned off the TV and tutored him with Jolly Phonics and regular multi-sensory activities. Now he can read very well, but his handwriting is immature, and he lags about two years behind his classmates in math. He also lacks focus and organizational skills, but is making progress.

**7:30 AM:** Megan and Terry get up and dress. She makes breakfast and packs a lunch for Terry as he walks the dog. After breakfast, Megan takes care of some chores as Terry gets ready for school. "When I get downstairs, I discover Terry is still in his T-shirt - and it's late October!" Megan runs back upstairs to get his jacket, and they head for the bus.

**9:00 AM:** Megan comes home, goes for a run, does more housework. She calls up Terry's psychologist. Megan wants the psychologist to observe Terry in the school environment to get a clearer picture. "Terry's teachers believe he has ADHD on top of the other disabilities and think he should be medicated. The psychologist thinks meds would only 'zombify' him."

**10:00 AM:** Megan, an ESL teacher, volunteers at Terry's school. She tutors three Korean children. Today she has them work on their school-related vocabulary. She encourages them to go off topic, discussing friendships and Hallowe'en. "This is good for me as I usually teach adults. And I think Terry likes to see me around in the school."

**11:00 AM:** Megan passes Terry's teacher in the hall. It seems Terry has helped the Resource teacher that morning with 'tutoring' a grade one student. "His teacher is doing great things with him. She takes every opportunity to have him shine."

**12:30 PM:** Terry dines with a family friend, Jeannette. The previous weekend Jeannette, an organic gardener, brought Terry along with her own family. He learned to plant onions. "Gardening is an activity that requires discipline and patience. And growing things is magical to kids. I think I will join this group next year."

**4:00 PM:** Terry arrives home. He tells Megan that one of the children in her ESL group wanted to play in the school yard. "I was delighted, since Terry has made no friends yet at school this year."

**5:00 PM:** Homework journal. He has written **math homework** in his agenda, but no page or exercise number. Mom and child work on a page, together. Terry has decided he doesn't want to count on his fingers anymore and is making a fine transition. "Math is taught so differently from when I was a child. I wasn't sure if I was giving him good advice."

## FOR MORE INFORMATION:

Institute of  
Learning Disabilities (QC)  
[www.institutta.com](http://www.institutta.com)

Learning Disabilities  
Association of Canada  
[www.ldac-acta.ca](http://www.ldac-acta.ca)

**5:30 PM:** Phone call to Climbing Club to confirm weekend reservation. Terry is a fearless and determined wall-climber. Megan likes it too. "Climbing is good exercise and boosts his self-esteem." Megan has tried to enroll him in team sports, but Terry's coordination and attention issues aren't the best for team sports. "Terry tells me people get mad when he forgets which way he should be shooting and scores into his own net."

**6:00 PM:** Megan cooks supper. Terry helps to measure and weigh. When there's time, she lets him use kitchen appliances under close supervision. "This is fun for him and makes him feel trusted and responsible."

**8:00 PM:** Megan looks over some papers from Cubs, as Terry is to be invested next week. He was in Beavers last year and loved it. "In this environment he can make friends. His learning difficulties are less apparent, he irks the other kids less, he gets to run around and burn off energy with them."

**8:30 PM:** Bedtime for Terry. Megan has time for herself. But she thinks about Terry, whether to medicate him or not. The idea still makes her uncomfortable. "I'd consider a trial run, if the side effects are minor." Megan has tried *alternative* therapies: Brain Gym, homeopathy, therapeutic Eurythmy. In her son's case, these were not enough. Yes, Megan would consider medication if it makes a positive difference in terms of social interaction. "It's discouraging for my son to hear classmates say things like 'he's too dumb' or 'he has one of those hyper problems.'"

**12:00 AM:** Bedtime for Megan.

