University students with learning disabilities at the Faculty of Education, Charles University in Prague

BACKGROUND
The paper deals with learning disabilities (LD) of university students in the Czech Republic. The first part describes most common trends in professional care of students with LD in historical context, the second part analyses contemporary situation of support of students with LD during their university studies. Pivotal part of the text describes the situation at Faculty of Education, Charles University in Prague, from the perspective of state LD students, their difficulties and means of possible support.

PARTICIPANTS AND PROCEDURE
Qualitative analysis of functional diagnostics took place in the frame of evidence of 15 students with learning disabilities. Focal point of the functional diagnostics is a structured interview in which an identification of needed modification for studying with specific educational needs of students with LD takes place.

RESULTS
From our analyses it can be stated, that students with LD apply for registration basing on their experience with high school status of a student with SD, or that their decision is influenced by their current study problems or the fact that they went through a modified entrance exam. We have also discovered the fact, that except for the difficulties which result from the type and degree of the disability and which can be compensated by specific approaches, students also need an emotional and social support. Learning disability is not, however, perceived only as a disadvantage, many students have stated that it has motivated them in their further development.

CONCLUSIONS
Achieved results point to general specifics to the perceived difficulties, to the specifics of the concrete degrees and to the further personal (emotional, social) characteristics of LD students and they support recommended modification for successful studies.

KEY WORDS
learning disability; inclusive education; medical disability; students with special needs; modification of study
BACKGROUND

The phenomenon of learning disabilities (LD) is in the Czech Republic traditionally at the centre of attention of both the public and experts. Learning disability is currently the most common and frequent diagnosis in schools that allows special educational needs (SEN) administration, traditionally at elementary schools and high schools, but most recently at universities as well. Learning disabilities students are included in the category of medical disability (with students with mental, visual, physical, hearing and speech disabilities and children with autism spectrum disorders) during the primary and secondary education. The SEN category is then supplemented by pupils with medical and social disadvantages on the basis of Education Act No. 561 (2004).

The LD student category is the most common amongst medical disabilities – statistics show that during primary education 9% of the population are diagnosed with LD. It is a very well received diagnosis as professional help is very well established for these cases in the framework of inclusive education, including financial help targeting supporting and compensatory measures. This situation has not been the case always, so we will summarize the most important point of development in the Czech Republic. During the last 50 years a lot of development has happened, and in the last few years, the effectiveness of the system of care of children with LD has been discussed. The preventive-interventional model is said to be the most effective. We are aware that similar discussions about changes in the complex model of care are happening abroad, namely in Poland (Bogdanowicz, 1999).

LEARNING DISABILITY FROM THE HISTORICAL POINT OF VIEW

The very beginnings of the issue in the Czech Republic were shaped by the foremost experts – doctors, psychologists, remedial teachers and speech-language pathologists (Z. Matějček, Z. Žlab and J. Šurma, and others). Their role was to find relevant foreign literature as well as to develop a new body of original research and resolve practical problems of children with LD. The first studies were published during the 1950s, which can be now seen as the start of the scientific examination of the phenomenon (Matějček, 1995).

The matter was addressed in the education sector in the 1960s. The first step was the experiment to create special classes for children with LD. Care of pupils with LD was officially covered in 1972 by the Instruction to create specialized classes for children with LD and difficulties with adaptability. A big breakthrough in professional care was the formation of a system of pedagogical and psychological counselling centres. Counselling centres, created on a district basis, quickly became the most important place for the diagnosis of learning disabilities. They also suggested professional intervention in the school environment and, in some cases, provided rehabilitation. Regional counselling centres dealt with conceptual activities, new diagnostic and rehabilitation approaches, and organized education in the field of learning disabilities for counselling professionals as well as teachers. Even at that time, different and tolerant means of assessment of the pupils at primary schools were encouraged which became the basis for later approaches.

The time after the year 1989 brought a lot of changes. Integration of the children with disabilities took place, as well as financial support (the so-called integrative contribution, which made the deepening of professional care in the school environment possible).

More counselling centres were founded in the 1990s, all involved in care of children in need – special pedagogical centres, which provided professional services to children with LD, even though they are focused on children with different disabilities. The Educational and Psychological Counselling Institute of the Czech Republic and Institution for Further Training of Pedagogical Employees was founded as a methodological centre for the counselling system of the whole country.

The schools have also seen certain changes, especially in the approach towards the issue, but also in specific work with LD pupils. Professional care is integrated into the school environment, thanks to inclusive education. An individual educational plan is not the only available form of support; counselling is also available through the institution of school counselling centres. Special pedagogues and psychologists can take action at the initial stages of education, when learning disabilities are yet to be diagnosed. They work with the children during the first signals of educational difficulties (Mertin & Kucharská, 2007), especially with children with initial problems when developing school skills (Wildová, 2005).

Development of the care was only possible because of the legislation, which followed contemporary needs of children with LD and consecutively improved expert methods used in education of LD pupils (e.g. conditions of integration, education with individual educational plan support, school competences and obligations...).

LEARNING DISABILITY AND DEVELOPMENTAL ASPECT

Until the 1990s there was a dominant assumption that, if the learning disability is discovered early, and
University students with learning disabilities

As has been already said, the first decade of the 21st century saw a broad debate on college education of students with LD. These students form the most common category of handicapped university students, often without any record and subsequent support. It is no surprise that they are not very successful during their studies and they statistically tend to drop out (Mertin, 2007). The students also may decide not to enter university – they are convinced that they will fail to finish their studies due to the difficulties during their studies and expectations of parents and teachers (Shifrer, 2013).

Support during the studies for groups of students in danger is demanded by the Higher Education Act No. 111 (1998), specifically by § 21, which focuses on the necessity of equal chances to study at university. A lot of universities have incorporated supporting mechanisms for support of students with special needs (SN) into their internal rules (e.g. Rector’s Provision No. 9; Charles University standards of support for students with special needs, 2013).

An analysis was made on the basis of the Ministry of Education, Youth and Sports of the Czech Republic (MEYS CR) (Analysis of contemporary situation of students with specific needs at universities, 2010). A nationwide study took place, examining the exact numbers of students with SN at particular universities, frequencies of particular diagnoses and their distribution among particular degrees, and financial demands on support and possible sources of financing. Current legislation was also analysed and some adjustments were proposed in order to increase support of those students and to decrease the numbers of LD students who are not able to finish their university studies. The main role of the specific system of support of students with SN should be help to eliminate barriers which are present in the universities’ physical environment, in the field of administration and organization of the education process, in access to information, but also in the field of behaviour and attitudes (ibid, p. 14). The reason for the more serious changes may have been the discovery that the percentage of SN students in the Czech Republic is far lower than abroad – the estimated percentage was 0.15-0.45%, while the percentage in the whole population is estimated to be around 10% (in the United Kingdom it was 4.5% of students with dyslexia in 2009; Pollack, 2010). Subsequent research showed enormous fluctuations between particular universities, but LD/ADD-AHDH students (302 students of the total 1119 students with SN) unambiguously predominated. It is necessary to point out that the numbers are not necessarily definitive – the principle of self-determination is respected (Hampton & Gosden, 2004), the students with SN do not necessarily have to go through the registration and therefore their numbers may be potentially higher. According to Mertin (2007), an important factor could be the fact that the schools in the Czech Republic can choose from large numbers of applicants a small number of those, who might actually be accepted – often not those with specific needs. On the other hand, the high school pupils with LD can be demotivated by their problems and decide not to enter university (Shifrer, 2013).

Systematic support of students with SN at universities is officially guaranteed by a methodical instruction from the academic year 2011/12 (Rules for providing contributions and grants to public universities by the MEYS CR, 2011). It clearly defines both procedural steps and fields of support. Students with LD are one of the categories of students with SN – the system of categorization is shown in Table 1.

PHASES OF SUPPORT OF STUDENTS WITH SPECIAL NEEDS

First and foremost is the informational activity for choosing a specific degree. The aim is not, however,
to exclude a particular degree for a student with a certain disability, but to provide as much information as possible to make a well-informed choice possible and to provide information about differences between high school and university education, demands on each student, risks of education and about possible options of support with regard to students’ disabilities and possible modifications of their studies. Some of the authors research special transfer programmes from high schools to universities as a one-semester course at university that can prepare the students with LD for higher education (Essex & Ta-Tanisha, 2013). In the Czech Republic the most common form of these programmes is informational, about the system of university studies.

This area includes admission exams. During the admission process, the applicant informs the school that he falls into a category of an individual with SN, if supported by correct medical evidence. After that the process of preparation of the modified admission procedure starts. Particular modifications are based on the needs of a specific student combined with the manner of carrying out the admission process (modification of talent exams, written or oral exams, practical exams). The modified admission procedure should be modified as much as necessary and no more.

According to the new rules from 2011 a basic registration procedure is established, which makes the modifications during the course of university education possible independently of school and degree. Each student who wishes to study with the status of a student with SN has to participate. Registration is the basis on which the SN student acceptance process takes place. The student has to:

- document the handicap with a relevant certificate,
- go through the so-called “functional diagnostics”.

Functional diagnostics is not the diagnostics of specific difficulties – the goal is not to assign a diagnosis, as the student already has one when entering a university. Functional diagnostics is used abroad as well, for example in Belgium and the UK (Bartlett, Moody & Kindersley, 2010; Field, Sarver & Shaw, 2003). The goal of functional diagnostics is to identify needs and any limitations of the student for the course of the studies and to propose an appropriate mechanism which can compensate them. During the functional diagnostics a large number of diagnostic approaches are used (currently valid documents analysis, expert structured interview, specifics of the degree, further methods of work dependent upon specifics of the particular disability). The outcome of the functional diagnostics is a formalized written report, which suggests approaches through which we can secure education based on the student’s needs. The document is not unalterable; it can be updated when new needs arise, or the degree curriculum changes.

### SPECIFIC SUPPORTING APPROACHES

It is necessary to point out that the principle of self-determination applies to each student, so an individual approach with individual modification is essential when dealing with students with SN.

Which aspects of studies will be the most complicated and which could jeopardize successful studies depends on many factors. The disability itself plays a role with the level of accomplished skills, cognitive and metacognitive strategies, styles of learning, communicational and work skills, personality of

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**Table 1**

*Categorization of university students for evidence use and status of the special needs students*

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Students with visual disabilities</td>
</tr>
<tr>
<td>A1</td>
<td>Slightly visually impaired / user vision</td>
</tr>
<tr>
<td>A2</td>
<td>Severely visually impaired / user / touch / voice</td>
</tr>
<tr>
<td>B</td>
<td>Students with hearing impairment</td>
</tr>
<tr>
<td>B1</td>
<td>Hard of hearing / user verbal language</td>
</tr>
<tr>
<td>B2</td>
<td>Deaf / sign language users</td>
</tr>
<tr>
<td>C</td>
<td>Students with physical disabilities</td>
</tr>
<tr>
<td>C1</td>
<td>Disability of the lower limbs (paraplegia)</td>
</tr>
<tr>
<td>C2</td>
<td>Disabilities of the upper extremities (fine motor skills)</td>
</tr>
<tr>
<td>D</td>
<td>Students with learning disabilities</td>
</tr>
<tr>
<td>E</td>
<td>Students with mental disorders or chronic somatic diseases</td>
</tr>
</tbody>
</table>

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each student, their motivational characteristics and last but not least, social support. It is of course in the best interest of the student for his future job search and subsequent development to make the education not too different from the curriculum. Modified approaches – not to be confused with unjustified easements and benefits – should not be applied globally but after consultation with the student.

One of the most common modifications with students with SN is an adjustment of lessons, individual education, educational assistance, modification of obligatory literature, use of modern compensatory technologies and time compensation during exams.

PARTICIPANTS AND PROCEDURE

It is not possible to mention all the recommended approaches towards all the types of disabilities; we will therefore focus only on modified approaches towards students with learning disabilities. The source will not be literature but lived reality – through content analysis of processed assessments of functional diagnostics of students with LD at the Faculty of Education, Charles University in Prague (FE CU) during the years 2012-2014.

The goal of this particular paper is to describe and analyse the situation of the students with LD at our faculty. During the academic year of 2012/2013 registration of students with SN took place in accordance with aforementioned rules of MEYS CR. The faculty registered students with SN and took care of modification of the acceptance process and the course of their studies even before that.

Table 2 shows the number of students with SN from the year 2012/2013, when registration in accordance with the new rules started. The table also illustrates the growth in the number of students who are planning on using the system of support during their studies.

Table 2

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Overall – students:</td>
<td>14</td>
<td>11</td>
<td>8</td>
<td>21</td>
<td>32</td>
<td>49</td>
</tr>
<tr>
<td>with visual disabilities (A)</td>
<td>7</td>
<td>4</td>
<td>3</td>
<td>5</td>
<td>5</td>
<td>8</td>
</tr>
<tr>
<td>with hearing loss (B)</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>4</td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>with physical disabilities (C)</td>
<td>5</td>
<td>5</td>
<td>2</td>
<td>3</td>
<td>7</td>
<td>5</td>
</tr>
<tr>
<td>with learning disabilities (D)</td>
<td>–</td>
<td>–</td>
<td>1</td>
<td>4</td>
<td>8</td>
<td>13</td>
</tr>
<tr>
<td>with somatic diseases and mental health problems (E)</td>
<td>–</td>
<td>2</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>16</td>
</tr>
</tbody>
</table>

Note. Number of registered students with SN is around 0.2-1% of all the students at FE CU

An interesting category, from the qualitative point of view, is that of students with LD (category D). They were first registered four years ago (2011/2012), even though it is apparently the most common medical disability which we come across at universities. Formalized support, maybe even experience of older students with LD, but also the informational campaign, which took place during the academic year 2012/2013 in favour of registration and the SN status itself, caused the growing numbers of LD students. They are currently the second biggest category of students with SN at our faculty.

The main goal of the study is to analyse functional diagnostics of students with LD, which was carried out in agreement with registration requirements during two years with 15 students with LD. We are interested in the following questions:

1. For what reasons do the students with LD apply for registration as an SN student?
2. In which fields do the students feel the biggest problems during the course of their studies?
3. What can make the studies easier for students with LD from their personal view?
4. How do they perceive the limits of their handicap in relation to their particular degree?

And now a few words about the methodology of the study. As stated before, the goal of functional diagnostics is not the diagnosis itself but identification of the potential needs and limitations of the particular student during the course of their particular academic education and proposition of appropriate mechanisms which can lead to their satisfaction or compensation. Students’ needs were dealt with by the following approaches:

1. First was analysis of the student’s documents and assignment of a specific diagnosis (mostly learning disabilities).
2. A very important document was the study curriculum, which informed about specific requirements
of particular degrees, content and form of education and testing methods.

3. The most important method of functional diagnostics was an interview with the student. Its goal was to establish a knowledge of each student’s awareness of the degree and gravity of the disability and to provide specific forms of support from which the student could benefit.

For the research a group of 15 students with LD, who were previously registered as students with SN and about which we had sufficient data, was chosen. They became part of the case study – analysis of the situation at our faculty; while 13 of them are studying currently (2013/2014 – 10 in a bachelor programme, 2 in a master’s programme and 1 in a doctoral programme), 2 of the students have already finished their education. Half of the students went through the registration during the first year of their studies, half of them during later years. Three students, who were originally registered as SN students, did not want to register in the new system.

The average age was 21 years and 4 months. The youngest registered student was 19.5 years old, the oldest 34.5 years old. Distribution of particular LDs is shown in Table 3.

The ratio of men to women is interestingly balanced, which does not correspond to the ratio from relevant literature, which reports a higher percentage of men (Matějček, 1995). It is, however, due to the fact that amongst the students of our faculty there is a higher percentage of women. Table 4 clearly shows greater representation of male students with LD in education degrees (chemistry, mathematics, physical education, etc.), while in the teaching for primary schools degree, psychology and special pedagogy, women prevail.

**RESULTS**

**THE COURSE OF PRIMARY AND SECONDARY EDUCATION**

With the exception of four students with SN, the subjects were diagnosed with LD during their previous education. Most of them (53%, N = 8) received the diagnosis in the 1st grade of primary school, three in the second grade. These respondents reported supporting principles of education, at the level of work in classes (modification of attitudes, 53%, N = 8) and attendance in corrective groups (20%, N = 3). Two of the students showed greater difficulties at high school; the diagnosis of learning disabilities was established in connection with the modification of graduation exams. In two cases the diagnostics was established at university; the students stated previous problems, but they were never officially examined. Both of the students were diagnosed after the 3rd year of college.

**THE COURSE OF THE ENTRANCE EXAMINATION**

A large proportion of the students with learning disabilities passed the admission procedure without any modifications (53%, N = 8) because they did not need it. For a minority of the students (47%, N = 7) modifi-
University students with learning disabilities were implemented – the support mechanism was utilization of an increased time limit for passing the admission test, in the range of 25-50%. For this modification a special classroom was chosen where the students took the test with other applicants with SN. One student with LD stated that he had the opportunity to use a dictionary for the written exam. Two students wrote the test on a computer.

REASONS FOR THE REGISTRATION

In terms of the reasons why the students registered, we find four types of responses.

The first group of students made use of the possibility of modifying the admission procedure and based on this experience, the students logically proceed with the registration of student status with SN (47%, N = 7). They were especially candidates who were in the course of secondary education included with pupils with SN and underwent a modified graduation exam.

The second group were those students who did not use the possibility of modified entrance exams. And because they received the information about the status of student with SN through the informational campaign at the faculty, they used this option, typically when entering the school (27%, N = 4).

The third group consists of students who have previously studied at university, with smaller or larger problems, learned about the possibility of registration and used it for the option of successful study (13%, N = 2).

The last group consists of students who have already had an experience with studies previously, but they were unsuccessful in it and expect the registration to allow them to finish studies in the chosen field (13%, N = 2).

WHAT DO I NEED FOR SUCCESSFUL STUDIES?

Registration of the student with SN takes place at the beginning of the study. A student entering tertiary education does not have an accurate estimate of what awaits him. Based on past experience, the student assumes that his problems will occur at the same level or quality. Therefore, his expectations may be biased – the advantage is that the processed report of functional diagnostics may be at any time in the future revised to the current needs of a student with SN. Somewhat better identification of education problems and needs is shown by students who have already studied (and failed). Based on functional diagnostics we are able to detect the most expected, or real problems happening during the course of university studies, which are subsequently dealt with by particular recommendations in the functional diagnostics surveys. We will firstly deal with the difficulties, which do not correspond to the particular degree. The major problem of the students with LD was the perceived concerns about managing college demands due to low study skills (80%, N = 12), which are related to their primary problem in reading and writing.

Students reported problems with reading and writing a spoken word, bad orientation in text, and inability to listen and write notes at the same time. Lectures include presentations and students with LD typically have problems with reading all the slides, especially when they contain more complex information and change quickly. In seminars, there can be texts that are long and the student does not finish them in time and is therefore unable to do the required tasks. These students would appreciate having written support for following the lecture, receiving all used texts beforehand (presentations, extended syllabus, printed text for seminars, etc.) and the possibility to use audio records, videos and edited documents.

The great concern of the students with LD is the study of literature, expressed by 66% of them (N = 11). The students can learn about requirements on mandatory literature through contact with older students and teachers, as well as through announced test demands. From the perspective of the needs of students with SN often their need of structured literature or labelled key titles and titles of recommended additional literature was heard. Other students found the distribution of the expert literature in time effective, with specific demands on the time in which the literature should be read. If they received the literature just before the test, the situation would be very stressful.

Another important factor is the correctness of writing and the formal format of writing (60%, N = 9). A significant proportion of students are aware of their difficulties, which shows as inability to write correctly or under time pressure. They already have the experience that the texts they submit need to be corrected, either by themselves or by other forms of corrections (computer corrector, another person). They are, however, afraid that they will fail in writing text in seminars or during a written exam. They are also afraid that the specific error rate, which does not correlate with their knowledge, will be viewed as unpreparedness and will be evaluated with a worse grade. In addition, the format of written outputs can be altered and the students can have problems when presented with the task itself, especially when under time pressure or when the tasks are bigger. Weak differentiation between similar terms and the possibility of interchanging them was mentioned as well. As possible support, enough time for proofreading, possibility to use written support (dictionaries, overviews, Internet), usage of technical help for proofreading (for example writing the exams on a computer).
It is a well-known fact that problems of the students with SN are accompanied by problems in executive functions. We are therefore not surprised that another problematic variable refers to this area. Students with LD reported problems in the organization of work activities or in the time estimate for meeting the requirements of individual subjects, but also difficulties in concentration, slower work pace, fluctuations in working capacity, problems in the short- and long-term memory, and trouble with memorizing knowledge, often due to the stressful situation during the examination (60%, N = 9). The solution would be an extended time limit (20-50%) for doing the tasks during the seminars and exams, time management in cooperation with the teacher, or in the so-called educational assistance (a specific form of support, when a fellow student assists the student with LD) and work on themselves (relaxing, development of concentration, usage of compensatory strategies, e.g. mental map).

Of great help for students with LD are forms of technical support (recorder, notebook, tablet, dictation program, scanning pen, etc.) and the possibility of their use in lectures and exams.

Among the students of our faculty with LD are representatives of different degrees; therefore specific problems showed up during the interviews. None of the students showed concern that they could not handle the field itself, or that the field of study had been chosen incorrectly. Concerns related to the potential influence of specific skills and type or level of learning disability.

All of the degrees require mastering at least one foreign language, which is typically a problem for students with LD. Appropriate forms of support are: individualized form of education, modification of the exams and use of didactic tools. Some of the degrees – not only language degrees – require Latin as another obligatory language. Here the same problems as in other languages occur, problems with continuous expression in a foreign language, learning the vocabulary, grammar, and writing correctness.

In the natural science and technical degrees students with LD dealt with the problem of graphical representations of certain tasks, such as writing formulas, or three-dimensional and two-dimensional graphical representations. Supporting principles were work on a computer, possibility to use previously prepared representations and using multiple-choice worksheets for recording answers. Some degrees reflect motor skills of the students, both gross and fine, but also three-dimensional and two-dimensional imagination. These problems do not concern only physical education, but also other degrees such as Art.

For a student with LD who is entering a university, positive motivational factors can play a role, as fear and stress can. Questions like Will I manage my studies?, Which problems await me? and Who can I talk to? are quite common.

Especially students with problems with executive functions and dyspraxia can have difficulties with orientation in a new physical environment as well as in the electronic environment. Support of other students can be an effective form of help as various tutoring programmes of the faculty (older students who take care of new ones). Four students with LD used this option based on functional diagnostics.

With some of the students with LD, problems in the emotional and social field (30%, N = 5) were reported. Each individual has a different level of coping and self-awareness.

For some of the students with LD, this question was also dealt with in the framework of function diagnostics – how to overcome obstacles, how to work with individual motivational and personal characteristics, what can affect success during studies, how to overcome the feeling of failure and injustice.

Other counselling or psychotherapeutic services, through which the student can deal with particular problems and gain self-belief, were recommended. Many of the students thought that the modified education would be viewed negatively by the teachers and schoolmates. They have already encountered ignorance of their specific needs or even ridicule.

**DISCUSSION AND CONCLUSIONS**

When analysing the materials of functional diagnostics, we wondered why the students with LD at our faculty decided to gain the status of a student with SN. We detected four main reasons for registration – experience of prior education and modified course entrance exam, current or past problems in the studies and the campaign, which contributed to the decision to register as a student with SN, especially for the possibility of successful graduation.

In which areas did the students with learning disabilities experience the biggest problems during their studies? The analysis shows that the problems could be divided into two main groups. Among the problems of general application were especially difficulties with work with literature and reading, correction and editing formal writing, and problems in executive functions (organization of activities, attention, memory), and they related to the actual education, exam and homework. In connection to the individual subjects of study, difficulties corresponding with the specifics of the field were identified (difficulty in language areas, difficulties in graphic records, motor difficulties).

We have identified learning disability during the analysis of disadvantages in study skills, which arise from the substantiality of learning disability and which persist until adulthood. They are listed by
a number of authors. These are: problems in short-term memory, poor reading and writing skills, problems in language and foreign language skills, deficits in study skills, problems in time management and coping strategy (Bogdanowicz, Lockiewicz, Bogdanowicz & Pąchalska, 2013; Cowen, 1988; Heiman & Precel, 2003).

What can help the students with LD to successfully complete university studies? In all aforementioned areas the needs of students were identified and they are consistent with other findings in the literature (Bogdanowicz, 2012; Mertin, 2007).

How do the students with SN view limits of their handicap in relation to the studied field? In all of the cases the students were motivated. The fears were not connected to the study requirements themselves but to the influence of specific needs and other characteristics on the outcome of the studies.

Emotional and behavioural problems in a population with LD are stated to be up to 40% in prevalence. We mean lack of confidence and lack of self-understanding, feelings of shame and guilt over their difficulties, frustration, anxiety, fear, depression, etc. (Skinner & Lindstrom, 2003; Taggart, Milner & Young, 2007). In several cases, students were offered counselling or other supportive psychotherapeutic assistance that could bring a further shift in personality processing. Some of the students of our faculty have shown emotional and social problems, as for example Krejčová (2012) reports, although the numbers of those students were not great.

The presence of the positive aspects of learning disability should also be mentioned. Some of the students in the interview declared that due to LD they had developed stamina and endurance, improved their self-discipline (Platow, Mavor & Grace, 2013), and had learned to overcome obstacles – they know that nothing is for free. In order to study, they had to sacrifice many things – leisure time, they need much more than fellow students to concentrate on studies. They hope, therefore, that the same principles will help them to compete in professional life after graduation.

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