



What Goes Wrong?

Every child has inside him an aching void for excitement and if we don't fill it with something which is exciting and interesting and good for him, he will fill it with something which is exciting and interesting and which isn't good for him.

— Theodore Roosevelt

If movement is essential for learning and thought, then why aren't "hyperactive" people, who move all the time, thinking and learning? If people have all the necessary elements to take in the world sensorially, to process and integrate information, and to demonstrate the skill of thought, why are some people labeled "learning disabled"? If the drive to learn is intrinsic to the human body/mind from before birth to death, why do some people have "attention deficit disorder"?

In the United States alone there are between three and four million school-aged children, mainly boys, who are labeled with specific learning disabilities. As many as five hundred thousand preschool children are also being labeled with learning disabilities, between one and one and a half million preschool children with speech and language disabilities, five hundred thousand preschoolers with emotional disturbances, seventy-five thousand with hearing impairments, and one hundred thousand with autism.¹ Every week, fifteen thousand American school children are being referred for assessment, and up to eighty percent of all American school children could be diagnosed with learning difficulties.^{2,3}

In my observation, based on years of work with schools and school children, the labels used for specific learning difficulties are generally arbitrary, based on behaviors and non-pathological. These labels include: Hyperactive, Attention Deficit Disorder (ADD), Attention Deficit Hyperactive Disorder

(ADHD), Learning Disabled, and Emotionally Handicapped. Efforts to help people with learning difficulties have often relied on the pigeonhole strategy: labeling a problem and thinking that greater understanding will follow from greater generalization. But more often than not, labeling leads to oversimplification and insensitivity to the very real, very unique people behind the label. Sadly, in some ways we have trapped these children — and adults — in a diminished view of themselves and their potential for learning.

In light of the amazing resiliency of the human body/mind system, I propose that we hold off such a judgment until a person has completed their learning, which will take a lifetime. How can we label someone who is still in the process of becoming, a process we all are engaged in until we die? Having said that, I hasten to agree that there are people with specific learning difficulties. However, if we must label them, why not label them according to the underlying core problems rather than just the symptoms? I suggest the label SOSOH: Stressed Out, Survival-Oriented Humans.

WHO ARE SOSOH?

What do I mean by stressed out, survival-oriented? I am referring to non-integrated, lopsided brain functioning, a tendency to operate reflexively and/or reactively from survival centers in the brain stem and the sympathetic nervous system. How does stress fit into the picture? Stress from various environmental, developmental, family and social influences is a trigger setting off events in the nervous system that produce and regulate survival-oriented behavior. We certainly know that chronic exposure to stress inhibits full brain development and learning.⁴

Stress necessitates an overemphasis on survival-oriented brain processing at the expense of rational, limbic and cortical functioning, especially within the frontal lobes. Consequently, stressed out, survival oriented humans have less opportunity to develop nerve nets into the frontal lobe and may exhibit learning difficulties as a result. In the next five chapters we will look at these detrimental effects of stress in greater depth. Here I wish to emphasize that stressors of various kinds, some obvious, some less visible, are causative agents for many learning difficulties.

As far as I can tell, my SOSOH label easily covers all the other labels we currently apply to learning problems. These familiar labels, including Fetal Alcohol Syndrome, have been attached to the following patterns of behavior:

Excessive activity — hyperactivity,

Difficulties in maintaining attention and focus on a task,