



Learning Difficulties and Environmental Factors: The Role of Socioeconomic Status, Maternal Literacy, and Supplementary Education

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Abstract: Learning difficulties refer to challenges that students may experience in understanding academic content, completing homework, or applying effective learning strategies. These difficulties may manifest as academic underachievement, reduced self-esteem, and even school dropout. Unlike specific learning disorders, learning difficulties are more strongly associated with environmental factors and are therefore considered controllable. This study aimed to examine the role of these environmental factors by comparing learning difficulties among students with different socioeconomic statuses, access to supplementary education, and maternal literacy. For this purpose, 129 students from Syed Jamaluddin Afghan School were selected using stratified sampling. Data were collected using the Colorado Learning Difficulties Questionnaire and analyzed in SPSS version 29. The results indicated that overall levels of learning difficulties in the studied population were below the average level (although 16% of the sample exhibited learning difficulties). Furthermore, students from low socioeconomic backgrounds, those whose mothers were illiterate, and those who did not attend supplementary courses demonstrated significantly higher levels of learning difficulties. It is recommended that learning difficulties receive greater attention in schools and that efforts be made to reduce them through improving teaching quality, providing remedial classes, and similar interventions.

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INTRODUCTION

Learning is defined as the process of producing relatively stable changes in behavior or behavioral potential that result from experience and cannot be attributed to temporary bodily states such as those caused by illness, fatigue, or the use of medications (Saif, 2018, p. 30). These changes do not always occur voluntarily, and some students experience difficulties in this process. For the first time, Samuel Kirk introduced the term learning disability in 1963

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(Ganji, 2015). Before the introduction of this concept, learning disabilities were not considered independently, and individuals in this group were labeled with terms such as “brain-damaged,” “slow learners,” “neurologically impaired,” or even “lazy.” Today, the term Specific Learning Disorder (SLD) is more commonly used to distinguish among different aspects of disability. According to the most recent classification of mental disorders, Specific Learning Disorders are categorized under neurodevelopmental disorders. This category includes disorders that begin in childhood and often co-occur (American Psychiatric Association, 2022).

The National Joint Committee on Learning Disabilities in the United States states that “learning disabilities is a general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. These disorders are intrinsic to the individual and are presumed to be due to dysfunction of the central nervous system. Even though a learning disability may occur concomitantly with other disabling conditions (such as sensory impairment, intellectual disability, or social and emotional disturbance) or with extrinsic influences (such as cultural differences, inappropriate or insufficient instruction, and psychogenic factors), it is not the result of those conditions or influences” (Hammill et al., 1981, as cited in Hallahan & Kauffman, 2008, p. 202).

In this definition, learning disorders are considered to be caused by internal factors and are not eliminated by changes in external conditions. In contrast to Specific Learning Disorders, learning difficulties (LD) arise from external factors and can be alleviated by modifying environmental conditions, such as improving the quality of instruction. Therefore, learning difficulties generally refer to any persistent or situational difficulty in the learning process that hinders learners’ effective attainment of educational goals, without necessarily meeting the diagnostic criteria for neurodevelopmental disorders or Specific Learning Disorders (Mortimore, 2008; Peer & Reid, 2021). This concept encompasses a wide range of educational challenges that may result from the complex interaction of cognitive, emotional, educational, familial, and social factors (Farrell, 2012). Accordingly, learning difficulties—unlike learning disorders, which constitute a clinical concept with specific diagnostic criteria—are a purely descriptive and functional concept and are used to refer to students who perform below the expected level in educational settings (Lewis & Norwich, 2007). Learning difficulties may manifest as difficulties in understanding academic concepts, slowness in completing assignments, decline in academic progress, or inability to apply effective learning strategies (Westwood, 2013), and they may decrease or increase in response to changes in the educational environment or supportive interventions (Hart et al., 2007).

The prevalence of learning difficulties is not well established. This may be due to the lack of a clear operational definition of the concept, which has resulted in scattered and limited research (Snowling & Hulme, 2012). Moreover, learning difficulties are highly dependent on cultural context and do not constitute a diagnostic or epidemiological problem. Nevertheless, indirect evidence suggests that the number of students experiencing non-clinical learning

difficulties is considerably higher than the number of individuals who receive a formal diagnosis of a learning disorder (Graham et al., 2020). Despite this, most research has focused on Specific Learning Disorders, with comparatively less attention given to learning difficulties. This is even though, from the perspective of inclusive education systems, addressing learning difficulties as a widespread and non-diagnostic phenomenon is of particular importance; an exclusive focus on diagnostic labels may lead to neglecting a large number of students who require educational support but do not fall into any specific clinical category (Norwich, 2014). These difficulties affect self-esteem, academic anxiety, and even school dropout. Learning difficulties can significantly reduce students' performance and lead to academic failure (Daniel et al., 2006). Research indicates that learning difficulties are associated with anxiety, reduced hope, and negative attitudes toward education, all of which can diminish overall academic performance (Sainio et al., 2019). Examining learning difficulties helps to design targeted and effective educational interventions that reduce confusion in learning (Lodge et al., 2018).

Research shows that learning difficulties may result from hyperactivity, family-related problems, lack of educational opportunities, test anxiety, and even actual learning disorders (Willcutt et al., 2011). Other factors such as instructional quality, inappropriate teaching methods, cultural deprivation, academic anxiety, low motivation, and negative school experiences can play an important role in the development of learning difficulties (Rutter, 1994; Snowling & Hulme, 2012). Some researchers consider learning difficulties to be indicators of other problems rather than the cause of reduced academic performance. For example, learning difficulties may indicate emotional problems such as anxiety, unconscious conflicts, fear of failure, or conflict with parents or teachers, rather than cognitive problems (Pearson, 1952). However, Malekpour et al. (2013) identify working memory deficits (a cognitive dimension) as being involved in learning difficulties.

Despite extensive research on the role of cognitive, familial, and social factors in academic achievement, the existing literature has largely focused on Specific Learning Disorders or on general outcomes such as grades and academic decline. In contrast, learning difficulties—as a non-diagnostic, functional, and context-dependent concept—have been examined less systematically, even though they encompass a large proportion of students in inclusive education systems who do not meet diagnostic criteria for neurodevelopmental disorders but experience persistent learning challenges. Moreover, learning difficulties are more strongly dependent on environmental factors (Gui & Akuba, 2023), and although the role of family socioeconomic status in students' academic achievement has been well documented (Rutter, 1994; Snowling & Hulme, 2012), existing evidence has paid less attention to examining the direct relationship between this variable and learning difficulties. Similarly, in the research literature, maternal literacy has generally been examined in terms of overall academic support or children's educational attainment, rather than in direct relation to the occurrence or severity of learning difficulties. In addition, receiving supplementary education (such as attending courses or religious schools (Madrassa)), which is common in Afghanistan as a

compensatory strategy for educational weaknesses, has rarely been considered as an independent variable in explaining learning difficulties.

This research gap is more pronounced in the context of public schools, where limited educational resources, crowded classrooms, and socioeconomic disparities may contribute to the emergence of learning difficulties. Furthermore, Taher and Kheradmand (2024) have also shown that learning difficulties are more prevalent in public schools. Accordingly, the present study was designed to examine the role of family socioeconomic status, maternal literacy, and receipt of supplementary education in the learning difficulties of students in a public school, to contribute to a more precise understanding of the contextual factors influencing learning difficulties and to provide practical evidence for designing context-based educational interventions. Given that learning difficulties are context-bound and dependent on environmental and educational factors, it is expected that the severity and pattern of these difficulties will not be uniform across groups that differ in socioeconomic status, maternal literacy, and access to supplementary education. Therefore, this study compares learning difficulties among these groups.

RESEARCH METHOD

This study investigates learning difficulties among students by considering the influence of key environmental and socioeconomic factors. Learning outcomes are shaped not only by individual abilities but also by the broader contexts in which students develop and receive educational support. In this regard, socioeconomic status, maternal literacy, and access to supplementary education represent important environmental conditions that may contribute to differences in students' learning experiences and academic performance. Therefore, this section describes the methodological approach used to examine the relationships between these factors and learning difficulties, including the characteristics of participants, measurement procedures, and data analysis methods.

Research Design

This study was conducted to examine learning difficulties; therefore, it is a cross-sectional quantitative descriptive study. We used a quantitative research design because the primary objective of the study was to examine group differences in learning difficulties based on measurable contextual variables, including socioeconomic status, maternal literacy, and supplementary education. Quantitative approaches are particularly appropriate when the aim is to test theoretically informed expectations, compare predefined groups, and identify statistically significant patterns across variables (Creswell & Creswell, 2018). Given that learning difficulties were operationalized as measurable outcomes and the study sought to analyze variations across groups, a quantitative design was considered methodologically suitable.

Population and Sampling

The population consisted of students from grades 4 to 9 at Syed Jamaluddin Afghan School, which, according to the school records, included 192 students. Based on Krejcie and Morgan's (1970) table, a sample of 127 students was required. However, as a precaution, 140 students were selected using Proportionate stratified sampling. After excluding incomplete questionnaires, 129 valid questionnaires remained, and all analyses were conducted based on these responses. Proportionate stratified random sampling was employed because the number of students varied across classes. Each class was treated as a stratum, and participants were selected proportionally to the size of each class to ensure adequate representation of the overall student population and to reduce sampling bias.

Data Collection Instrument

Data were collected using the Colorado Learning Difficulties Questionnaire (CLDQ-20) (Willcutt et al., 2011). This questionnaire was translated into Persian by Hajloo and Rezaie Sharif (2011), and its validity and reliability were confirmed. Taher and Kheradmand (2024) also reported a reliability coefficient of 0.89 for this instrument. The questionnaire includes 20 items across five dimensions: reading (6 items), arithmetic (4 items), social cognition (3 items), social anxiety (4 items), and spatial performance (3 items). Each item is rated on a 5-point Likert scale ranging from strongly agree to disagree strongly.

In addition to the CLDQ items, questions were included to assess maternal literacy (literate vs. illiterate), socioeconomic status (poor, good, average, excellent), and out-of-school educational activities (supplementary courses, Madrassa, or only public school).

Data Collection Procedure

The questionnaire is not self-administered by the students; rather, it should be completed by the student's teacher or parent. In this study, parents completed the questionnaires at home. Students were instructed to take the questionnaires home and return them after completion by one of their parents.

All relevant ethical considerations were carefully addressed in this study. Participants were informed about the purpose of the research and provided informed consent before participation. Participation was voluntary. Confidentiality and anonymity were strictly maintained, and all data were used solely for research purposes.

Data Analysis

After data collection, the data were entered into IBM SPSS Statistics version 29 and prepared for statistical analysis. Descriptive statistics, including means and standard deviations, were calculated to summarize the study variables. To examine differences in learning difficulties across demographic and environmental factors, independent samples t-tests and one-way analysis of variance (ANOVA) were conducted. A one-sample t-test was also performed to determine whether the observed level of learning difficulties differed significantly from the expected reference value. All statistical tests were evaluated at a significance level of $p < .05$.

FINDINGS

Descriptive statistics were conducted to examine the overall level and distribution of learning difficulties among the participants. The mean, standard deviation, and other descriptive indicators of learning difficulties are presented in Table 1.

Table 1. Descriptive statistics of Learning difficulties

	mean	Std. deviation	LD percentage	No LD percentage
Learning difficulties	2.165	0.88	16.8%	83.2%

Table 1 presents the descriptive statistics of learning difficulties in the studied sample. The mean score for learning difficulties was 2.165 with a standard deviation of 0.88, indicating a moderate dispersion of scores around the mean. Based on the established cut-off point, 16.8% of the students were identified as having learning difficulties, whereas 83.2% did not meet the criteria for learning difficulties.

The learning difficulties measure consists of several subscales representing different aspects of students' learning challenges. Descriptive statistics, including mean and standard deviation values for each subscale, were calculated to examine the pattern of responses across these dimensions. The results are presented in Table 2.

Table 2. Descriptive statistics for subscale

	N	Mean	SD
Reading	129	11.9535	6.12355
cognitive	129	8.5659	3.86863
Anxiety	129	6.3721	3.07223
Spatial	129	9.5426	7.00670
mathematic	129	6.6202	3.72322

Descriptive statistics indicated variability across the CLDQ subscales. The highest mean score was observed in the reading domain ($M = 11.95$, $SD = 6.12$, $N = 129$), followed by spatial functioning ($M = 9.54$, $SD = 7.00$, $N = 129$) and cognitive functioning ($M = 8.56$, $SD = 3.87$, $N = 129$). Lower mean scores were observed for mathematics ($M = 6.62$, $SD = 3.72$, $N = 129$) and anxiety ($M = 6.37$, $SD = 3.07$, $N = 129$), indicating comparatively lower levels of impairment in these domains. Overall, the pattern of means suggests differences in the severity of difficulties across cognitive and reading domains.

To determine whether significant differences existed among the different dimensions of learning difficulties, a repeated measures analysis of variance (ANOVA) was conducted. This analysis examined whether participants' mean scores differed across the CLDQ subscales. The results of the repeated measures ANOVA are presented in Table 3.

Table 3. Repeated Measures ANOVA results for CLDQ subscales

Partial η^2	p	df2	df1	f	test
Effect					
0.597	<0.001	125	4	46.22	Wilks' Lambda
domain					

A repeated measures multivariate analysis of variance (MANOVA) indicated a significant effect of domain on the CLDQ subscale scores. Wilks' Lambda showed that the differences between domains were statistically significant, $\Lambda = .403$, $F(4, 125) = 46.22$, $p < .001$, with a large effect size (partial $\eta^2 = .597$). These results suggest that the level of impairment significantly differs across the assessed domains.

A one-sample t-test was conducted to examine whether the mean level of learning difficulties among participants differed significantly from the test value. This analysis was used to determine whether the observed level of learning difficulties was significantly higher or lower than the expected reference value. The results of the one-sample t-test are presented in Table 4.

Table 4. One-Sample t-Test Results for Learning Difficulties

Learning difficulties	T	df	sig	Mean difference	95% confidence interval	
					upper	Lower
	-10.766	128	<0.001	-0.8347	-	-0.988
					0.681	

Note: Test value = 3

Table 4 presents the results of the one-sample t-test comparing the mean score of learning difficulties with the test value of 3. The analysis indicated that the mean learning difficulties score was significantly lower than the reference value, $t(128) = -10.77$, $p < .001$. The mean difference was -0.83 , and the 95% confidence interval ranged from -0.99 to -0.68 , suggesting that the average level of learning difficulties in the sample was below the specified criterion.

A one-way analysis of variance (ANOVA) was conducted to examine whether significant differences existed in learning difficulties across different groups based on socioeconomic status. This analysis was used to compare the mean scores of learning difficulties among multiple groups and determine whether group membership was associated with variations in learning difficulties. The results of the one-way ANOVA are presented in Table 5.

Table 5. one-way ANOVA

	Sum Squares	Df	F	η^2	Sig
Between groups	12.971	3			
Within groups	86.292	125	6.263	0.13	<0.001
Total	99.263	128			

Levene's test confirmed the homogeneity of variances across groups, $F(3, 125) = 1.61$, $p = 0.19$. A one-way ANOVA indicated a significant effect of group on learning difficulties, $F(3, 125) = 6.26$, $p < .001$, $\eta^2 = .13$ (Table 4).

Following the significant results of the one-way ANOVA, post hoc comparisons were conducted using the Tukey HSD test to identify which specific groups differed significantly in their levels of learning difficulties. The Tukey test allows for pairwise comparisons between groups while controlling for Type I error. The results of the Tukey post hoc analysis are presented in Table 6.

Table 6. Tukey test result

Socioeconomic status		Mean differences	sig	95% confidence interval	
				Upper	Lower
poor	Average	0.61	<0.01	1.07	0.14
	Good	0.61	<0.005	1.11	0.10
	excellent	0.98	<0.009	1.78	0.19

Tukey post hoc comparisons (Table 6) indicated that students in the poor socioeconomic group reported significantly higher learning difficulties than those in the average (MD = 0.61, $p < .005$, 95% CI [0.14, 1.07]), good (MD = 0.61, $p < .01$, 95% CI [0.10, 1.11]), and excellent (MD = 0.98, $p < .009$, 95% CI [0.19, 1.78]) socioeconomic groups. No other pairwise comparisons were statistically significant.

A one-way analysis of variance (ANOVA) was conducted to examine whether students' learning difficulties differed according to their participation in supplementary education programs. This analysis compared the mean levels of learning difficulties among groups with different levels of supplementary educational experience. The results of the one-way ANOVA are presented in Table 7.

Table 7. One-way ANOVA

	Sum Squares	Df	F	Eta	Sig
Between groups	10.374	2	7.353	0.11	<0.001
Within groups	88.888	126			
Total	99.263	128			

Levene's test indicated that the assumption of homogeneity of variances was met, $F(2, 126) = 1.74$, $p = 0.17$. A one-way ANOVA revealed a significant effect of group on learning difficulties, $F(2, 126) = 7.35$, $p < .001$, $\eta^2 = 0.11$ (Table 4). To determine which groups differed significantly, Tukey's post hoc test was conducted (Table 7).

Following the significant one-way ANOVA results, Tukey's HSD post hoc test was conducted to determine which specific supplementary education groups differed significantly in terms of learning difficulties. This analysis provided pairwise comparisons between groups while controlling for the probability of Type I error. The results of the Tukey post hoc test are presented in Table 8.

Table 8. Tukey post-hoc test result

supplementary education		Mean differences	Sig	95% confidence interval	
				upper	Lower
Supplementary courses	Madrasa	-0.63	<0.005	-0.16	-1.09
	Just public school	-0.61	<0.002	-0.19	-1.03
Madrasa	Just public school	0.01	<0.995	0.44	-0.41

Tukey post hoc comparisons (Table 7) were conducted to examine pairwise differences in learning difficulties across types of supplementary education. The results indicated that students receiving Supplementary courses reported significantly lower learning difficulties compared to those attending Madrasa (MD = -0.63, $p < .005$, 95% CI [-1.09, -0.16]) and public school only (MD = -0.61, $p < .002$, 95% CI [-1.03, -0.19]). No other pairwise comparisons were statistically significant.

An independent samples t-test was conducted to examine whether students' learning difficulties differed based on mothers' literacy status. The analysis compared the mean scores of learning difficulties between students whose mothers were literate and those whose mothers were illiterate. The results of the independent samples t-test are presented in Table 9.

Table 9. Independent samples t-test

Mothers' literacy	Mean	t	df	sig	Mean difference	95% confidence interval	
						upper	Lower
Illiterate	2.41	-3.154	128	<0.002	-0.476		
Literate	1.93					-0.177	-0.774

An independent samples *t*-test was conducted to examine the difference in learning difficulties between students whose mothers were illiterate and those whose mothers were literate (Table 8). The analysis revealed a statistically significant difference, $t(128) = -3.15$, $p < .002$, with students of illiterate mothers reporting higher learning difficulties ($M = 2.41$, $SD = 0.94$) compared to students of literate mothers ($M = 1.93$, $SD = 0.75$). The mean difference was -0.48, with a 95% confidence interval of -0.77 to -0.18, indicating a moderate difference between the groups.

DISCUSSION

On average, the results indicated that learning difficulties were low and below the moderate level. However, in the present sample, more than 16% of students exhibited learning difficulties, which represents a considerable proportion. This finding is consistent with previous research, including the study by Graham et al. (2016), which showed that learning difficulties are more prevalent and more readily identifiable than learning disorders.

Differences in learning difficulties were also examined among groups of students who only attend public school, those who attend public school in addition to supplementary courses, and those who attend public school in addition to Madrasa. The results showed that learning difficulties among students who attend supplementary courses were significantly

lower than those of students who attend Madrassa in addition to public school ($MD = -0.63$, $p < .005$) and those who only attend public school ($MD = -0.61$, $p < .005$). In other words, learning difficulties were lowest among students who attend supplementary courses. Several explanations may account for this finding. First, students who attend supplementary courses may be able to address their academic difficulties within these settings. Longitudinal studies have shown that participation of at-risk students in after-school programs can improve academic skills, increase cognitive engagement, and reduce academic decline (Durlak et al., 2010). These students may not receive sufficient opportunities or support in regular school settings. Second, instruction in supplementary courses may be delivered using methods that better match students' learning styles, as students differ in their preferred learning approaches (Saif, 2018). If learning difficulties arise from a mismatch between instructional methods and individual differences, supplementary courses may reduce these difficulties by providing more flexible instruction (Ritter et al., 2009). A third possibility is that increased repetition and extended learning time may be beneficial. Out-of-school activities increase time spent engaged in learning. For students who learn less effectively in formal classroom settings due to factors such as high-class density, fast instructional pace, or anxiety, supplementary courses provide opportunities for additional practice and immediate feedback (Patall et al., 2010).

Learning difficulties differed significantly across socioeconomic status groups. Students from poor socioeconomic backgrounds exhibited significantly higher learning difficulties compared to those from good ($MD = 0.61$, $p < .01$), average ($MD = 0.61$, $p < .005$), and excellent socioeconomic groups ($MD = 0.98$, $p < .009$). These findings are consistent with previous studies (e.g., Rutter, 1994; Snowling & Hulme, 2012) that highlight the role of economic factors in the emergence of learning difficulties. Poverty can affect learning ability through multiple pathways. Some researchers have shown that children from low-income families are exposed to fewer cognitive and linguistic stimuli before school entry, such as limited access to books, educational games, rich language interactions, and structured learning experiences (Bradley & Corwyn, 2002). This early deprivation may lead to weaknesses in foundational skills such as language comprehension, attention, and academic readiness, which later manifest as learning difficulties. Chronic poverty may also affect brain development, such that essential cognitive functions for learning—such as working memory, attentional control, and self-regulation—do not develop adequately (Hackman & Farah, 2009). Insufficient development of these neural mechanisms can result in learning difficulties. Poverty is also consistently associated with chronic stress, which can affect children during critical periods of development. One of the most significant effects is alteration in the functioning of the hypothalamic–pituitary–adrenal (HPA) axis. This system, which regulates stress responses, may become persistently activated following chronic stress exposure, leading to elevated stress levels and reduced cognitive functioning, including working memory and learning (Evans & Schamberg, 2009). Additionally, economic poverty indirectly affects learning through reduced parental mental health, increased family conflict, and limited parental involvement in children's academic activities (Conger et al., 2010).

Maternal literacy may also play a role in learning difficulties, as students whose mothers are literate exhibit significantly fewer learning difficulties compared to those whose mothers are illiterate ($MD = -0.476$, $p < .01$). This finding is consistent with numerous studies examining the association between maternal literacy and academic performance and learning difficulties (e.g., Davis-Kean, 2005; Dubow et al., 2009). Literate mothers tend to provide cognitively richer home environments, including greater linguistic interaction, encouragement of reading, and assistance with homework (Bradley & Corwyn, 2002). Such enriched environments directly reduce the occurrence of learning difficulties. Furthermore, literate mothers typically engage more actively and effectively with teachers and schools, are better able to identify children's academic difficulties at earlier stages, and play a more active role in pursuing educational interventions (Hill & Tyson, 2009). Early intervention, in turn, prevents learning difficulties from becoming chronic.

CONCLUSION

The results of this study indicated that, although the overall level of learning difficulties at Syed Jamaluddin Afghan School is below the moderate level, a significant portion of students still experience notable learning difficulties. The findings revealed that learning difficulties were more prevalent among students from low socioeconomic backgrounds, those with illiterate mothers, and those who did not participate in supplementary educational activities outside of school. These results underscore that learning difficulties are a multifactorial phenomenon and cannot be solely attributed to students' cognitive limitations.

Since learning difficulties can be mitigated through early attention and intervention, but may lead to long-term and irreversible consequences if left unaddressed, it is essential for schools—especially public schools—to implement early identification measures. Previous research has also shown that public schools, due to limited educational resources and structural constraints, are more vulnerable to learning difficulties (Taher & Kheradmand, 2024).

It is recommended that, as a first step, the quality of instruction in regular classrooms be improved, since teaching methods are among the strongest factors in reducing learning difficulties (Westwood, 2008). Teachers can achieve this by providing immediate feedback, adjusting instructional pace to meet students' needs, using varied examples, and employing explicit teaching strategies. The most important consideration is that teaching methods align with students' needs. The implementation of the Response to Intervention (RTI) model may also be effective in mitigating learning difficulties (Fletcher & Vaughn, 2009; Fuchs & Fuchs, 2006; Jimerson et al., 2016). Research indicates that many learning difficulties arise from the lack of effective learning strategies rather than cognitive incapacity (Zimmerman, 2002). Teachers can teach students strategies such as study planning, summarization, self-assessment, and time management, thereby helping them learn effectively. Ultimately, identifying students with learning difficulties (e.g., using the Colorado Learning Difficulties Questionnaire) and providing 2–3 focused sessions per week on foundational skills can be

beneficial, as studies have shown that short-term, skill-focused remedial instruction—particularly in reading, mathematics, and comprehension—can reduce situational learning difficulties (Lauer et al., 2006).

Limitation of the Study

This study was conducted in a single public school; therefore, generalization of the results to other schools, particularly private schools or schools in different regions, should be made with caution. The pattern of learning difficulties and the role of variables such as supplementary courses or Madrasa attendance may differ in other educational contexts. This research was conducted solely within the specific educational and cultural framework of Afghanistan. Another limitation of this study was the use of a questionnaire and a cross-sectional design. Subjective perceptions may have influenced parents' responses and may not fully reflect students' learning difficulties. Additionally, due to the cross-sectional nature of the study, it was not possible to examine changes in learning difficulties over time or to infer causal relationships among the variables.

Author Contributions

Samiullah Hasanzadah was responsible for data analysis, interpretation of the findings, and preparation of the original manuscript draft. Mohammad Niazi Ahmadzay contributed to the study conception and was primarily responsible for data collection. Samiullah Hasanzadah also contributed to data collection. Both authors reviewed and approved the final version of the manuscript.

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Data Availability Statement

The data that support the findings of this study are available from the corresponding author upon reasonable request. Due to ethical considerations and participant confidentiality, the dataset is not publicly available.

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Conflict of Interest

The authors declare that they have no conflict of interest.

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