DON'T "DYS" OUR KIDS

DYSLEXIA AND THE QUEST FOR GRADE-LEVEL READING PROFICIENCY

Executive Summary

by Leila Fiester

About 2.4 million children and youth in the United States have been diagnosed with learning disabilities (LD). Unfortunately, many fail repeatedly in school before their needs are diagnosed and addressed. They feel stigmatized by their differences, and they don't experience the academic environments, technologies, and instruction that would help them become proficient readers.

Reading proficiency is the core message of the Campaign for Grade-Level Reading, a national movement to have more children read at grade level by the end of third grade—especially children from low-income families, who face the largest achievement gap. And it's as important for children with LD as it is for any child. As we raise the bar for reading achievement, we can't ethically leave some children behind; and with at least 5 percent of *all* students having dyslexia or other specific learning disabilities, the population is so large that we cannot overcome the achievement gap without them. This paper examines the connections between teaching children with dyslexia to read and improving reading proficiency among all children.

★ **a**s we raise the bar for reading achievement, we can't leave some populations behind, either because they have learning differences, are poor, or both.

New research *on how the brain develops, acquires language, and processes information shapes the current context for helping children with LD learn to read.* For instance, we now know that different regions of the brain have specialized functions, and several help in the process of acquiring language and reading skills. During the learning process, the brain creates an interconnected circuit, or neural network. Because there is no single brain center devoted to reading, it takes communication among multiple centers for reading to occur. Important brain development occurs early in a child's life, and so does the development of language, which under-pins the ability to read and write. The brains of dyslexics are structured differently from the brains of non-dyslexics, and they operate differently when reading. And brain functions can change in response to instruction.

These findings suggest that, among other things: (a) dyslexia is a neurobiological condition rather than the result of poverty, culture, or developmental delays; (b) an educational approach that activates multiple areas of the brain and gets them to communicate with each other has the best chance of succeeding; (c) it is important to identify and address learning differences as early in a child's life as possible, while key brain development and skills are at a critical stage; and (d) teaching must be individualized to each learner to find the strategies that drive each person's brain most effectively.

New knowledge about the reading process also plays a role. The National Reading Panel (2000) recognized five essential skills or areas of knowledge that drive the process (phonemic awareness, phonics, fluency, comprehension, and vocabulary), and the National Early Literacy Panel (2008) identified 11 early literacy skills that consistently predict later literacy for preschoolers and kinder-gartners. The panels' findings suggested that reading is a complex process that requires a combina-tion of skills, and curricula and instruction should address all of the key components and skills.

Policies that affect how learning disabilities are defined, how and when children with LD are iden-tified, and how they are educated have evolved. Between 1973 and 2008, key federal acts have: provided accommodations for students with special needs; guaranteed a free, appropriate public education for children with disabilities in the least restrictive environment; made learning disabilities eligible for federally funded services; given parents the right to sue in court if their children do not receive the guaranteed education; required schools to create an individualized program for each eli-gible student and pay for the services; included children with disabilities in general education to the greatest extent possible; established testing accommodations for students with disabilities; mandated that students with disabilities participate in state tests, and required states to implement alternate assessments aligned with academic standards; required states to report the number and performance

of children with disabilities taking regular and alternate assessments, and to compare their performance with that of non-disabled students; required districts to monitor the racial and ethnic breakdown of students in special education; made schools accountable for all students' progress; required schools to have highly qualified teachers for students with disabilities; specified that states must provide educational materials in alternate formats to people with print disabilities; prevented states from mandating use of the IQ discrepancy formula to identify children with learning disabilities, and made Responsiveness to Intervention (RTI) an allowable alternate method; required states to track how many children from racial/ethnic minority groups are placed in special education and to provide early intervention programs for children in overrepresented groups; defined "disability" to include learning disabilities; and defined Universal Design for Learning (a framework for designing curricula and learning environments that work well for students with LD) as a scientifically valid basis for educational practice.

issues and innovations

For the majority of children with learning disabilities who attend public schools, success in reading is shaped by how and when the school formally diagnoses their learning differences ("identification"); what kinds of materials, content, and learning environments are available to them; how they are tested ("assessment"); what sort of technology is available to them; and what role their families play in their education.

IDENTIFICATION

The formal identification of a learning disability is important because it leads to the creation of an Individualized Education Program (IEP) and referral to special education services. The traditional method is based on measuring discrepancy between the student's ability and achievement—most often, the gap between the student's IQ and his or her performance on standardized tests. However, IQ scores may be suppressed by the student's reading disabilities, and it is difficult to distinguish between students with LD who exhibit a discrepancy and struggling readers who do not have a discrepancy.

An alternate approach is Response to Intervention (RTI), sometimes called a multi-tiered system of supports (or MTSS), which focuses on whether the student's performance changes in response to a high-quality intervention. It also usually takes into account the student's level of achievement and his or her rate of progress in comparison to peers. RTI involves moving students through a series of

tiers or levels of increasingly intensive, targeted instruction, diagnosis, and support. A version of RTI has also been developed for preschool children, in an effort to help children in the age gap between the earliest years and grades K-3. Early RTI identifies three- and four-year-olds who have precursors of specific learning disabilities related to language and literacy and provides less-formalized interventions that are more appropriate for early learners and preK classrooms.

RTI has advantages over the IQ-discrepancy model when implemented well. It doesn't require students to fail repeatedly before connecting them with help. It catches children who are struggling but not failing enough to be referred to special education. It teaches instructors to calibrate practices to each student's needs. It potentially reduces the over-identification of children with LD, because for some students the early interventions are sufficient to make referrals to special education unnecessary. And, because all children are screened, RTI brings general and special education together to improve instructional practices for all children while giving those who need it extra intervention. An estimated 60 percent to 70 percent of school districts across the country are in the process of implementing RTI, and several states have mandated its use. However, the growth in RTI has also fueled criticism. The main objection is not to the approach but to its low-quality implementation in some places.

CURRICULUM, INSTRUCTION, AND LEARNING ENVIRONMENT

The "reading wars" of the 1980s and 1990s polarized educators over the best way to teach reading, whether to all children or to struggling readers. Some educators championed whole-language instruction, which held that children immersed in a language-rich environment would naturally learn to read without much structured guidance. Others supported the phonics method, in which children learn the structure of language. The National Reading Panel tried to bridge the divide by calling for a balanced approach. Many people in the LD world, meanwhile, concluded that phonics instruction is vitally important but is not the *only* appropriate form of instruction. The question then becomes, what other types of instruction are important, how should they be delivered, and what curricula best support them?

★ the brain is different, so our teaching must be individualized to each learner.

FOR THE MAJORITY OF CHILDREN WITH LEARNING DISABILITIES WHO ATTEND PUBLIC SCHOOLS, SUCCESS IN READING IS SHAPED BY HOW AND WHEN THE SCHOOL FORMALLY DIAGNOSES THEIR LEARNING DIFFERENCES ("IDENTIFICATION"); WHAT KINDS OF MATERIALS, CONTENT, AND LEARNING ENVIRONMENTS ARE AVAILABLE TO THEM; HOW THEY ARE TESTED ("ASSESSMENT"); WHAT SORT OF TECHNOLOGY IS AVAILABLE TO THEM; AND WHAT ROLE THEIR FAMILIES PLAY IN THEIR EDUCATION.

The most effective forms of instruction and curricula for teaching children with LD to read are:

- Grounded in a theoretical framework for how reading skills are acquired, based on neuroscientific findings and evidence from effective education programs;

- Standards-based, preferably holding LD students to the same curricula and tests as other students;

- Comprehensive, addressing all five components of the reading process;

- Language-based, explicitly instructing students in the structure of language;

- Code-based, helping students learn to break the "code" behind reading through phonemic awareness, phonics, and fluency rather than by relying on guessing or memorization;

- Intensive, giving students extra practice through daily reviews, guided and independent practice, tutoring, and targeted small-group instruction;

- Multi-modal and multi-sensory, providing many pathways for gaining skills;

- A combination of direct instruction and instruction in strategies for reading;

- Diagnostic, with teachers using frequent assessments to gauge students' level of mastery;

- Personalized, with a separate learning profile for each student;

- Sequenced and segmented, with the teacher breaking down skills into components and providing step-by-step instructions;

- Scaffolded, with the teacher gradually reducing assistance as students become more proficient;

- Explicitly organized, with teachers clearly stating the objective at the beginning, having students review material before instruction, and directing students to specific information;

- Asset-oriented, so that teachers focus on the student's innate strengths rather than deficits; and

- Varied enough to meet each child wherever he or she stands on the continuum of reading abilities.

These key elements of strategies for teaching children with LD to read are not a mystery; they are known to be good for any emergent reader. The difference is that they are *essential* for children with LD—and sometimes in higher doses and greater intensity than for other students.

A promising conceptual approach for designing curricula, materials, and learning environments that work for children with LD is Universal Design for Learning (UDL). UDL is a set of principles for ensuring that learners have multiple means of engagement, multiple means of representing information, and multiple means of action and expression. UDL's principles have found traction nationally, and its premise that all barriers to learning should be absent from the get-go—rather than relying on accommodations to level the playing field—provides a framework for changing the learning environment in very fundamental and positive ways.

ASSESSMENT

Over the past two decades, the rate of students with disabilities who participate in assessments has increased dramatically in most states, from 10 percent or fewer students to more than 95 percent (and as much as 99 percent at the elementary school level). This is due in part to legislative changes that (a) gave students with disabilities the legal right to participate in and benefit from any state assessment and accountability system and (b) established that students with LD may be entitled to extra testing time or modified testing in certain circumstances. Another battle continues, however, over whether students with LD should take the same general education courses and standardized tests as other students or take alternate assessments based on different achievement standards. The controversy is fueled by the high-stakes environment created by ESEA 2001 (No Child Left Behind), which penalizes schools where subgroups of students (including those with disabilities) do not make adequate yearly progress as measured by test scores.

The LD field has not reached consensus on best practices for assessment and accommodations for students with LD. Some organizations believe that students with LD should be exempted from the standard assessments, while others believe that most LD students can and should take the same courses and tests that other students take, achieve to the same standards, and obtain regular high school diplomas at the same rate as their non-LD peers. Underlying these concerns is the fact that state standards for reading proficiency are low in general, and state-level tests therefore fail to identify many non-proficient readers, with or without LD.

TECHNOLOGY

Technology can influence the educational outcomes of children with LD by creating a barrier-free learning environment (as UDL does) and by enabling students to bypass or compensate for their disabilities (as assistive technology does). The technologies available today have potential to

IDENTIFY AND ADDRESS LEARNING DIFFERENCES AS EARLY IN A CHILD'S LIFE AS POSSIBLE

transform LD students' learning experiences. Yet only an estimated 25 percent to 35 percent of students with LD currently receive assistive technology in school. As schools and districts work to make technology and UDL more prevalent, experts recommend three strategies in particular: make technologies accessible to many types of learners (i.e., don't just replicate the print format in a technological one); use technology to uncover students' individual learning styles so interventions can be customized; and use technology to change practices in a profound way, creating better "on-ramps" for children struggling to read.

FAMILY ENGAGEMENT

Parents and other caregivers of children with LD vary tremendously in their response to the situation and their ability or inclination to take action—especially when the parents belong to socioeconomic or racial/ethnic groups that have experienced poor educational services, opportunities, and outcomes. And yet families of LD children must be proactive, knowledgeable advocates because the services required by law are so underfunded that without family involvement many children with LD will simply slip through the cracks. Successful practices for engaging parents include: helping parents understand what LD is and how it affects their children's education from an early stage— ideally, as early as preschool—since for most children parent involvement in education lessens over time; explaining LD in a culturally appropriate way, using terms that parents don't hear as derogatory or critical of their child's intellectual ability; reaching out to parents who may not otherwise be engaged in the school; and reaching parents through the information sources they know and trust.

barriers and solutions

What stands in the way of getting more good practices into place in low-income schools, districts, communities, and homes? Barriers include: multiple and sometimes competing constituencies in the LD field that do not always agree on strategies or priorities; misperceptions about the financial costs of intervention, including analyses that don't take into account the higher costs of remedial education later in life, the long-term social costs of failing to help LD children learn to read, or the impact on the nation's economic competitiveness; inadequate teacher training, including preservice programs and ongoing professional development that don't incorporate research on the brain and

how it learns to read, explicit and systematic instructional practices, and diagnostic skills; and lack of data linking the receipt of special education to better outcomes.

Given these challenges, what will it take to get more of the best practices, reforms, and technologies to reach more children with LD, especially those from low-income families? Among other things, experts consulted for this project called for policies that break down the barriers between general and special education to focus on good teaching overall, support earlier identification of and inter-vention in learning disabilities so that more children enter school ready to learn, maintain a high level of school accountability for helping children with LD make academic progress, and increase and support the use of UDL principles and RTI approaches. They also called for:

- Better training, professional development, certification, tools, and support for teachers and school administrators to improve their understanding of how to teach reading to all students, including those with LD;

- Technology developments, including standards and incentives for online learning that integrate UDL and reflect multiple ways of learning;

- Research studies that link the use of UDL and the receipt of special education services to student outcomes and further clarify the factors that put children at risk for dyslexia, affect its develop-ment, and interfere with intervention efforts;

- Development of assessments that follow a UDL approach, which could help to drive similar changes in curricula;

- Efforts to mobilize parents as advocates, both for their own children and en masse as a powerful political constituency;

- Community-level literacy coalitions that represent and reflect the full spectrum of stakeholders in education for children with learning disabilities, including people and organizations involved in civil rights, disability rights, business, education reform, and poverty reduction efforts; and

- Greater public understanding that (a) the current system for educating children with LD is deficient and (b) learning disabilities are not learning impairments.

A full set of recommended actions and opportunities for progress can be found in the companion document to this report, *What Will It Take to Help More Children With Dyslexia Learn to Read Proficiently? Recommended Actions,* available at www.tremainefoundation.org/content/dys.

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