DOCUMENT RESUME

ED 235 168 SP 023 087

AUTHOR Ngandu, Kathleen M.
TITLE Dyslexia and Severe Reading Disability.
INSTITUTION American Federation of Teachers, Washington, DC. Teachers' Network for Education of the Handicapped.
SPONS AGENCY Office of Special Education and Rehabilitative Services (ED), Washington, DC. Div. of Personnel Preparation.
PUB DATE 81
GRANT G007901295
NOTE 9p.; For related documents, see SP 023 083-088.
PUB TYPE Guides - Non-Classroom Use (055) -- Reports - Descriptive (141) -- Reference Materials - Bibliographies (131)

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS *Dyslexia; *Educational Strategies; Elementary Education; Instructional Materials; Learning Disabilities; Mainstreaming; *Reading Diagnosis; *Reading Difficulties; Reading Failure; Remedial Reading; *Student Characteristics; Teacher Role; *Teaching Methods

ABSTRACT

This handbook contains advice for the teacher in diagnosing dyslexia and developing an individualized program for overcoming severe reading problems. Observable characteristics of dyslexia are listed as an aid to the teacher's diagnosis, but it is emphasized that cooperation between the teacher and a reading specialist is of great importance in developing effective instructional plans. Fifty effective instructional strategies are listed which highlight many teaching techniques and ideas that have been successfully used with severely disabled readers in classroom as well as in clinical settings. A list of resources with additional information about dyslexia and severe reading disability is included. (JD)

Dyslexia and Severe Reading Disability

By Kathleen M. Ngandu
Hood College
Frederick, MD

For additional copies, write to:
THE AFT TEACHERS' NETWORK FOR EDUCATION OF THE HANDICAPPED
11 DUPONT CIRCLE, NW
WASHINGTON, D.C. 20036
Ask for item #440
15m-2/83

AFT Teachers' Network for Education
of the Handicapped

American Federation of Teachers, AFL-CIO
Educational Issues Department

The AFT Teachers' Network for Education of the Handicapped is intended to facilitate regular education teachers' ability to work effectively with handicapped children in their classrooms. The Network is involved in inservice training and preparation and dissemination of resources to teachers to help accomplish this goal.

In conjunction with its dissemination efforts, the Network is publishing a series of pamphlets on various disabilities for teachers who work with handicapped children. These pamphlets provide practical information for use in the regular classroom in relation to the following disabilities: hearing, visual, and orthopedic impairments; and special health problems, such as asthma and diabetes.

Carolyn Trice
Project Director

The work upon which this publication is based was performed pursuant to Grant #G007901295 with the Division of Personnel Preparation of the U.S. Office of Special Education and Rehabilitation Services. It does not necessarily reflect the views of that agency.

"...dyslexia is classified as a specific learning disability and funds are available through the federal government to provide special education services to children who have this diability."

If you ask ten people what the term dyslexia means, you will probably get a variety of responses. The following are typical answers to the question, "What is dyslexia?"

1. "Dyslexia...Oh, that's when a person can't read anything."

2. "Yes, my daughter's mildly dyslexic, because she sometimes reverses the letters 'b' and 'd'."

3. "Dyslexia is inherited. If a man is dyslexic, it's likely that his sons will also be dyslexic."

4. "It's a disease that affects an individual's ability to read well."

5. "When someone is dyslexic, he has brain damage, which leads to trouble with reading."

6. "I think half of my lowest reading group is dyslexic! There's nothing wrong with their vision or hearing, but they have a lot of trouble learning to read."

The common element in each definition is an emphasis on problems with reading. Perception of the extent of reading problems, however, varies greatly. The first definition implies that dyslexia means a total lack of reading ability, while the second quote conveys a much simplified situation. The third definition says that genetics plays a role in determining who is dyslexic, and the fourth statement equates dyslexia with a virus. Definition five indicates that brain damage accompanies dyslexia. Finally, the last quote indicates that dyslexic students are those who have difficulty learning to read, when this subject is taught according to traditional basal reading methods.

The term dyslexia was originally based on another term, alexia, which refers to an adult's loss of reading due to brain injury, such as cerebral stroke. Medical experts working with children who did not learn to read normally assumed these children had brain lesions similar to adults with acquired alexia. These children's difficulties were termed "developmental alexia," or dyslexia.

Although the medical definition of dyslexia, which indicates brain lesion, was commonly accepted during the the early 60's, a more contemporary definition reflects educators' viewpoints. Today most teachers, parents, and the general public do not usually associate brain damage with all dyslexic students. A more acceptable definition for dyslexia now centers on a *severe reading disability*, accompanying an individual with normal or better intelligence.

In 1968 The National Advisory Committee on Dyslexia and Related Reading Disorders investigated controversies surrounding the term dyslexia. Members of this group included educators, medical experts, psychologists, parents, and others servicing children with reading problems. Their findings were that "In view of these divergencies of opinion (among the group members) the Committee believes that the use of the term 'dyslexia' serves no useful purpose." (p. 38)

It is almost impossible to distinguish between a child with medical dyslexia and another with severe reading disability (Bond and Tinker, 1967). For reasons previously outlined, the remainder of this pamphlet will discuss the term dyslexia as synonymous with the term severe reading disability, focusing on the educational rather than the medical definition. It should be noted that under P.L. 94-142 of the Education for All Handicapped Children Act, dyslexia is classified as a specific learning disability and funds are available through the federal government to provide special education services to children who have this disabilty.

RECOGNIZING A STUDENT WITH A SEVERE READING DISABILITY OR DYSLEXIA

There are a number of commercial assessment instruments available, such as the *Dyslexic Schedule* (McLeod, 1968), which supposedly identify whether or not a student is dyslexic. But many of these tests do not involve students in regular reading activity. I believe that classroom teachers' observations are a more valid test of their students' reading abilities. Listed below are several observable characteristics and behaviors that may accompany reading problems. When students exhibit several

of these qualities in combination, their reading difficulties simultaneously become more complex:

- intelligence seems normal or even superior, but reading abilities are poor
- no signs of vision or hearing impairment and no medical history of brain damage, but reading tasks are difficult
- problems following oral or written directions
- easily distracted
- writing tasks, including copying, are difficult
- problems decoding words through phonics
- frequently disruptive during reading class
- generally seems disorganized
- poor attitude toward reading activities
- words or whole lines skipped while reading orally
- few techniques used to determine meaning of unknown words
- problems comprehending what is read
- motor coordination abilities not well developed
- spelling is very poor
- inability to quickly assimilate new information
- typical basal reading materials are not effective
- frequently makes comments such as "This is boring," or "I hate this stuff" when assigned reading tasks
- low performance on an informal reading inventory

An informal reading inventory (I.R.I.) can be given to a child whom you suspect has reading problems. This test will help you to determine students' instructional reading levels as well as to diagnose their problems while reading. Your reading specialist can give you more information on this type of test. Most general reading texts, such as those by Stauffer (1978) include a more complete description of this test, but a short synopsis will suffice at this point. The test requires a child to orally read an unfamiliar short passage of about 100 words. While the student reads, the miscues (unanticipated readings) are noted by the teacher. For example, if the student reads the printed text, "The boy saw the dog," as "The boy say the dog," the student's pronunciation of "say" would be a miscue, since it was an unanticipated reading of the original word "saw." This is a mispronunciation type of miscue, since the original word was mispronounced. Other miscue types include word omissions, insertions, and substitutions. After the student completes the oral reading, comprehension questions are asked about the reading passage. If the child makes more than 10 miscues (10%) and scores below 75% on the questions, the reading material is considered to be too difficult for the child to comfortably read during a regular reading group situation. By examining the types of miscues made, the teacher can determine if the child's difficulties are due to vocabulary, grammar, and/or phonics.

It should be noted that children's interest in the specific content they read can strongly affect their reading ability. Therefore, it is advisable to assess children's interests in reading. Inventories such as those developed by Miller (1974) may readily be used for this purpose.

"...children's interest in the specific content they read can strongly affect their reading ability."

WHICH OTHER PROFESSIONALS CAN HELP YOU?

Certainly you will want to refer a student with a severe reading disability for an evaluation to determine if special education services are needed, but in the meantime, whom can you go to for immediate help? If your school has a reading specialist, ask this person for assistance in planning your students' work. Of course, a learning disability specialist may also offer valuable information. Don't forget to integrate information and insight from parents. Ask other colleagues who have successfully worked with these or similar children in previous years to share their strategies. Some school districts have administration specialists who may visit your building and give suggestions on relevant methods or materials. Request help from your local teacher center if one exists in your community. If you feel you

"...the best form of treatment for students with dyslexia or severe reading disability seemed to be good teaching by the classroom teacher and a qualified special remedial teather."

need to update your knowledge on an independent basis, you might read some of the journals or selected portions from the resources listed at the end of this pamphlet. Or, you might consider enrolling in a dynamic staff develop or graduate reading course which emphasizes practical teaching ideas rather than theory only.

Other professionals such as neurologists, pediatricians, nutritionists, optometrists, oncologists, audiologists, etc., may be helpful in terms of diagnosing possible causes of students' difficulties. They will not be very helpful, however, in telling you how to teach your students to read. That becomes your primary duty, because you are the expert in educational matters. It certainly may help you to know what is influencing a student's difficulties, but the most effective way to overcome these problems is to directly teach reading abilities, rather than to spend most of your time trying to overcome causal factors. The ideal situation would seem to be a joint effort between you and selected specialists who can provide meaningful information for effective instructional plans.

FIFTY EFFECTIVE INSTRUCTIONAL STRATEGIES

Research during the 70's continually emphasized that the best form of treatment for students with dyslexia or severe reading disability seemed to be good teaching by the classroom teacher and a qualified special remedial teacher (Chall, in Samuels, 1978). The following suggestions highlight many teaching techniques and ideas that have been successfully used with severely disabled readers in classroom as well as in clinical settings. Please do not try to implement all of these ideas immediately, because you will simply become frustrated with this impossible task. Pick one or two suggestions to try at first. Select those ideas that seem most appropriate for specific children, as not all of the suggestions may apply to every child you work with. Then as you become comfortable with your initial efforts, gradually add more strategies to your teaching repertoire to facilitate your students' reading abilities. Don't expect miracles to happen instantly. Many of these students have experienced a history of reading failures and progress will be slow. This necessitates patience on your part.

1. Listen to your students. Note their hobbies and interests, using materials in these areas for reading asignments.

2. Provide background experiences prior to reading about specific topics. Not only will this heighten motivation to read, but it will also clarify information necessary for improved comprehension.

3. Create reading materials based on experiences of the children. This approach follows the language experience method outlined by Stauffer (1970). For example, following a trip to a local computer business, children dictate a story about the terminal's printout process. This story is then used as a the basis for vocabulary development and reading skill work.

4. Provide meaningful drill practice of vocabulary words only after the word has been identified in context of a sentence that the child understands.

5. Use teacher-made games to inexpensively practice skills such as sight word recognition. A modified game of "concentration" can quickly be assembled by writing two sets of selected sight words on index cards, spreading them face down, and then challenging a child to draw matched pairs of the words. Similarly, modifications of "go fish" and "old maid" can be developed.

6. Read to your students on a daily basis. This helps develop a positive attitude toward reading.

7. Gently encourage and provide positive support for your children.

8. Encourage cross-age or peer tutoring. If there's something you're having difficulty explaining, ask another child to explain it to the child you're teaching. Sometimes children can be more effective, especially if they explain something that was once difficult for them to master.

9. Maintain a sense of humor. Laughter can facilitate many learning situations.

10. Integrate all aspects of communication in your program, including reading,

speaking, listening, thinking, and writing. These abilities naturally accompany each other in our daily lives, and a false dichotomy should not be made in our schools.

11. Keep writing activities short and highly interesting. Letting children copy a recipe for chocolate chip cookies they have just prepared would certainly be more relevant than simply copying a ditto exercise.

12. Let the children create their own books. Sew pages together and bind the booklets in contact covered tagboard. The excitement of creating a personal book can greatly enhance students' desire to read their own books as well as those prepared by friends.

13. Let each child purchase a book if your school budget allows. Possibly RIF (Reading Is Fundamental, L'Enfant 2500, Smithsonian Institute, Washington, D.C. 20560) funds may be secured for these purposes.

14. Allow children to self-select a portion of their reading materials. They may not be able to read each word in their personal selections, but it is not necessary for students to know every word before some level of comprehension occurs.

15. If a child selects a book that is too difficult to read alone, you can read the book with the child several times. Then let the child read along with you. Finally, encourage the book to be read independently. This procedure allows the child to master an otherwise "impossibily" difficult book.

16. Tape record popular books and let the children listen to the recording as they follow the text. Gradually they will be able to read along with the recording and eventually will not need the help of the tape.

17. Some children will require extrinsic motivation beyond the verbal praise level. Charting the number of books read, for example, may encourage a few of your less willing readers to become more active.

18. Facilitate learning of new vocabulary with the use of word box files. One or two new words are written on an individual index card each day. On the back side of the card the word is placed in a sentence. These cards may be used for skill work later, such as alphabetizing, practice with certain phonic skills, and also for writing assignments.

19. Teach children to set purposes for their reading rather than reading without thinking. This active involvement with print will stimulate retention of information.

20. Emphasize a variety of strategies to unlock new words, including context, context plus phonics, and context plus structure.

21. Help your students learn to categorize. This ability to organize words, information, and ideas in specific categories will facilitate comprehension.

22. Sentence combining activities, in which the student rewrites two short sentences as one longer, more complex sentence also improves comprehension. Similarly, paraphrasing an author's work can be valuable practice. In these activities students are forced to put into their own words, the thoughts of others. Here the original author's intent must be understood before the ideas ca· be translated into the child's words.

23. Cut dialogue from the comic strip speech balloons and let children replace the original quotes with their own ideas about what the characters are saying. This encourages them to infer conversation from actions and setting.

24. Contact parents to tell them something special about their child's progress. This can have a very positive effect on the child, as the parent shares your message of praise.

25. Let children sometimes prepare their own quizzes to test the reading material they are to read. Their questions may begin with key words such as "what," "why," "who," "where," "when," and " how."

26. Let children make a quiz for you to answer. You select the reading material and first read it. Then give the passage to children and have them write questions to test your knowledge. Of course, this task necessitates the children's comprehension of the passage also, although most children will see this as a chance to test you, just as you frequently test other

"Teach children to set purposes for their reading rather than reading without thinking....active involvement with print will stimulate retention of information."

"Provide parents with ideas to involve their children in enjoyable reading related activities."

children's reading abilities!

27. Minimize distractions whenever possible. This may mean finding the most quiet area in an open space classroom, or constructing a small study carrel from tagboard to block out visual distractions.

28. Let the paraprofessional help you to personalize instruction for students who generally require additional attention.

29. Be satisfied if your student reads one page well, although most of your other normal children read three and four pages in the same amount of time. Quality, not quantity, is important.

30. Let your poorer readers rehearse a play or choral reading and then read this for the entire class. In overlearning the script they will be memorizing many basic words.

31. Plan activities in which the students cannot fail.

32. Make your classroom an interesting, involving, exciting place to be. As one student said, "School is a lot better when it's fun, 'cause then I want to learn. It's better that way."

33. Combine creative dramatics with reading. Spontaneously acting out a story will help children better understand the story's sequence, character relations, plot, etc.

34. Don't make comparisons between students with a severe reading disability and average children in an attempt to encourage the lower performance children to improve. This practice generally is self-defeating, as the poor readers feel discouraged, rather than motivated to try harder.

35. Occasionally give students your test questions before, rather than after, they read a specified selection. This way they will have a clearly defined focus for their reading, rather than trying to remember everything they encounter.

36. Never assign a reading task as punishment.

37. Make raised letters by allowing white liquid glue to dry in the shape of desired letters and words. Children can feel the letters better as they trace over this dried glue. Letters cut from sandpaper are also good for tactile reinforcement.

38. Incorporate sustained silent reading in your plans. During this time, both you and your students silently read self-selected materials for a pre-determined amount of time (usually 10-15 minutes). By reading rather than completing lesson plans, you demonstrate that you really value reading.

39. Use ditto worksheets and workbook pages as infrequently as possible if they deal with isolated skill areas. These exercises are viewed by children as having absolutely nothing to do with reading for meaning.

40. Do use real life reading materials found in our every day activities. There is a wealth of reading material in public buildings, the newspaper, and in the supermarket, to mention a few spots.

41. Build reading assignments around children's favorite television programs. Scripts, follow-up exercises and a teacher's guide can be acquired for many of these programs by writing to Dr. Michael McAndrew, Director of Educational Services, Capital Cities Communications, Inc., 4100 City Line Avenue, Philadelphia, Penna. 19131. Original scripts can be prepared by students. TV guides are an additional source of interesting reading material.

42. Use camera or video tape equipment if this is available to film scenes which the children can later write and then read about.

43. Provide parents with ideas to involve their children in enjoyable reading related activities. Such suggestions as reading to their children or finding all the items in the garage that begin with the same sound that "car" starts with are simple easy ways to begin. *Summer Reading Is Important* by Micklos (1980) is a pamphlet recently published by the International Reading Association that provides many other excellent suggestions.

44. Select high interest, low vocabulary materials for older students, rather than using primary grade materials that generally are not very interesting for teenagers to read.

45. Create a newspaper made by the children. Various columns such as a feature section, want ads, weather, family section, cartoons, etc., can reflect the

students' divergent talents and interests. Children dictate their material to you if they cannot write it themselves. This information is put on a ditto, which is later run off by the student in charge of "printing." This newspaper is then used as a source of reading material, and it is later sent home to parents to inform them about what is happening with your class.

46. Use a variety of print material besides books for sources of reading. Signs, filmstrips, and magazines are readily accessible. Some magazines, such as *People*, are excellent sources for older students, because they are written at an upper elementary level of reading difficulty.

47. Provide spaced practice of new vocabulary and reading skills after they are introduced. Emphasize these words and skills in different contexts for variety. If they are stressed only on the day they are introduced, they will not be remembered. Spaced practice insures their mastery.

48. Use popular songs as reading material. Children continually listen to the lyrics of many of these songs at home, and these can readily be adapted to work with word recognition, vocabulary development, comprehension, phonics, and many other reading related skills.

49. Hobbies can be an excellent source of reading. Many model kits are available with simple directions to be read and followed. Simple make-it books such as *I Saw a Purple Cow and 100 Other Recipes for Learning* (Cole, Haas, Bushnell, & Weinberger, 1972) involve reading activities.

50. Provide alternative activities, so that students have options from which to select their tasks. When students feel they have no alternatives, pressure may build to the explosion point. This is especially true with secondary students.

These fifty ideas are only a starting point. I am certain that you have many other ideas which are just as good, if not better than these suggestions.

In my experience working with dyslexic students I have never encountered elementary or secondary pupils who did not respond favorably to instruction by conscientious teachers. A success-oriented viewpoint is essential in working with students who experience severe reading disabilities. This positive attitude, in combination with carefully planned instruction, will lead to students' improved reading abilities.

"Use a variety of print material besides books for sources of reading."

References referred to in text

Bond, Guy L. and Miles A. Tinker, *Reading Difficulties: Their Diagnosis and Correction*, 2nd ed. New York: Appleton-Century-Crofts, 1967.

Chall, Jeanne, "A Decade of Research on Reading and Learning Disabilities." In S. Jay Samuels (Ed.) *What Research Has To Say About Reading Instruction*. Newark, Del.: International Reading Association, 1978.

Cole, Ann, Carolyn Haas, Faith Bushnell, & Betty Weinberger, *I Saw a Purple Cow and 100 Other Recipes for Learning*. Boston: Little, Brown & Co., 1972.

McLeod, John, Dyslexia Schedule, Cambridge: Educators Publishing Service, 1968.

Micklos, John Jr., *Summer Reading Is Important*. Newark, Del.: International Reading Association, 1930.

Miller Wilma H., *Reading Diagnosis Kit*. New York: The Center for Applied Research in Education, 1974.

National Advisory Committee on Dyslexia and Related Reading Disorders. *Report to the Secretary of the Department of Health, Education and Welfare*. August, 1969.

Stauffer, Russell G., Jules C. Abrams, & John J. Pikilski, *Diagnosis, Correction and Prevention of Reading Disabilities*. New York: Harper & Row, 1978.

Stauffer, Russel F., *The Language Experience Approach to the Teaching of Reading*. New York: Harper & Row, 1970.

RESOURCES

The following sources may provide you with additional information about dyslexia and severe reading disability:

I. Journals

Exceptional Children and *Teaching Exceptional Children*
Council for Exceptional Children
1920 Association Drive
Reston, Virginia 22091

The Journal of Learning Disabilities
101 East Ontario Street
Chicago, Illinois 60611

The Journal of Special Education
Button Wood Farms
3515 Woodhaven Road
Philadelphia, Pennsylvania 19154

Language Arts
National Council of Teachers of English
1111 Kenyon Road
Urbana, Illinois 61801

Reading Horizons
Western Michigan University
Kalamazoo, Michigan 49008

Reading Teacher
International Reading Association
800 Barksdale Road
Newark, Delaware 19711

II. Texts

Gillespie-Silver, Patricia. *Teaching Reading to Children with Special Needs*. Columbus, Ohio: Charles E. Merrill, 1979.

Kaluger, George and Kolson, Clifford J. *Reading and Learning Disabilities*. Columbus, Ohio: Charles E. Merrill, 1978.

Lee, Grace E., and Berger, Allen. *Learning Disabilities with Emphasis on Reading*, (an annotated bibliography). Newark, Delaware: International Reading Association, 1978.

Lerner, Janet W. *Children with Learning Disabilities* (second edition). Boston, Mass.: Houghton Mifflin, 1976.

Savage, John F. and Mooney, Jean F. *Teaching Reading to Children with Special Needs*. Boston, Mass.: Allyn and Bacon, 1979.

Sawyer, Diane J. (Ed.) *Disabled Readers. Insights, Assessments, Instruction*. Newark, Delaware: International Reading Association, 1980.

III. National organizations

Association for Children with Learning Disabilities (ACLD)
5225 Grace Street
Pittsburgh, PA 15236

Closer Look
Box 1492
Washington, D.C. 20013

The Council for Exceptional Children (CEC)
1920 Association Drive
Reston, VA 22091

The Orton Society
8415 Bellona Lane
Towson, MD 21204