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ABSTRACT

This magazine brings together articles on various aspects of learning disabilities (LD), focusing on the early years, the LD experience, socialization, thoughts for parents, and innovative programs in schools and communities. Some of the articles are: "The 'Stuff of Dreams': The Yale Center" (William Ellis); "Elements of Effective Inclusion" (Dorothy E. Hively); "Project IEP: An Emergent Literacy Approach to Preschool Special Education" (David S. Katims); "Can Reading Disabilities Be Prevented?" (Joseph K. Torgesen); "The Experience of LD Students" (Matt Lanigan et al.); "The Library for the Study of Learning Disabilities at Ashland, Kentucky Community College" (Helen Johnson Ashworth); "Substance Abuse Rehabilitation and Learning To Read" (Joan Knight and Joan Randell); "Coping and Advocacy Skills for the Learning Disabled" (Sarah Ginsburg); "Bridging the Gap: Life Skills Materials and Teaching" (Ellen Dietz); "Social Skills: The Bottom Line for Adult LD Success" (Marnell L. Hayes); "The Social and Emotional Side of Learning Disabilities: Characteristics and Interventions" (James Javorsky); "Our Children's Best Advocates: The Amazing Power of the LD Parent" (Susan Lapinski); "The Learning Disabled Child and the Home" (Cheryl G. Tuttle and Penny Paquette); and "Education beyond Classroom Walls: The Newgrange Community Outreach Center" (Kate O'Neill). Information about the National Center for Learning Disabilities is appended, along with a resource list. (JDD)

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ED 372 530

THEIR WORLD

A PUBLICATION OF THE
NATIONAL CENTER FOR LEARNING DISABILITIES • 1994

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About Learning Disabilities

Millions of children and adults across the United States suffer from learning disabilities (LD). Believed to be neurological in origin, learning disabilities interfere with an individual's ability to store, process or produce information. Because it is often a "hidden handicap," learning disabilities are not easily recognized, accepted or considered serious. LD can affect one's ability to read, write, speak, or compute math, and can impede socialization skills.

Learning disabilities create a gap between a person's true capacity and his or her day-to-day performance.

Early diagnosis and appropriate intervention and support are critical for the individual with LD. Without early detection and intervention, LD can lead to a complete loss of self-esteem and, consequently, school dropout, substance abuse, juvenile delinquency, illiteracy and other serious problems.

A FEW FACTS

- An estimated 10 percent of the U.S. population have some form of learning disability.
- Individuals with LD are generally of average or above average intelligence.
- LD often runs in families.
- It is believed that LD never goes away, but can be compensated.
- Attention deficits and hyperactivity are sometimes coupled with LD, although not always.
- 30-60 percent of adults with severe literacy problems have learning disabilities.
- 40-70 percent of juvenile delinquents tested were found to have undetected learning disabilities. When offered remedial services, their recidivism rates dropped to below two percent.
- 35 percent of students with learning disabilities drop out of high school, contributing greatly to the nation's school drop-out rates.
- Federal law (PL 94-142) and IDEA (Individuals with Disabilities Education Act) mandate that all children with learning disabilities are entitled to a "free" and "appropriate" education in "the least restrictive environment."

COVER PHOTO BY CLAIRE YAFFA

The National Center for Learning Disabilities is one of the foremost national not-for-profit organizations committed to improving the lives of those affected by learning disabilities.

NCLD'S Mission is to promote public awareness and understanding of, and provide national leadership on behalf of, children with learning disabilities, so they may achieve their potential and enjoy full participation in our society.

Established in 1977 by Carrie Rozelle, NCLD is now under the committed leadership of Anne Ford, Chairman of the Board, and is located in New York City.

Primary Program Areas

- **National Information & Referral Service:** NCLD provides the latest information on learning disabilities and the resources available to parents, educators and other professionals dealing with children with learning disabilities. Thousands of requests are handled each month. NCLD's I & R Service is the nation's only central, computerized resource clearinghouse committed solely to LD, and is an important source of information in the learning disabilities field on developing trends and unmet areas of need.
- **Public Outreach, Communications & Advocacy:** NCLD conducts one of the nation's broadest public awareness programs about learning disabilities and their serious impact on society. Through media outreach and tools such as an annual publication, Newsletters, an educational video with study guide, and public service announcements, NCLD promotes and expands public understanding of LD. NCLD's active presence in Washington, D.C. provides ongoing awareness of, and education on, the need for more effective public policies and legislation to help individuals with learning disabilities.
- **Educational Programs:** NCLD develops and supports innovative programs assisting those with learning disabilities, and those who can help them, through seminars, workshops, conferences, collaborative projects with other national service organizations, and the national replication of successful model programs.



National Center for Learning Disabilities, inc.

381 Park Avenue South, Suite 1420 New York, NY 10016 (212)-545-7510



PHOTO BY CLAIRE YAFFA

About the Cover

Six-year-old Kaz Klein, shown with his grandfather, Armando Santiesteban, is fortunate that his Attention Deficit Hyperactivity Disorder (ADHD) was detected early. His mother suspected that he had a problem while he attended nursery school and brought him to be evaluated at the Rose F. Kennedy Center's Children's Evaluation and Rehabilitation Center at Albert Einstein College of Medicine, Bronx, New York. Kaz's learning disability relates to difficulties he has with fine motor skills. The first-grader currently receives therapeutic services at the Center and, his mother reports, is doing well in school.

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PHOTO BY CLAIRE YAFFA

NCLD thanks all of the children and adults who gave permission to use their photographs, artwork, articles, and poetry for this issue of *Their World*.

PLEASE NOTE: The contents of the articles published in this magazine reflect the views of the authors only, and not necessarily those of the National Center for Learning Disabilities or its officers or directors. Articles submitted will not be returned. NCLD is most appreciative for the messages of support that make this publication possible, but does not necessarily endorse any of the products or companies advertised.

Children and adults whose photographs appear in *Their World* are not necessarily learning disabled, and are not directly associated with the article in which they appear.

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We Can Learn, the exciting new video series on 1/2" VHS videotape, with its accompanying study guide, is full of good news for children with learning disabilities.

Produced by the National Center for Learning Disabilities (NCLD) in cooperation with WNBC-TV, New York, *We Can Learn* is an important resource for parents, teachers and professionals. In language that is easy to understand, the five eight-minute segments tell you:

- what learning disabilities are
- their impact on the individual, family, school and community
- all about the assessment process
- the legal rights of children with learning disabilities
- how to get the right services for the child

Message From the Chairman

by Anne Ford

With 10% of Americans affected, each of us, whether we know it or not, knows someone with a learning disability.

I am the mother of a learning disabled daughter, now a young woman striving to be independent. Our struggle with her learning disability has been long and sometimes painful, but never without hope. With loving support, a learning disabled child can be a successful achiever and can lead a fulfilled life.

The National Center for Learning Disabilities is committed to help all children with LD reach their full potential. This requires a commitment from every concerned citizen to educate our communities about learning disabilities, to express our outrage when children do not receive their entitled services and above all to *collaborate*. There is truly strength in numbers. We *must* retain the legislative gains made over the last two decades. We *must* see that all children get an education that truly prepares them for the future.

Half the adults in our country lack adequate reading and math skills. More alarming, all the literacy initiatives taken together serve less than 10% of those 40 million Americans identified as functionally illiterate. We really do not know how many people are illiterate because so many hide the fact out of shame. Reading and writing are not ends in themselves, they are tools that empower us. Up to 60% of the illiterate started out with learning disabilities. If they had not been discouraged by a system that failed to treat the real problem, they would be able to read and write today. This is *preventable illiteracy*. Identifying learning disabilities *early* prevents the national tragedy of so many wasted lives and so much wasted potential.



Those who are illiterate or learning disabled share such common problems as low self-esteem, feelings of vulnerability, and humiliation. They are denied the wonders of life itself. Too often we worry more about the academic ramifications and forget the social problems that affect the person with learning disabilities. As adults, we know the importance of high self-esteem, especially in the workplace.

To change this will take greater citizen participation. It requires the coordination of many people and organizations working together—just as my great grandfather Henry Ford said in 1903: *“I invented nothing new. I simply assembled into a car the discoveries of other men behind whom were centuries of work. Progress happens when all the factors that make for it are ready and then it is inevitable. To teach that a comparatively few men are responsible for the greatest forward steps of mankind is the worst sort of nonsense.”* I believe that the time is right for this coordination and collaboration.

It is my hope that all of us — parents, teachers, administrators, doctors, concerned citizens and organizations related to our cause — can band together to effect positive change. We have an obligation to future generations to see that they have the best chance, the best opportunity to reach their true potential. NCLD believes its efforts will make a difference to the millions of people with learning disabilities.

Editor's Note: This commentary has been shared by Anne Ford in several forums this year. THEIR WORLD believes the message to be so important that we have asked permission to publish it here.

About This Issue

By William Ellis, Executive Editor, THEIR WORLD

In presenting THEIR WORLD '94 we reaffirm our abiding faith that our nation will ultimately come to know even more powerfully than before the riches which the population of the learning disabled bring to the collage of our community. Many of the articles in this issue are written by individuals who themselves have known the facts of life of being learning disabled in a very personal way. And what a creative group they are!

This issue also testifies to the reality that learning disabilities remain with the individual for a lifetime. The courage demonstrated each day by each individual in order to simply live as others do is the cause of our undying affection and admiration. It takes a lot to survive as a learning disabled individual in a world which is often only convinced of something which it can see, and even then, is not always free of skepticism. In spite of the Americans with Disabilities Act, years of legislation, and large scale public awareness activity, the reality of learning disabilities continues to elude some and our sometimes awkward implementation of services convinces many that there either is no such thing, or, if there is, too many wear the label.

Though we agree that comparisons are not always worthy, it is sometimes a tougher road to follow than for some others in the sense that it is difficult to visibly demonstrate the disability. For those with learning disabilities and ADD, the hidden disabilities, there appears always the need to convince the world over and over again that this is not all a figment of someone's wild imagination. The realities are amply demonstrated in the testimonies of many of our writers. We are particularly delighted in this issue to be able to include the comments of young people from schools throughout the country. They know in the way that the critics do not, what it means to live the life of a young person with learning dis-

abilities. One always wishes that the critics and naysayers could spend even an hour in their shoes, and do it with equal flair and magnanimity.

We are pleased, also, in this issue, to be able to bring a taste of the outstanding work that is being done in the research arena. These endeavors lend greater and greater support to our understanding of the underpinnings of cause and treatment which is so vital if we are to successfully improve the lives of those who never lose the feeling that they are somehow different, unfulfilled or realized, disassociated, isolated, hidden, and, often, ashamed. One of the most ebullient and successful reporters we know, a participant at one of NCLD's summits, who gives children and their parents hours of pleasure, to the world successful in every way, recalls how he failed to get a part in a movie because he could not read the script during tryouts. This is the experience which so many with learning disabilities have — important doors are closed because the brain blocks information to even the most intelligent among us. It is the human face of learning disabilities. **Events like these need not happen. We already know how to prevent the possibility of a lifetime of struggle. Prevention must become the name of our game.**

The money expended on research is so minimal when compared to the human suffering which understanding can alleviate. The convergence of common understandings from a wide variety of researchers in different disciplines is the exciting result of the efforts which have been expended through the interest of the National Institutes of Health. The particular interest of the National Institute of Child Health and Human Development in longitudinal research lends a special credence to the results which are being obtained. The great challenge is for us to translate these findings

Phonological Awareness

Analyzing and combining the smallest units of discernable sound (phonemes) in varieties of ways, in order to connect the symbols (letters) which represent them, to specific meanings.

into specific strategies which work for children in the classroom.

Particularly, NCLD is delighted to see the firmness with which so many outstanding researchers are indicating the crucial relationship of phonological awareness to the reading process. This is true for all of us, and how fortunate are those of us who develop that awareness painlessly. For too many, however, there must be direct and explicit teaching in order for the potential reader to break this code.

The research in this area is so compelling that the question is not, should we teach phonological awareness, but how should we incorporate it into the particular approaches which are being used in the teaching of reading? Phonological awareness taught effectively to the youngest of our school age children has the potential to break the back of the cycle of failure borne by so many young people today. The needs of a significant minority dictate a re-thinking by many leaders in the reading field. It is an imperative. Several articles relate some of the exciting and recent movement in our understanding of learning disabilities, their causes and treatment, and **THEIR WORLD** is pleased to share with our readers the honorable place that NICHD has developed for itself in this very critical work.

The variety of experiences expressed through the collection of articles comprising this issue of **THEIR WORLD** brings its own eloquence to this most fascinating and frus-

trating of the hands which we each can be dealt in life. The resilience and creativity of the individuals who share learning disabilities as a common theme of life continues to be a source of profound respect. I thank and congratulate all who have contributed so freely to the publication of the 1994 issue of **THEIR WORLD**.

I particularly want to thank my colleague, **Janet Weinstein**, who works so assiduously to bring about the production of this magazine. The entrance of baby Ben, an addition to a growing family, undoubtedly brought its own job related stress on top of the immense pleasure of Ben's birth. She has managed it as beautifully as one can, and the production of **THEIR WORLD '94** has run as smoothly as ever. Janet's work is truly appreciated.

I am also, as ever, deeply indebted to **Claire Yaffa**, whose pictures grace the pages of this issue. She captures the tone and the mood, so that blending all the elements into a coherent whole becomes a task of sheer delight.

The National Center for Learning Disabilities is operated by a very small staff, all of whom at one point or another become involved in the development of **THEIR WORLD**. No one could ask for a happier, more talented, and committed group of colleagues with whom to share the adventure. So to Shirley, Rose, Bernadette, Marcia, John and, of course, dear Anne, my very special thanks. We all hope that you will enjoy **THEIR WORLD '94**.

Examples of Phonological Awareness Tasks

- **Phoneme Deletion:** What word would be left if the /k/ sound were taken away from cat?
- **Word to Word Matching:** Do *Pen* and *Pipe* begin with the same sound?
- **Blending:** What word would we have if you put these sounds together: /s/, /a/, /t/?
- **Phoneme Segmentation:** What sounds do you hear in the word *hot*?
- **Phoneme Counting:** How many sounds do you hear in the word *cake*?
- **Rhyming:** Tell me as many words that you know that rhyme with the word *cat*.

Taken from Stanovich, Keith E. "Romance and Reality." *The Reading Teacher* Vol. 47, No. 4, December 1993/January 1994.

The "Stuff Of Dreams:" The Yale Center

by William Ellis

It could almost be any doctor's waiting room, almost! It is a room perhaps too small, its walls lined with upright chairs, the basic decor of an institutional waiting area set in the plain environs of a dull, disinterested apartment house. The room holds no banks of files, no receptionist's desk, and the men and women who inhabit it show none of the tension of the usual doctor's waiting area. The art work of children is displayed on the walls but it is not the usual pediatrician's office, with the clutter of toys, books strewn, and endless sniffles.

Walking in on it, the occasional visitor recognizes it but doesn't recognize it. It has its own character, it is its own place. A quiet place, a peaceful place, an expectant, hopeful place. Nothing in the air of this room says, "bad news ahead." The voices here say "Hope, look forward, there are answers." No one here will be invading the body to weed out disease. No one here will be bringing the news of death versus life. Everyone here will be filling the coffers of understanding to overflowing. No wonder those waiting are calm. They know that they are in a special place.

Through this ordinary room flow the makers of extraordinary strategies and the creators of prolific adventures and discoveries. And it is a graceful and dynamic melding of the spirits, lives and talents of children and emigrants and practitioners and parents and engineers and physicists and teachers and testers and psychologists and nurses...they all come together to create science. It is here that these effervescent pioneers have, in large measure, created the "Science of Learning Disabilities." This simple room is to understanding children and their learning as Edison's lab, Leonardo's studio, Churchill's war room were to great former endeavors. Lofty ideas and simple beginnings and exciting results! This is the "stuff of dreams" and from here

dreams will be and are being fulfilled. All of this made possible by the financial support and commitment of a university and a government. Their action has permitted learning and attention disorders to become matters of major importance to this country, "worthy," according to these pioneers, "of world class study."

Learning Disability Research Centers

Yale University's Center for the Study of Learning and Attention is the brain child of Drs. Sally and Bennett Shaywitz. It is one of three multidisciplinary research centers funded by the National Institute of Child Health and Human Development (NICHD) of the National Institutes of Health to develop "new knowledge in the area of etiology (causes), diagnosis, prevention, treatment and amelioration of learning disabilities."

There are three centers including the one at Yale. Each center is examining its own set of questions. Each works independently of the



CLAIRE YAFFA

other, but in a cooperative and collegial way there is an effort to forge a common language so that results have a potential for comparison. Johns Hopkins University's center is looking, as one example, at the relationship of conditions such as neurofibromatosis, Tourette Syndrome and Fragile X Syndrome to learning disabilities. The Center at the University of Colorado is studying questions concerning the genetics of reading disability, mathematics,

The National Institutes of Health, and Learning Disabilities

Learning Disabilities, for a number of years, have received the attention of the National Institute of Child Health and Human Development. Research, which the Institute has sponsored over these years, has begun to yield some dramatic conclusions which will have far reaching consequences for teachers and practitioners. In this article and the one on The Prevention of Reading Failure written by Dr. Joseph Torgesen, several aspects of the research are explained.

NICHD scientists are interested in the causes of learning disabilities and the genetic aspects of many of them. Through this understanding it is hoped to determine:

- the specific instructional and environmental needs for these children, to effect teacher preparation; and
- the brain systems responsible

for such processes as attention, listening, speaking, reading, writing.

Findings to date show that:

- The ability to read depends upon rapid and automatic recognition and decoding of individual words.
- Slow and inaccurate decoding and sounding out of words are the best predictors of poor reading comprehension.
- The inability to segment words and syllables into abstract constituent sounds (phonemic awareness) is the major cause of deficient reading. Few teachers in the United States know how to address the role of phonemic awareness in reading.
- At least 10%-15% of all potential readers must be taught with an appropriate phonological approach if they are to become successful readers.

Whole Language approaches are not suitable for these individuals unless accompanied by explicit instruction in phonological awareness and decoding skills.

- Dyslexia and Attention Deficit Disorder are separable and distinct disorders. They can, in some instances, co-occur in individuals.
- The gender ratio among reading disabled individuals is no different than that of the gender ratio in the overall population. However, boys tend to demonstrate more severe forms of reading disabilities than girls.

Utilizing the latest technology, including imaging techniques, NIH research is helping us to map how the biology of the human brain allows us to achieve complex behaviors like speaking, reading and listening.

and attentional disorders in children. Efforts at Yale, along with those of the other centers, are, after a breathtakingly short time, reaping dividends in knowledge and, ultimately, practice, which far outweigh the amount of money, on the public's behalf, which NICHD has invested in them. Most exciting of all is the convergence of understanding which is beginning to evolve from these varied centers of study.

Yale's Center

Yale University's Center for the Study of Learning and Attention began in 1989. The idea for such centers grew out of a National Conference on Learning Disabilities jointly funded by the Interagency Committee on Learning Disabilities and the Foundation for Children with Learning Disabilities [now the National Center for Learning Disabilities (NCLD)]. A major recommendation of the conference outlined in the Report to Congress led



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to congressional support for substantial research into learning disabilities. This commitment gave birth to the exciting work being conducted at the Yale center as well as the energizing results being obtained by that work.

"Birth" is an appropriate metaphor for the efforts at Yale. The ambience of the center, the

brightness and cheeriness of its staff, the dynamic of its action, the embracing of the newest technologies suggests the vibrancy of young, energetic and forward looking life. Creation of this life has come about by the conjunction of two essential events. First, public awareness has been heightened by the efforts of groups such as the National Center for Learning Disabilities. Legislators came to understand the importance of LD and the devastating effects of doing nothing about it. Second, scientific knowledge is advanced enough now to be able to conduct the kinds of studies which will bring about helpful answers and understandings. LD is clearly important in this world.

The center conducts various kinds of research and is funded to carry it on over a period of time. Longitudinal research of this kind has the advantage of gaining more than just a brief, momentary glimpse of the subject under study. So much of the research which is conducted in the educational realm provides no more than a glimpse, so that there is no way to discern the emergence of patterns from which comprehensive understanding comes.

The Connecticut Study

Take, for example, an opportunity to follow the progress of several hundred children over a long period of time, monitoring what happens to their academic development and what variations naturally occur in this development. From such a study researchers can begin to generalize about questions such as:

- How often does under-achievement occur (prevalence),
- What types of achievement patterns exist among the variety of groups of children (type), and
- How stable are patterns of academic under-achievement over time (consistency)?

Out of the observation of children with regard to these questions comes a clear picture

of what normal expectations of children's learning patterns might be. From it, also, will come the understanding of which children are far removed from that norm and why.

Imagine if you could find enough children to be a really representative sample and that you could follow them for an extended period of time! That is exactly what the Shaywitz's have done. Starting in 1983, long before the NIH funded center, they began to follow the progress of 445 Connecticut kindergarten children scattered around 12 Connecticut towns and in 24 Connecticut kindergarten classes. Most of these children are now in 10th grade and Abigail Shneider, who directs the study, is still in touch with 414 of them, now scattered throughout Connecticut, 24 states, Puerto Rico, England, Spain, and Germany.

Each year the individuals in the sample are administered a battery of tests, including the Woodcock Johnston Psycho-Educational Battery and, every other year, the WISC-R. Abigail says that in one overseas instance a psychologist drives for two hours to administer the tests to one student and receives no stipend other than the pleasure in knowing that he is making a contribution to a very important study!

Additionally, the student's teachers complete a comprehensive survey devised by the Yale researchers which they call the Multigrade Inventory for Teachers (MIT). This asks for ratings on the student's attention skills, adaptability, social skills, language skills, academic proficiency, and behavior. There is also a survey to be completed by the student, an evaluation by the student's counselor and the student's school report card.

Analysis gleaned from these data is helping the researchers to understand what factors make a difference, what factors influence how individual children learn, and what factors are detrimental to learning. It is the hope of the researchers to continue the study for a long time to come. The information already derived is very rich. Intriguing is the prospect that we will be able, with some certainty, to determine whether IQ fluctuates and how language problems relate to ADD.

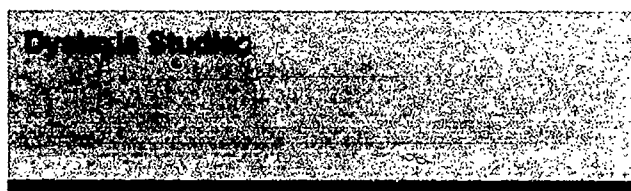
If that is not enough, Abigail and the staff produce for the participants in the study a quarterly newsletter of observations and information about the work. Abigail exudes the confidence and pride in the activity which all the participants undoubtedly feel.

A Matter of Attention

Karen Marchione positively beams when she describes "her" children and their families. Attention Deficit Disorders are frequently misunderstood and not easily diagnosed. The same careful longitudinal approach characteristic of the center's work is shown here. Comprehensive evaluation of, now, 320 youngsters over a four day period is producing extensive data from which important generalizations will be made about how to identify and distinguish among the learning disabilities, attentional deficit disorders and oppositional conduct disorders. The data are derived from a considerable array of tests in the full range of learning and problem solving tasks, language development, and biological processes. These include a highly sophisticated electrophysiological study and biochemical studies, too, for example, a urinalysis through which neurotransmitters can be followed. They will create the base for observations about the interrelationships of these conditions, what causes them, how to treat them. By the time the study is completed 620 children will have been evaluated.

The facility in which the evaluations take place is clearly friendly to these children and their families. A kitchen for waiting parents lends a homey touch, and the walls are decorated with the kind of art intriguing to children. This is just as well for, imagine entering a small room alone with electrodes attached to your head to sit for 45 minutes and perform cognitive tasks! All of these children have done it and the fact that none of them has balked is testament to examiner D'Arcy Fazio, who comes to her task with the reassurance of

somebody who in fact has, professionally, taught many to swim. The skills needed to help people to overcome the fears of water have turned out to be a significant preamble to the enormous skill involved in putting children at ease through this process. D'Arcy epitomizes the general kindness towards and love of the child which is so clearly evident in this place. Testers, whether observing brain waves or taking a child through a word or problem solving game, temper their objectivity with sensitivity.



Among the most compelling and the most popularly well known of the many studies being conducted by the Yale researchers are those related to the problem of dyslexia. Clearly, this language related disorder predominates in the spectrum of learning disabilities and for significant numbers of these and other children, reading disorders have the highest debilitating potential for prohibiting successful life.

Analysis of the data collected from 376 children has shown, among other things, that girls are as likely to be dyslexic as boys and that the criteria by which school systems label the child are so rigid that classification of the children, back and forth, over time is not stable. The continuing studies will show what happens to learning disabilities as the individuals get older, and what affects them.

A significant factor causing reading disability is the deficit in phonological awareness. (With phonological awareness we first comprehend the phoneme, or smallest unit of discernable sound, and then blend those sounds together to decode or identify and then understand the word. We all do this all the time however old we are and wherever we come from, and many of us do it easily without instruction. We are the lucky ones.) The Center's collaboration with the nearby



Haskins Research Laboratory, particularly the work of the late Isabel Liberman, reinforces and confirms the understanding that phonological awareness is a must in order to break the language code utilized in reading. Without it we cannot read, and for a significant number of us it is why we do not read. This finding alone is a major convergent understanding to have been derived from the work of the centers.



Within only the last few months the technology which allows us to peer into the actual brain while specific tasks are being undertaken has moved forward dramatically. As part of the research each child takes his or her place inside the giant magnet, doing so with the delight of the young idealistic inquirer and without the fear which more cautious adults take on in such a situation. Still pictures showed us some of it but now, what is known as functional MRI shows the actual impulses at work in the brain. What we thought of as specific sites for certain functions are now being shown as parts of broader systems touching various parts of the brain and across hemispheres. This technological advance is on the cutting edge of discovery and holds the

promise of opening up the potential for even greater knowledge and understanding.

Drs. Shaywitz and Shaywitz talk with the indisputable conviction of people who know where they are going and with the greatest of enthusiasm for the journey. They raise interesting and probing questions – the mark of true scientists – and they insist that the study of learning disabilities is a worthy field for scientific investigation. They, their colleagues and their staff exemplify the very best of inquiry, scholarship and humanity. The results of their work have already enhanced, and will continue to do so, the prospects for countless individuals who, heretofore, have been too often discarded by an unappreciating and unyielding society.

When talking about the MRI studies, Dr. Sally Shaywitz says, "We are entering into a

whole new world." With the Yale Center and those at Johns Hopkins and Colorado at the helm, all those who care about LD and attention disorders can only be delighted beyond measure. Whatever that new world brings will be taken in stride because these leaders have fortified themselves with the greatest of skills and tools to ride out the uncertain seas of understanding.

There are those who have questioned the efficacy of spending public monies on projects such as those described above. When compared to the enormous cost to society of dealing with the consequences of not doing so there can be no question. One minute soaking in the calm and optimistic anticipation of that waiting room will convince even the most skeptical.

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The Early Years



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Elements of Effective Inclusion

by Dorothy E. Hively

As you enter the Superstart Plus Prekindergarten and Kindergarten Plus classrooms at P.S. 171 in Queens, New York, children are busy working in learning centers, independently moving from one area to another. An observation of each classroom quickly reveals a diverse environment, rich in resources and staff. Related service providers, as well as supervisors, move in and out of classrooms without disrupting learning. Parents are participating in classroom activities. Children, teachers, and paraprofessionals do not distinguish between children with learning disabilities and their nondisabled peers. Developmentally age appropriate learning is the focus for all children. This is inclusion at its finest.

The 1993-1994 school year begins the third year of inclusive education in Community School District 30 Queens. During this period, it has become evident that in order to implement an inclusion program successfully, in any school, on any level, certain prerequisites must exist at the local school before the children arrive. These prerequisites, or elements of inclusion, include a supportive school structure, adequate resources, and total school/community involvement.

Supportive School Structure

Supportive school structure means that principals, supervisors, teachers, support staff, and parents have the necessary time and resources to create an environment that is fully integrated on all levels and that meets the needs of all students, disabled and nondisabled, in the inclusive classroom. Supportive



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school structure is achieved through responsible leadership and long term planning.

The principal should be supportive of the philosophy of inclusion, and have a leadership style that encourages innovation in the classroom. In fact, it was the principal of PS 171 who persuaded the district to put this model program in place. The principal must also be willing to change current perceptions of what constitutes an appropriate classroom environment.

Volunteerism is crucial in creating a supportive school structure. The teachers and paraprofessionals at PS 171 volunteered to participate in the inclusion program. Staff members, both teachers and paraprofessionals, need time to develop cohesive staff relations. They need time to work in a collaborative environment.

The school schedule must have time built in for common teacher preparation. Special education teachers and general education teachers working in inclusive classrooms need time for consultation and collaborative preparation.

Teachers have traditionally been taught to work in isolation, and, to teach children in either separate general education or special education settings. They often lack university preparation in working in inclusive settings.

Related service providers and paraprofessionals should be included in the common preparation process as often as time permits. The input and observations of paraprofessionals are essential. Initially, in our inclusion program at PS 171, paraprofessionals were not included in the planning process. They were not then fully prepared to assist in the implementation of the teachers' programmatic plans and goals. After including the paraprofessionals in the planning process the program was significantly enhanced.

It is imperative that the principal, staff, and parents of the participating students promote the philosophy and principles of inclusion with parents and the school community. All participants need to work collaboratively to resolve issues when they arise. Open communication, staff development, parent training, and opportunities for feedback are important components of the supportive school structure. These components are needed to make programmatic changes when necessary and to allow the inclusive classroom to meet the needs of its students rather than changing the needs of the students to match the existing conditions within the classroom.

Adequate Resources

The educational and social/emotional needs of the participating children must be identified before their entry into the inclusive setting. This allows for the acquisition of adequate resources and the adaptation of the learning environment. An effective inclusion program requires that adequate resources be in place before the arrival of the children. Adequate resources include a combination of staff, materials, and a modified classroom setting.

An inclusive setting requires teachers who have expertise in their instructional areas, and who can work in a nontraditional setting. Clinical staff, including social workers and psychologists, should be available to work with

teachers and students in the classroom. Parental participation is essential to carry learning and behavioral gains to the home. Related service personnel, including speech, occupational, and physical therapists can provide services in the classroom as well as outside, in individual and group sessions.

Adaptive materials include all materials mandated on the childrens' Individualized Education Plans plus any other materials that would be normally found in any typical classroom. Furniture that fosters cooperative learning and access to all children is critical. Additional funds should be available to purchase supplementary materials that support interdisciplinary and thematic learning.

A learning environment that is ideal for inclusion is one with an enriched student/teacher ratio and a reduced class size. The Kindergarten Plus and First Grade Plus classes in District 30 are composed of: 25 students, 15 non disabled students, 10 students with special needs, one general education teacher, one special education teacher, and one paraprofessional. The inclusion setting, based on these ratios alone, would benefit all of its participants.

The point remains, however, that all supportive services must follow the child with disabilities into the inclusive classroom. The failure of all resources to follow children with disabilities into the inclusive classroom will lead to the failure of inclusion. If supportive resources are not in place, inclusion will become another educational fad that dilutes services to children with disabilities and denies them the opportunity for education with their nondisabled peers.

Total School Community Involvement

Each school is unique. Educators, when developing inclusive educational programs, must be cognizant of the unique educational needs of the children attending their school. Community School District 30, is one of New York City's most culturally diverse public school districts. District 30 recognizes that it must develop inclusion programs that address important current educational issues. In addition to academic achievement, these issues are

bilingual services, second language acquisition, social and emotional growth, and health services.

In response to these concerns, District 30 has expanded inclusion programs to PS 150. The inclusion model at PS 150 is unique in that it will serve bilingual Spanish kindergarten and first grade children. This program offers many benefits to both children with special needs and their non disabled classmates, such as native language mastery, second language acquisition, and developmentally age appropriate learning opportunities.

The entire school community was involved in the development of these classes. Parents of nondisabled students were reassured that placement in an inclusive class would not reduce instructional time for English acquisition. Parents of children with special needs were reassured that all of their childrens' mandated services would be in place in the inclusion classes.

Bilingual general education and bilingual special education participating teachers have met throughout the spring and summer months to prepare for this new adventure. These teachers bring a wealth of experiences to these classes, including early childhood education, bilingual special education, cooperative learning, and various approaches to bilingual reading instruction.

The principal is a strong supporter of early childhood inclusion, as well as being a bilingual educator. District 30 eagerly anticipates the success of this program.

Regardless of the educational issue relevant to any particular school, total school community involvement is critical in the development and implementation of inclusion. All members of a school community provide valuable input and insight in the delivery process. All children grow and prosper in such an enriched learning environment.

The model of inclusion found in schools with a supportive school structure, adequate resources, and total school community involvement may be the best example of modern education for the 1990's.

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Editor's Note: Dorothy E. Hively is the current Interim Acting Principal at IS 126, Queens. She has been the District Administrator of Special Education in District 30 for the past five years. Ms. Hively is a doctoral candidate at Teachers College, Columbia University in the Department of Special Education.

Project IEP: An Emergent Literacy Approach to Preschool Special Education

by David S. Katims

Early childhood special education is the delivery of educational and related services to children with disabilities and for children who are at-risk of developing disabilities prior to their entry into first grade. Most children who are classified as learning disabled are identified during their elementary school years after experiencing difficulty with school learning. As a result, most preschool programs for children with learning disabilities are aimed at children who are at risk for later academic failure. Preschool children who are at risk include those that have language disorders and delays, score poorly on tests of cognitive skills, have limited opportunity due to economic deprivation, and/or are burdened by various medical problems.

The intent of intervention programs for preschool-age children includes diminishing the effects of the disabling condition on the child's growth and development and preventing as much as possible the aggravation or worsening of secondary disabling conditions. In the spirit of effective early intervention, Project IEP (Intervention for Early Progress), a research project supported by the College of Social and Behavioral Sciences at The University of Texas, San Antonio was initiated in south Texas schools. The project was designed to facilitate the early "reading" and "writing" behaviors of young children with mild to moderate disabilities through exposing them to structured, print-rich environments with opportunities to engage in a variety of literacy experiences.

Children who participate in Project IEP are involved in numerous daily activities designed



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to foster a beginning understanding of written symbols, both encountered in books and created by the children themselves. The Project focuses on the influence on the children's literacy behaviors by exposure to daily storybook readings by adults, opportunities to interact with a variety of books in a classroom library, and structured visits to a classroom writing center.

Typical children who participate in the project are enrolled in developmentally oriented preschool special education classes for youngsters with a variety of mild to moderate learning and behavior problems. The children range in age from four to seven years, with the average age of participants being five and-a-half years. Males typically make up about seventy-

five percent of the groups. About 50 percent of the children participating in the Project are Mexican-American, 40 percent are white, non-Hispanic, with the remaining ten percent African-American. The philosophy and elements of Project IEP have been infused into the daily routine of selected preschool programs for young children with disabilities in selected schools in the south Texas area since 1988.

Literacy for Young Children with Disabilities

In contrast to a fragmented and unnatural reading readiness orientation, a "natural" approach to beginning literacy instruction has evolved from descriptive research on how young children learn to read, write, and develop oral language in natural, literacy-rich environments. Research supports the idea that reading, writing, and oral language are highly interrelated and, like general language development, are continuous processes that begin long before formal instruction and continue to develop over a lifetime. Reading and writing are a natural part of normal language development for most children, and can be an integral part of the daily curriculum for young children.

Emergent literacy deals with the earliest phases of literacy development, the period between birth and the time when children begin to read and write conventionally. From an emergent literacy perspective, emphasis is placed on the process of becoming literate as opposed to a series of discrete, hierarchical skills that must develop before learning how to read.

Children immersed regularly in literacy-rich environments learn about written language by handling books, hearing stories read aloud by adults, drawing pictures, being surrounded by environmental print, and attempting to write about real life experiences. Children learn about reading and writing by participating with adults in holistic, meaningful literacy activities, and ultimately by practicing independently what they learn in their interactions with adults.

Literacy-Rich Environments for Young Children with Disabilities

Instructional elements in classrooms designed to promote emergent literacy include

activities that are literacy-based, personally meaningful to each child, and functional.

Instructional arrangements include: (a) a well-stocked and accessible classroom library center, (b) daily group storybook readings by adults of books selected from the classroom library by children, and (c) regular visits to a classroom writing center for functional, meaningful "writing" activities.

The Classroom Library Center

The first element of a literacy-rich preschool special education classroom begins with immersion of the children in an environment characterized by an accessible and attractive classroom library center. The classroom library contains a collection of classic children's literature, including poems, fairy tales, picture books, alphabet books, fables, informational books, holiday books, and narratives. The children visit the classroom library at various times each school day. They are observed and their independent interactions with books are recorded while in the library.

For each child, an observer records the title of each book selected and the manner in which the child uses the book during a particular interaction. Three types of book interactions are targeted for observation. The first, *browsing*, is defined as a child rapidly flipping through the pages of books, thus requiring the least amount of sustained attention and considered the lowest-level type of book interaction. More sustained behaviors of the children interacting with books in the classroom library include *silent studying*, in which a child slowly turns the pages of a storybook, purposely viewing and studying specific text and/or pictures without discussion or portrayal.

For the highest level of interaction, characterized as an *independent reenactment*, a child verbally reenacts some or all elements of a story by using picture, or memory readings. Reenactments, ranging from picture-governed to print-governed attempts, can be performed alone, with a partner, or within a group of children.

The importance of independent reenactment cannot be understated. Teale and Sulzby (1987) believe that these nonconventional pretend

readings, also called emergent storybook readings, are at the root of literacy development for young children, and serve to facilitate transitions to more conventional literacy behaviors.

Books in the classroom library are described in terms of both familiarity and predictability. Familiar books are those that have been selected by a child to be read aloud by an adult during the school year, allowing children to become acquainted with its particular content. Research suggests that the more familiar a book is, the more sophisticated a child's involvement with the book will be. Predictable books are books that contain rhythmical, repetitive patterns, and/or natural sounding dependable story structure and plots, making it easy for children to begin predicting what will be on the page (such as *Brown Bear, Brown Bear, What Do you See?*, and *I Went Walking*).

Predictability is accomplished through using the natural redundancy, rhythm, and rhyme of language to achieve its regularity, avoiding strict syntactic and vocabulary control so common to many basal readers. Such literature allows the children to respond to structured activities conducted by adults in the classroom as described in the next section.

Storybook Reading with Classroom Procedures

Research has demonstrated that children who are introduced to books at an early age tend to develop sophisticated language structures and concepts about conventions found in books. By hearing repeatedly read books, children begin to develop an understanding of the conventions of print found in books such as directionality (left to right, up to down), the role of print and pictures in telling the story, the concepts of "letters" and "words", punctuation, and so forth.

The second element of Project IEP consists of reading to the children on numerous occasions daily. An emphasis is placed on daily repeated readings by adults of a variety of familiar and predictable books. Several times each day an adult requests a child to select a book from the classroom library, to be read

aloud to a group of children. The preference of children to select certain books as "favorites" to be read again and again by adults has been shown to be greatly facilitated by use of both familiar and predictable books. Repeated readings of favorite books encourages wide ranging exploration of books, and promotes children's emergent readings of those books.

In addition, a three-phase sampling, predicting, and confirming cycle is used in conjunction with familiar and predictable books. Emerging readers can use the three step cycle while listening to books read aloud. Beginning readers are prompted with the cycle to help them make and confirm important predictions about stories, eventually leading to higher levels of independent interactions with books.

In the first step of the procedure, sampling, children select the most useful syntactic, semantic or pictorial information from a page in a story on which to base a prediction what is happening on the page. Then in the second step, predicting, a child or group of children makes a prediction as to what is about to happen using the clue or clues selected during sampling (usually a pictorial clue). In the final step, confirming, the children have their prediction confirmed by listening to the adult read the page aloud to be sure that what they said makes sense.

Other techniques used in the classroom may include assisted readings, in which children repeat either words, sentences, or phrases immediately following their oral reading by an adult from predictable and familiar books. Children can also supply missing words or sentences, partially read aloud by adults from books; and children can engage in interactive dialogues with each other and adults about story content to facilitate concepts of written language contained in books.

These procedures are used so that students will eventually attend to graphophonic, as well as the semantic and syntactic clues of the story. Using predictable books provides easy entry into ideas for dictated stories by students because they can expand the books by furnishing more examples of the patterns presented. Children can also dictate experience

stories, cut and paste magazine pictures, or "draw" their own books.

The Classroom Writing Center

Because reading and writing abilities reinforce one another, developing concurrently and interrelatedly rather than sequentially, the third element of the literacy curriculum involves providing opportunities for children to write well about functional and meaningful events and topics several times a week. In order to develop children's emergent writings in the classroom, teachers begin by modeling major forms of writing used by young children. The five forms that should be modelled are scribble, drawing, letter strings, invented spelling, and conventional writing. By doing this, teachers stress that even though they cannot read the writing on the board, it nonetheless has meaning.

Children are then asked to write in response to stories that have been read aloud to them, or in response to pictures they have drawn or cut from magazines. Children can also be asked to engage in other functional and meaningful activities such as making birthday cards or sending messages to other students, as well as dictating sentences and stories to adults. Many children can also copy the words on a sheet of paper below sentence strips taken from children's literature, or they can overprint or trace the words on the sentence strip for additional practice.

Many of these activities can be reinforced by parents as well. Parents are encouraged to check-out books from both the classroom and public libraries and read them aloud in the home. Parents can also involve their children in everyday functional writing and reading in the home as well. Preparing shopping lists, reading recipes, creating birthday and holiday cards for friends and relatives, recognizing environmental print and common logos (the golden arches, etc.), when driving in the car are just a few of the activities that parents can engage in with children in order to facilitate emerging literacy.

Results of Project IEP

Since its inception in 1988, Project IEP has had a positive impact on children's beginning literacy behaviors in the classrooms where it has been implemented. Emerging literacy behaviors have been demonstrated in the children who participate in the numerous literacy activities that the Project involves. A significant difference in concepts about print found in books between experimental and control groups has been consistently found in the studies conducted. Children's independent book interactions in the classroom library have progressed in complexity and sustained attention, and they have demonstrated a marked preference for both predictable and familiar books in school and at home. Finally, the "writing" behaviors of participants have increased in complexity, variety, and structure because of exposure to the elements of the project.

Conclusion

To become as literate as possible offers pathways for children with disabilities to achieve their best outcomes in educational, social and living environments. Educators now believe that becoming literate is an ongoing process that occurs well before children have the knowledge we once considered prerequisite. The findings of Project IEP indicate that preschool children with disabilities are able to demonstrate behaviors associated with emerging literacy, given structured opportunities to interact within meaningful, literacy-rich environments. Based on the results of Project IEP over the years, it is now recommended that children with disabilities be given the same opportunities to interact in literacy-rich environments as children without disabilities.

Editor's Note: David S. Katims, Ed.D. is Associate Professor of Education at the University of Texas at San Antonio College of Social and Behavioral Services. References for this article are available.

Can Reading Disabilities be Prevented?

by Joseph K. Torgesen

The National Institute of Child Health and Human Development, which is a branch of the National Institutes of Health, has recently awarded grant support for two large scale studies of ways to prevent the emergence of reading disabilities in young children. One set of studies is being conducted at Florida State University in Tallahassee, Florida, and the other research program is being led by Barbara Foorman at the University of Houston in Houston, Texas. This article will provide an overview of the goals and methods being used at Florida State University to help us understand more about the prevention of reading disabilities.



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We are conducting studies of methods to help older children who have already developed reading problems in school, but we are particularly concerned with preventing the emergence of these problems in young children because of the negative consequences that early failure in reading has for the overall development of the child. Research conducted over the past two decades shows very clearly that failure to learn to read normally changes the instructional experiences of the child in unfortunate ways, affects the child's motivation and perseverance on school tasks, and limits growth of vocabulary, general knowledge, and language comprehension strategies.

In reading, those who begin slowly usually do not catch up, and their initially isolated reading problem can easily spread to create difficulties in many areas of their lives.

Important Scientific Advances

This is a particularly good time to begin a major research study of ways to prevent reading disabilities in young children. Scientific advances in three areas now make it possible to conduct studies that will provide more reliable and useful information than has been available in the past. First, we now have a much greater understanding of the nature of childhood dyslexia, or reading disabilities. This will make it possible to focus more accurately on a specific group of children to study. Second, recent research has also produced significant new knowledge about the process of reading

itself, as well as methods of instruction in reading. Finally, we now have available some new statistical techniques that will allow us to find out more about how individual children, and not just groups of children, respond to our different preventive treatments.

The Nature of Dyslexia

In this article, I will use the term reading disability and specific developmental dyslexia interchangeably. Although the concept of dyslexia remains controversial in some circles, we clearly have much broader agreement about its critical features than at any time in the past. Although questions about different subtypes of dyslexia remain, there is now a strong consensus that the most common kind of reading problem for dyslexic children involves difficulty acquiring accurate and fluent word identification skills. More specifically, most dyslexic children have great difficulty learning to apply the "alphabetic principle" to take advantage of letter-sound regularities in reading unfamiliar words. Not only does this problem limit their ability to read independently, but it may also prevent subsequent development of accurate and fluent whole word reading strategies.

The most widely accepted current explanation for the difficulties dyslexic children experience in attaining alphabetic reading skills involves problems in processing the phonological features of language. In fact, the theory of phonologically based reading disabilities is the best developed and most widely accepted current theory in this area. Although there may be more than one subtype of specific developmental dyslexia, the best described, most common, and perhaps most difficult to treat subtype is phonologically based reading disability.

Not only do we have substantial information about the academic and psychological processing problems of children with phonologically based reading disabilities (dyslexia), but there is also an impressive amount of information available showing that problems in development of certain areas of the left brain hemisphere are the underlying basis of these problems. We used the extensive information avail-

able about phonologically based reading disabilities to help us design our study in three ways.

First, the available information will help us to select a more homogeneous group of children to study. Although our results will not apply to all possible types of reading disability, we will be able to describe the children to whom they do apply with greater precision than in the past. Second, we have available to us non-reading measures that can be used to identify phonologically impaired children before reading instruction begins. This makes it possible for us to more accurately identify a sample of "at-risk-for-dyslexia" children to use in our prevention study. Finally, we will be able to examine treatment effects not only on reading itself, but also on the information processing limitations that have been shown to produce them. This will help us estimate the extent to which our treatments actually effect the underlying cognitive problems that produce dyslexia, or whether they simply help children compensate for them.

The Reading Process and Reading Instruction

The last 20 years have seen a literal explosion in our knowledge of the reading process and factors that are important in reading instruction. This information is far too complex for adequate exposition here, so I will simply enumerate several important points that served as a background to our study.

1. There is wide agreement that instructional approaches emphasizing direct and explicit teaching of phonics skills are most effective in helping at-risk children learn to read.

2. Pre-reading instruction and training in phonological awareness activities may be critically important for children with phonologically based reading disabilities. Phonological awareness is usually defined as sensitivity to, or explicit awareness of, the phonological structure of words in one's language. Most dyslexic children have very little sensitivity to the internal phonological structure of words in oral language, and this makes much of early reading instruction incomprehensible to them.

3. There are at least two important ways to incorporate phonics instruction into an early

reading curriculum. One of them, sometimes referred to as synthetic phonics, is widely used with dyslexics at present in remedial settings. It involves multi-sensory experiences with individual letters and their sounds, and lots of practice blending individual sounds together to form words. In this approach, children may even practice reading phonologically regular non-words in order to practice and refine their phonologically based reading skills.

The other approach, sometimes referred to as analytic phonics, teaches phonics skills only within the context of real words, and children are not asked to blend all the separate phonemes in a word in order to identify it. This approach places a relatively larger emphasis on learning a large vocabulary of words that are recognized "by sight," with correspondingly more time spent reading actual text as a way of practicing reading skills. Some research suggests that the synthetic phonics approach may overly stress the weak phonological abilities of dyslexic children, so that they do not progress rapidly enough in acquiring all the skills that are necessary to read and comprehend text.

Measurement of Growth and Change

The third major scientific advance involving methods for the analysis of change, provides powerful new ways to describe the impact of interventions on individual children. Traditional measures for analysis of treatment effects allowed only comparison of the average change in one group compared to another. However, now we can calculate reliable growth curves for individual children, which allow us to study the factors associated with change in individual children. This will allow us to determine what characteristics of the children in our sample (i.e., whether or not they also have attention deficits, level of general intelligence, race, sex, socioeconomic status) predict better or worse response to the preventive treatments we will use. It may be possible, for example, that one method will work best for children with certain types of characteristics, while another method will work better for a different kind of child. The new analytic methods will allow us to test these kinds of possibilities.

Overview of our Study

Because it is the most common and best understood type of reading disability, we decided to focus our study on children with phonologically based reading disabilities. Our plan is to screen 1800 children in the first several weeks of kindergarten to identify 168 children who have the highest probability of developing phonologically based reading disabilities. We can do this with about 90% accuracy, because we have just completed a five year longitudinal project in which we followed the phonological and reading development of 250 children from kindergarten through third grade.

After we identify the children for the study, they will be randomly assigned to one of four groups. Children in three of the groups will receive different kinds of supplemental reading instruction delivered one-on-one in four twenty minute sessions each week for two-and-a-half years. The instruction will begin at the start of the second semester of kindergarten, and will continue through second grade. This will be the longest intervention that has ever been studied experimentally.

We are combining this duration of treatment with one-on-one instruction delivered by highly trained teachers because we want to see how far we can go toward eliminating the emergence of early reading problems in severely at-risk children. These children's problems in processing phonological information are severe, and it may require just this intensity of intervention to help them succeed in acquiring important early reading skills.

Contrast of Two Approaches

Our study will contrast the effectiveness of a multi-sensory synthetic phonics program containing intensive training in phonological awareness with a program that combines whole word and analytic phonics training, in the context of early experiences with reading and writing text, to build word and text level reading skills. Both approaches recognize that the children being treated have special difficulties processing phonological information. However, the synthetic phonics program attempts to overcome these problems through

an intensive program of oral and phonological awareness training, while the other program seeks to reduce the demands on these skills by using an analytic approach to phonics instruction and explicitly building both whole word and context based word identification skills.

The progress of children in both of these groups will be contrasted with each other, and with a third treatment group that receives extra practice on the activities being taught in the regular classroom reading program. This third group will receive a mixture of treatments, and it is included to assess the possibility that what really matters is one-on-one instruction, not necessarily the particular instructional approach used. The fourth group of children will not receive any special treatment, but are included as a benchmark to verify that our selection procedures actually did identify a group of children likely to develop

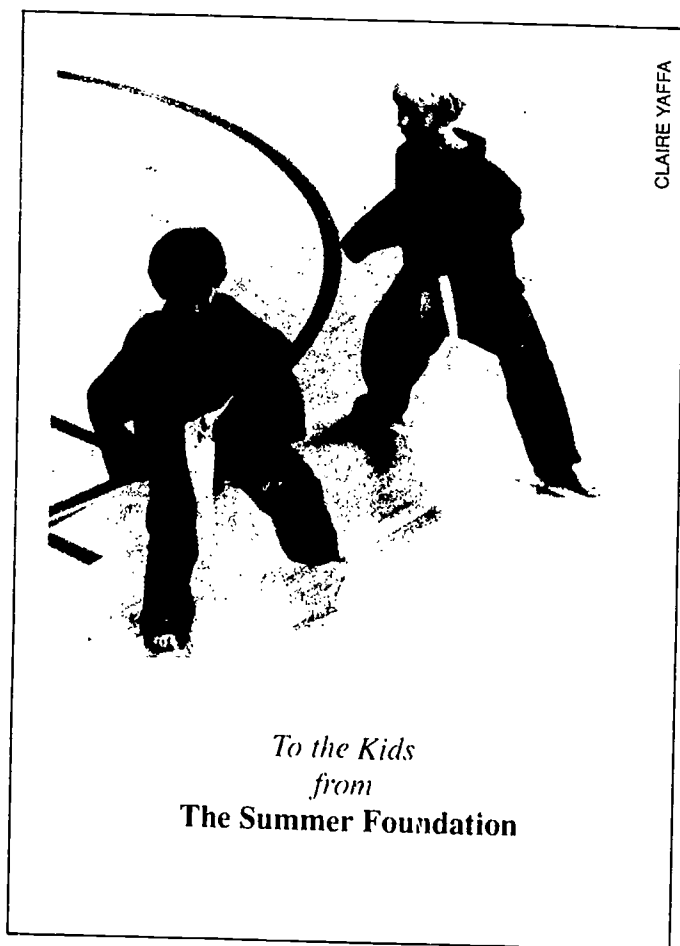
reading problems if not given special supplementary instruction. They will not receive the extensive assessments that will be given to the other three groups who receive treatment.

Since we are interested in learning more about the individual characteristics of children that are associated with better or worse response to our various instructional conditions, the children will be assessed on a variety of medical, neurological, language, non-verbal, attentional, and background factors. We also plan to follow the children's reading and intellectual development for two years after the intervention concludes at the end of second grade.

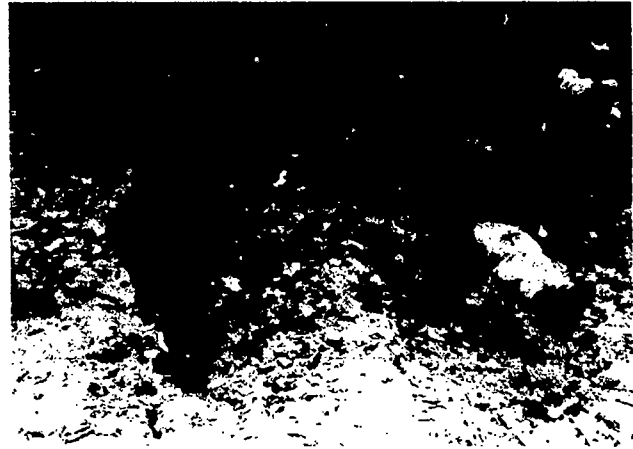
Concluding Comments

Although we already know a great deal about dyslexia and early reading instruction, we actually know very little about the extent to which reading disabilities can be prevented if children are exposed to appropriate and intensive instruction at an early age. We also do not know very much about the differential effectiveness of alternate instructional methods. We hope that our study will make an important contribution in both of these areas, so that policy makers can make realistic decisions about the effects they might achieve if special resources are provided to prevention efforts. In our view, the single most important academic skill children acquire in elementary school is fluent reading ability. The development of methods to reduce the incidence of early reading failure significantly among elementary school children are worthy of our highest efforts.

Editor's Note: Dr. Torgesen is Professor of Psychology and Director of the Cognitive and Behavioral Science Program at Florida State University.



The LD Experience



PHOTOS BY CLAIRE YAFFA

An Abstract Apology

by *Bob Lane*

Reading this will be hard for you
not because of what it says, but
because of what it is;
letters,
sounds,
words.

Words you cannot read as well as I.
Words harsher than
stupid
or
lazy and dumb.

Not words like god and dog
or deny.

Words which are

over

all

page

the

like lost sheep
bleating to deaf ears.

These words cannot
be divided
into syllables,
or ruled
by concepts and
someday conquered.

For these words are
dyslexic words
like help
like hope
like try
it
again.

Editor's Note: Bob Lane teaches creative writing at the Kildonan School

Coach's Choice

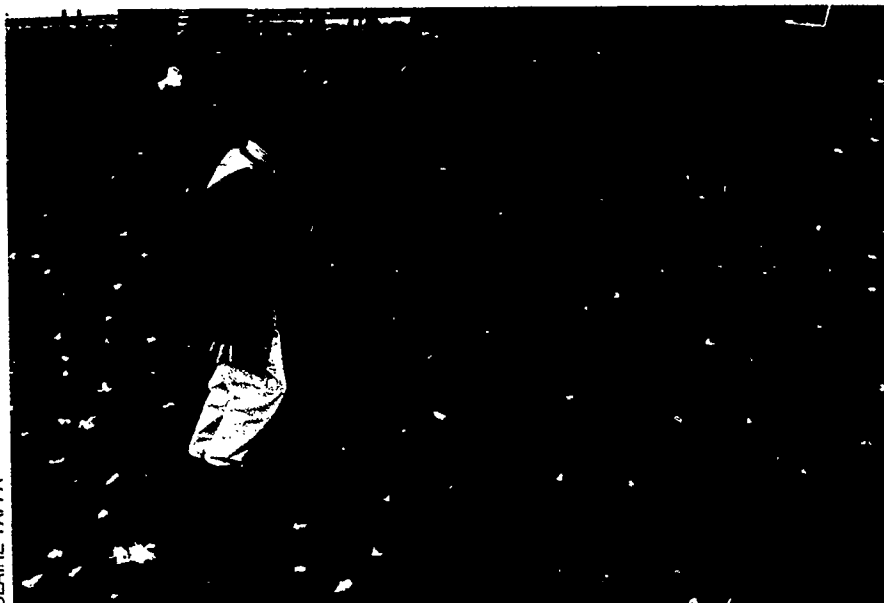
By Judy Schwarz

Editor's note: The following article is an excerpt of the book by Judy Schwarz, titled "Another Door to Learning", The Crossroad Publishing Co., N.Y., 1992.

Twenty years ago Larry Reichert, one of the fifth-grade teachers at Elmhurst Elementary, formed a football team for a reason: excellence, a quality he thought was absent in America's youth. Then he was a young, idealistic teacher, just out of college, intent on doing what he could to change society's slovenly youth. He formed the Elmhurst Brigade so that his fifth-grade boys could learn about goal setting, self-discipline, and excellence.

Mr. Reichert encouraged Steve Schneider, one of his fifth-grade students, to try out. As he watched him participate halfheartedly in P.E., Larry Reichert decided that Steve was just the kind of kid for whom his football team was designed. Intelligent, sturdy, but slothful. "Schneider!" Mr. Reichert yelled as Steve ran around the track. "Push yourself, Come on, come on ... Push!"

Steve performed no better at individual sports than at team ones. He could not run the mile without stopping several times for breath. In fact, he could not even walk the mile without pausing to regain his strength! Coach Reichert interpreted Steve's lethargy as a sign of laziness. He did not realize that Steve's clumsiness and sluggishness was not deliberate, but rather a result of broad-based motor delays — that is, difficulty with both the fine motor as well as the large motor systems. Had Reichert understood, maybe he would



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have been more cautious about the criticisms he leveled at Steve out of sheer frustration.

Success Through Shame?

Mr. Reichert simply could not believe that this blond lumberjack of a kid whose feet and hands were bigger than his own could not excel in sports. Steve could, Reichert believed, if only he chose to do so, if only he demanded excellence of himself. Larry Reichert's goal that year was to motivate Steve to achieve in sports, and therefore in life, even if he had to shame him into the accomplishment. Mr. Reichert made a special point to invite Steve to try out for the prestigious team. "I need a big smart kid like you on the team, Steve." Steve valued smart. "Now I know you're smart. You show me that every day in class. It's obvious you're big. So you're it, fellah! The team needs a big, smart guy like you."

Steve's size belied his age. He would not be eleven until the late summer, yet at the age of ten, he was one of the largest students in his fifth-grade class. Steve was also one of the last students in the class to be chosen for any

team. Understandably, then, he could not imagine why Mr. Reichert courted his participation. The invitation affirmed him, however, and increased his stature in the eyes of his peers. Steve decided to try out for the team. He announced his decision to his parents that night at the dinner table.

Nancy and Bill responded in simultaneous disbelief. "What? You have? You're kidding! No, you're not kidding? Well, what prompted this decision?" they asked. For years Nancy and Bill endured several painful seasons watching their son trip over his feet on the soccer field even though no other player was near him. But Bill, who often reminisced about his own high school football days, could not contain his joy. "Wow! That's wonderful, Steve! Wonderful! What position are you going to play?" Steve responded that the coach recommended him for tackle.

Nancy was less enthusiastic. She worried that another athletic failure would wound Steve's self-esteem, and the likelihood of failure was great. Steve could not write, cut, or draw with accuracy or ease. He knew where he wanted his pencil to go, of course, but often it did not arrive at the place he intended. His writing looked like scrawl. In fact, he really did not learn to write until late in elementary school. The reason was that in addition to his large and fine motor delays, Steve was also dysgraphic. In other words, his motor recall for letters was vague and inaccurate. Steve could not recall the motor sequences involved in forming letters. "Let's see, how do I make a 'g', 'a', 'z,' an 'f'?" Steve asked himself. Often he could not recall, and as a result handwriting was simply awful for him, even now in fifth grade.

Coordinating Problems

Maneuvering his body was equally difficult. Steve knew where he wanted his body to run or where he wanted a baseball to land, but he could not organize his motor system to comply. As a result, he would bump into a doorway, fall up the stairs, even fall out of his chair! Maintaining his body upright, standing, or even sitting in a chair required great effort from him. So did moving it. When he tried, he

fatigued quickly or he missed the mark entirely. Hence, he could not sustain physical exertion, and when called upon to tackle, he missed his man.

For the next three weeks, everyday after school and all morning on Saturday, Steve turned out for practice. After one particularly rainy day, Steve returned home late from practice, caked with mud from head to toe. "Steven, what in heaven's name happened to you?" his mother asked. "I quit!" Steve said rattling off his anger nonstop. "Old man Reichert called me a gutless tackle, can you imagine that? A Gutless Tackle!" The words curdled in his mouth like vomit. "He said I wasn't pushing myself hard enough, that I was bein' a sissy, and he had me run the ball against the whole defensive line, with no protection, so I'd know what bein' tackled felt like ... like I didn't know how it felt ... like I missed tackles on purpose or something! Stupid! That guy doesn't know the first thing about being a coach!" Steve's storm of words shielded his vulnerability.

Later that evening Mr. Reichert appeared at the door of the Schneider home. He wanted Steve to reconsider his decision. Quitting, he said, could affect Steve's entire future. The next time he met a difficult challenge, Mr. Reichert went on, Steve might give himself permission to quit again. Steve resisted the urge to call his teacher a jerk. "Well, Steve," his dad asked, "What do you think?"

Steve paused long enough to swallow his irritation. "Thanks for your concern, Mr. Reichert," Steve replied, "but I can't think of one reason why I should return to your team. I really can't do what you need. Thanks anyway. I'll go get your uniform."

Except for one season of softball in the spring of his sixth-grade year, Steve no longer participated in team sports. In junior and senior high he learned to ski and golf, and in college he became the best basketball shot in his fraternity, although he never could play the game. Steve shoots with accuracy, but he still cannot make all his parts work together when he has to move his body up and down the court.

In spite of his motor planning difficulties, Steve became an exceptionally strong student. Recently he graduated near the top of his class from a large university noted for its academic challenge. Learning to type and to use a computer as a communicative device alleviated Steve's difficulties with handwriting. Good grades followed. What made the difference for Steve, however, was not the machinery nor even his abundant language but rather his discovery that year in fifth grade of the awesome power of definition and his ability to escape its boundaries.

Editor's Note: Judy Schwarz is the Co-Director of Another Door to Learning, a school for youngsters with LD in Tacoma, Washington.

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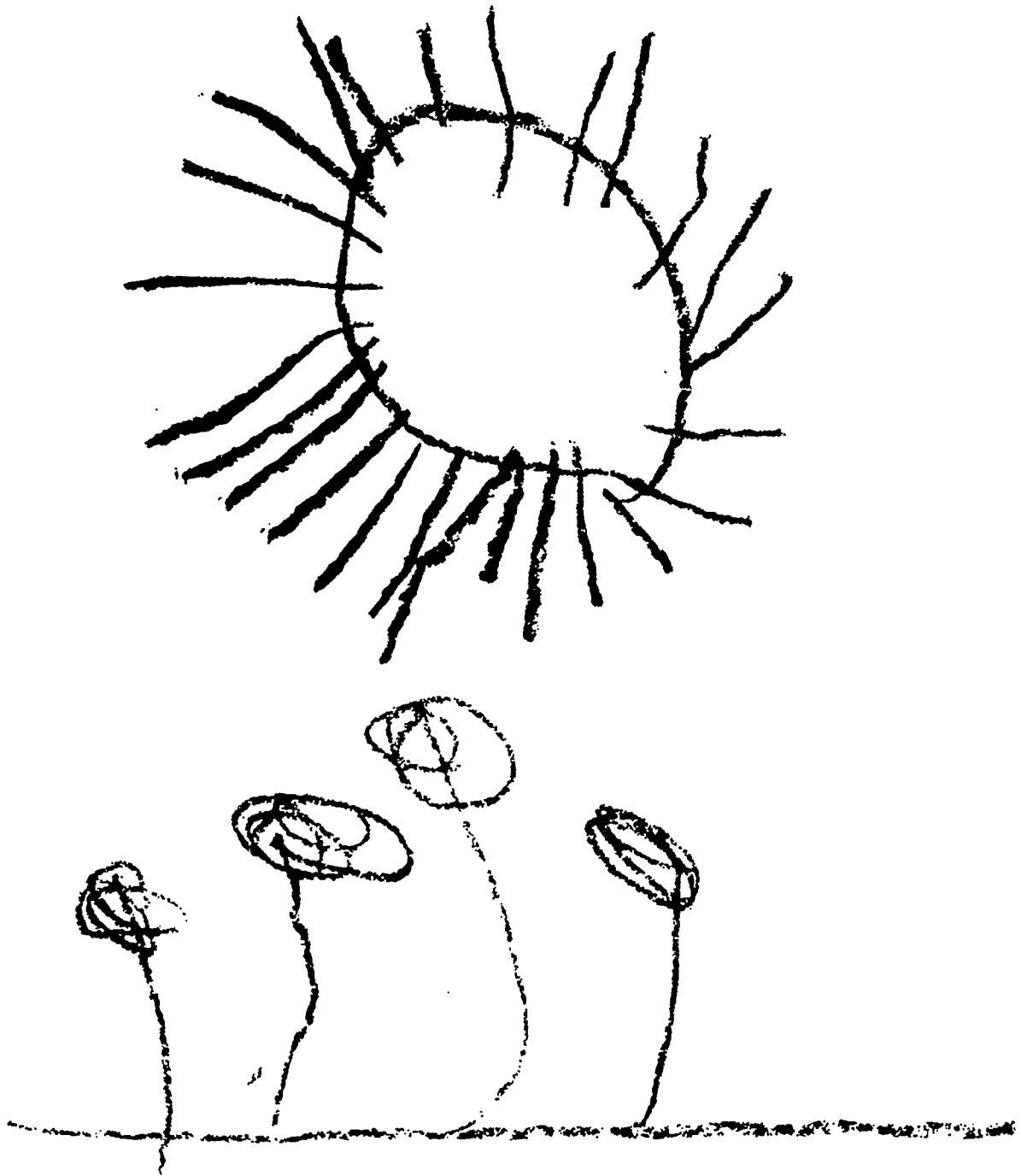
- Articles should be up to 1500 words.
- They should be submitted in triplicate.
- They should include appropriate sub-headings.
- They should be typed and doubled spaced.
- They may be on any aspect of learning disabilities.
- Charts, if used must be incorporated in the text.
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Hold Back the Light: Being Learning Disabled in the Modern World

by Paula Hurwitz

"I can't see your handicap. You must be lying."

"Prove it, prove to me you have a legitimate handicap. Then we'll see."

"What you have is a lack of attention to detail. Therefore we will repeat this exercise until you get it right."

"Your child is normal. She'll outgrow it."

These are just a sampling of the comments I dealt with as an employee and as a child. Sometimes separating them is difficult, I feel like an overgrown pre-schooler who is sent to the corner for punishment indefinitely.

What you can't see may be your worst enemy. Having an invisible handicap is a trying and anger producing experience. I have learned from being learning disabled the normal learning disabled can take two routes: fight or die a mental death.

I chose the first option. That is why I can talk about this so bluntly, and with no regrets. Teaching your handicapped child to fight for him or herself is not a luxury but a necessity. The number one rule is that nothing comes without a fight.

Being dyslexic is no bed of roses and I often wish people who were "normal" could be dyslexic for a day. If only they could see words float off the page or numbers reverse



CLAIRE YAFFA

by themselves, then they too could have a concept of what it feels like.

Words get garbled and numbers play tricks on your eyes. The more fatigued you are the worse it gets.

Junior High Nightmares

It started when the guidance counselor in junior high told my mother I wouldn't amount to anything. "Be happy if your daughter can be a beautician, she'll never be able to do much else." My mother knew better than to listen to such nonsense.

But the problem of learning disabilities goes deeper. In high school I was sent to a "Special Education School". The school was radical in its thinking. But the school I was sent to wasn't

radical. It just saved people like me from falling through the cracks.

Some of my classmates had gone through the cracks already. Their way of dealing with the handicap was doing and dealing drugs, promiscuity or just plain no interest in school. But at my school they hired saints who had teaching degrees who believed people with handicaps had a chance.

I was assigned a resident saint. Her name was Marie Sneed. I didn't want to come to school. There was nothing Marie could do to get me in the door. After two years, Marie had turned me from a person who hated school to one who loved it.

Then, after two years at the special school, I was ready to go back to regular school. My parents instead decided to send me to a local private Quaker school. It was a great decision. The Quakers believed in non-violence and accepting people for what they were.

It was okay to be a non conformist. Everybody was. Long hair was acceptable. Asking lots of questions was acceptable. One teacher was a former CIA employee. He taught classes in history and diplomacy. He was brilliant, exciting and inspiring.

My local Jewish Community Center offered me a wonderful opportunity. It was a program called the "Gathering of the Brothers," run by the Center. To get in you had to go through two interviews.

Years later my Mom told me she had talked to the people who ran the program and complained, "Why is this program for straight A students only? Why can't my daughter be in the program?" It had worked.

I later took a six-week trip to Israel and England as part of the program. It was the turning point for the rest of my life.

College Life

I was a student at Salem College in Salem, West Virginia. A semester before I was supposed to graduate I was brought up for an academic tribunal with six professors. My academic advisor just so happened to be a drama instructor, so before the tribunal he rehearsed

me on my lines. I was afraid my entire college career would disappear before my eyes.

I was so scared I could feel a cold sweat dripping down my back as I approached the room. When I sat down I explained I had a learning disability. I needed to take my exams orally to pass them. To my jubilation, the professors agreed. I passed the harder test, their six way verbal exam. I was so happy to get my college diploma, it was a miracle of my own making.

In graduate school it wasn't so easy. One professor announced to the entire class that I had a handicap. Disappearing into the wall seemed like a good idea, but instead I faced the music.

Another professor known as a therapeutic recreation expert was totally horrified by a real handicapped person. He had no idea what to do with a genuine handicapped student. There was one street smart professor whom I became friends with. He overlooked my handicap because I could add to the class.

But the important part was that I got what I wanted from graduate school—the chance to work in recreation programming, which was my goal.

The World of Work

In my work I found people who thought my handicap was fictional. They figured it was made up to get out of writing financial records or to avoid those drawn out budgets that recreation centers must draw up yearly.

It was a struggle all the way in the working world. Most bosses I have had seem to remind me of the guidance counselor who underestimated me in my younger days.

How does a person work around her handicap? Initially, I learned to pass for normal—until I was asked to handle cash or write a financial report. Then my job became a nightmare that had reprimands, brow beating and childish behavior from superiors who lacked the intelligence to do anything but be critical.

I held a series of jobs with the U.S. military overseas in Germany, Japan and England.

Living overseas was enlightening. My handicap was helpful in the adapting process.

I got my first job as a U.S. Navy Intern in England. I made close friends with a U.S. Navy sailor and two Royal Air Force corporals. My sailor friend, to my amazement, had sat around the barracks for a year-and-a-half before I came. I found myself guiding him from one small Cornish town to another with a map I had gotten in a small guidebook.

My two Royal Air Force friends were gems. They showed me their native England in a very personalized way. They opened a new door to me. International employment seemed much more exciting than the standard jobs.

My skills became more well honed during each new tour of duty. In Japan I escorted lots of new sailors and marines into downtown Yokohama. I learned the subway system by counting the stations. I ran cross-cultural exchanges between the Naval community and the local Japanese community.

As a visual learner I could take in, imitate and learn about the Japanese culture. It was beautiful, old and poetic. Japan was one tour of duty I found I was sorry to leave.

My last tour of duty in Germany was my coda to military recreation.

Gaining the Strength to Overcome Challenges

Most people think disabled equates to saying you are dumb. They want to give you a job at a lower level, or menial work, or they figure since you can't file you certainly can't have any management talent.

Does this story have a happy ending? Does a person with a learning disability ever get a break?

Since the Americans with Disabilities Act has been passed, many handicapped people have prayed it would make a difference. As one friend of mine remarked, "It will be a turf battle, lawsuit by lawsuit." One advantage of

the ADA is I now have two Job Developers, both from private foundations, who help me in my job hunt. They also design modifications, bargain with prospective employers and help me figure each step.

Being handicapped can be a blessing or a curse. Learning to be a fighter can make it a blessing. Mustering inner strength is essential for both parents and the handicapped child. It's a long hard road to travel to fight for every inch to gain what's rightfully yours.

Editor's Note: Paula Hurwitz is a professional freelance writer, recreation and travel specialist. Her articles have appeared in a number of publications. A teacher of journalism, travel writing, baking and candymaking, she runs the recreation program for the Center for Unique Learners in Rockville, MD.



**LEARNING ... a true goal to
fight for. Keep up the FIGHT!**

*best wishes to the NCLD for
continued success.*

THE GREEN BAY PACKERS



Early Intervention: My Personal Narrative

by Carol Blatt

I am a 38 year-old LD adult who is grateful to my parents, who received much neglect from a school system and as a result sent me to private school. When entering 8th grade I met a teacher who inspired me to be who I am today, and to believe in myself. I have a sister who would do whatever she could to allow me to reach my maximum potential and enjoy full participation in society. I want to educate parents and I have chosen to work towards long lasting intervention for LD children so they can also reach their maximum potential and enjoy full participation in society.

While in Kindergarten a teacher jeopardized her job by coming to my house and telling my parents that I had much difficulty in school and needed help. My parents took me to a neurologist who said, "Yes, your daughter has a disability related to poorly developed motor skills. However, take her home and forget about it." My parents spent the next two years being told by a school system that they must find a way to resolve my problems. I entered Third Grade barely functioning on a First Grade level. In Third Grade I had a sympathetic teacher who went out of her way to do whatever she could to provide me with an education so that I could learn. She was certainly ahead of her time in promoting alternative teaching styles and temporary intervention without truly understanding what my problems were. I left Third Grade functioning at or above Third Grade level, despite the fact that I had much difficulty placing any written words on paper.

An Unsympathetic School System

However, the next three years of my schooling only faced me with more emotional abuse by a school system which did not educate me

and then told my mother in Grade Six, "Sorry we will have to hold your daughter over." My mother told my sixth grade teacher that she had continually asked for help and that the school system had done nothing. My mother said, "We need help and holding her over is not helping her." The school system promoted me, however, only to place me in a situation that just exacerbated my disability and denied me the right to a free and appropriate education without taking into account my disability. Instead, they ignored it.

During my seventh year I was emotionally and physically abused by my peers. My needs were ignored by the school system and my endless requests to want to learn and be treated in a kind way went unheard. My parents decided to send me to a private school that one of my father's friends told him about. Little did I know that when I walked into my Eighth Grade homeroom the first day at this private school, no different than any other private school, that I would be faced with a unique teacher who became my special friend. This teacher not only taught me the skills to learn and how to improve myself, but was there until I graduated High School. She taught me it was OK to ask for help whenever I did not understand so that I could succeed. She never told me that life would be easy but that I had to believe in myself and creatively find ways to climb obstacles to achieve my maximum potential in order to enjoy full participation in society.

The Finish Line

I always felt that I was the only one who had many problems academically growing up. It was while in college that I came across Howard Gardner's book *Frames of Mind*. At that time,

there were no college programs for LD Students nor was much even written about it at that time. However, with the thought that my teacher had instilled in me to take part in all that life had to offer I pursued a college degree. The book explained why LD children might feel different.

It was after reading that book that I knew I wanted not just to complete college like anyone else, but to develop a career path to work with children so that they would never go through what I went through and to educate parents on what this disability is all about. From that point on I made a commitment to myself that I wanted to educate LD Children or LD Young Adults as well as their parents so that I can instill in them what this teacher and my sister have instilled in me in order to reach your maximum potential.

I owe who I am and what I am today to my sister but especially my 8th grade English Teacher who wrote the following in my year book: *"You are a fighter, survivor, and regardless how long it takes to reach a goal you will accomplish it. It makes no difference how many obstacles God places in your way you will succeed as long as you believe in yourself."*

Today I have reached towards my potential as an LD Adult and enjoy full participation in society just like anyone else. However I still strive to reach my maximum potential and I know that regardless what obstacles God continues to place in my way I will find a way around them.

Editor's Note: This article is excerpted from a longer article by Carol Blatt who is an advocate for individuals with learning disabilities.

CLAIRE YAFFA



*Best wishes
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National Center for
Learning Disabilities*

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The Passage of a Tough Man

by Glenn Young

In 1980 I was a tough man — tough to get along with, tough to work with, and tough to understand. I was closed tight. In 1980, however, my life changed dramatically and allowed me to take the steps needed to open myself to education and personal growth. At the age of 30, I heard the term learning disabilities for the first time.

In 1980, life was difficult. I was defensive in both my personal and professional relationships. My wife and I fought a lot. There was just so much she couldn't understand about me. The apparent contradictions frustrated her. She couldn't understand how I could know so much and speak so well, but I couldn't write out a shopping list. She couldn't understand why I could tell long and complex stories that kept my daughter enthralled, but couldn't read a simple story book to her. She also couldn't understand why it was so hard for me to keep out of trouble at work no matter what job I had.

I Found a Job Where I Could Argue

And trouble with jobs is what I had! I could not keep jobs long. Often, when applying for work I'd misspell my own name on the application forms. When I did get hired, it was because people thought I was smart. I sounded smart and could talk very well, but once I got into a job, things began to go bad. Written instructions were not followed; verbal ones misunderstood. Arguments followed. I could not even keep simple jobs, loading trucks, picking apples, working on the docks, being a common laborer, nothing worked. I worked as a vendor at sporting events, running up and down stairs selling beer or peanuts. (I often got in trouble there because I was bumping into fans a lot.)

The only job I kept long was as a community organizer for a very poor neighborhood. They needed someone, anyone, who could argue their case well. And I could argue!



CLAIRE YAFFA

I argued with the mayor and the city council and all the other people in the community as well. People thought it was very strange that I could tell everyone what needed to be done, and was usually right, but couldn't write out a simple thank you note to people and politicians who helped.

Surprises at my Daughter's School

In 1980, my daughter was going to start school and her preschool teachers urged us to apply to a private school for the gifted and try to get a scholarship. We made the appointment, and went to the school with much trepidation. We were not the private school "type." We were, however, warmly greeted by the principal of the school and our daughter was taken off to a separate room to be given a series of tests. Trying to put us at ease, and to let us understand the entrance requirements, the principal described the tests to us.

"Oh, that's the part of these tests I always do so bad in," I said after the principal had described about the third section. "Oh, that's another section I do bad in," I said, after another section. The principal stopped and

looked at me. At first I was sure she was about to ask me to stop interrupting her. But instead she said,

"I bet you don't spell too well, do you? I bet you have trouble reading and may well have allergies too. I also bet you have a hard time telling left from right or in following directions. By the way, how bad is your penmanship?"

I looked at her in real disbelief and some anger and some resentment. I just met this person and she knew my secrets. She knew I could barely read and spell. How? This is what I worked so hard to keep people from knowing. This was one of the main reasons I was fighting all the time. I was so ashamed of my inability to read and write that I would do almost anything to keep people from knowing that about me. How did she know?

My wife looked at me and I at her. She finally asked the principal how she knew these things. I was too tight to ask.

"Well," she responded, "the two areas of this test your husband said were his weak spots are the two areas that people with learning disabilities are traditionally weak. The things that I know about your husband, the lack of spelling and writing skills, are common traits of a person with learning disabilities."

Both my wife and I looked at the principal and simultaneously asked, "Learning disabilities. What's that?"

I sat there numb as she explained about dyslexia and dysgraphia and other dysfunctions. I'm not sure I took in most of what she was saying. There were so many emotions going on in me ranging from anger to relief to disbelief to tremendous sadness, that I was not sure what was safe to think or say.

It was almost as an after thought, it seems, that my daughter was escorted back to the room with the announcement that she did "extremely well" on the testing. For my wife and I it was the expected results. However, it was not expected that I would find out at the same time that my daughter was a genius, that I was not a moron and an idiot, but someone with a learning disability.

I Learn to Read

My wife arranged for testing to confirm the spot diagnosis. She also found a tutor for me to teach me phonics. The Slingerland/Orton tutor worked with me for close to three years. She was a wonderful teacher. She gave me faith in myself as well as an understanding of the sounds of the English language.

My daughter, at five years of age, was phonologically more advanced than I. When I began the tutoring, I had almost no phonic skills. My tutor would work with me with flash cards and correct my mistakes. She was a wonderful teacher, too. She helped me read books to her.

Some of my friends helped me through difficult times and also introduced me to the personal computer. The word processor with spelling and grammar checker advanced my ability to communicate in the written form. This new skill opened up a new range of employment possibilities, and greatly enhanced my organizing skills. Unfortunately, my marriage couldn't stand the stress of me and my resentments. Yet, despite the break-up, my wife supported my efforts to deal with my learning needs.

After three years of work, my tutor told me that either I should go to college, for I was ready, or that she had to stop taking my money. Trying to raise a daughter and working full time, it did not appear to me that college was an option. But I really wanted to go. This led to a four-year struggle with the state Vocational Rehabilitation Services program to get them to pay for my college. At age 37, I began college for the first time.

Equipped with letters to describe my disability and the accommodations required and legally due me (extra time on tests, testing in isolation, use of computer rather than handwriting, etc.), and a lap top computer (provided by voc rehab), I raced successfully through school.

I have made great progress in coming to personal terms with my learning disabilities. Years of work have made me into a far less defensive person; one who is sought out for giving help and guidance rather than being a cause of problems.

"Strange" but not Unique

My life has been "strange," but my story is not unique. I have met many people who were not recognized as having learning disabilities until their 30's or 40's or older. As a result of this new understanding, many have made dramatic turn arounds in both their personal and professional lives.

For all of them the process includes the support from friends and family, and also the internal spark that comes from learning that you are not stupid. Until that spark comes, the support of others seems to be a band aid to stop the pain and bleeding. With that spark comes progress and liberation.

A major element is the willingness and the understanding that they need to address social and interrelational issues and deep personal issues, not just academic and vocational concerns. The major and most debilitating effects of learning disabilities can be the psychological

impact. Most of life and work is social. Unless we address how we relate to ourselves and to others, the academic progress can only take us so far. That is how we can climb out of the lives we live as semi-literate, barely employed, angry, frustrated, and mean persons.

Editor's Note: In three-and-a-half years, Glenn Young earned Associates, Bachelors and Masters degrees (U. of Washington). His average GPA was 3.85. One of his papers was published by the University along with, as he proudly explains, "six professors, one lawyer and me." He has received several awards and most recently was one of 250 individuals selected from over 1200 nominees to be part of the government's "Presidential Management Internship Program." In addition to his assignment with the U.S. Department of Health and Human Services he is providing expertise on LD to the newly created National Institute for Literacy.

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Good Verbal Abilities — A Cover-up

by Katharine Jane Wilhelm

My life was a total enigma. I was bright, intelligent, outgoing. Nevertheless, I couldn't do numbers, couldn't stay focused for very long — at least not long enough to be very successful — couldn't learn how to play the piano, and somehow did not have the close friends I craved. What was the matter?

Although I was sweet and tried to be helpful, I was moody at times and seemed to irritate those closest to me whom I loved the most. My mother, who sensed that I was not a "typical" child, struggled with me through thick and thin in an attempt to help me and be supportive. She was always there when I needed her and although she didn't have the right answers with regard to my difficulties, she helped me to look for them.

Although I was exposed to all things, there is no evidence of exciting hobbies or part-time summer job entries on any type of school or resume record of my life.

School Life

It was naturally expected of me to do well in school (I attended public and private schools.) By well, I mean A's and B's were only what counted! I knew this was at a time when I should be developing interests that would be useful for the future, or look good on my college application or resume.

BUT, I was in summer school for most of my high school years. I missed out on many things that my peers did during summer vacations such as: Outward Bound trips, Windjammer Cruises, tennis camp, or being a counselor in camp. I never even had a stab at waitressing!

The highlight of my high school experiences was spending my senior year at a small private school in New York City. For the first

time in my life, the classes were small, the pressure was not too great, and I was able to learn comfortably. However, just because I felt more comfortable learning, that did not mean that I automatically knew study skills, note taking skills, how to organize a term paper, and how to learn GEOMETRY! — Oh, the bane of my existence!

It was difficult for me to assimilate the information I read in papers and articles (as I would have liked to) so that I could recall it in the future, so I collected and saved all of this information. I could not put these materials into a functional order because organization was not something I could easily manage, nor could I explain whatever I read well enough so that it could be easily comprehended by others. I write very well and often use writing to express my feelings. When I write personal letters, I do so with a great deal of meaning. I am very detail-oriented, and an excellent proofreader.

Since it was evident to my father that I wasn't a good student and he felt that I was "lazy, didn't try hard enough, and wasn't pleasing him and giving him something to be proud of," he thought that perhaps college was not necessarily the answer for me.

I was lucky that I was in a position to consider many options and/or alternatives to college. However, I applied to several colleges and was accepted at a co-ed school in New Jersey. I spent six horrible months there which was for me an utterly devastating and depressing experience. Why couldn't I learn the work, read the textbooks, take tests, and pass the courses "like everyone else?"

After my college experience, I did the next thing that was expected of me. I studied typing and shorthand and tried to get a job as a

clerk typist. Typing did not come easily for me, but I finally got it. Now, I am truly a whiz at the keyboard. I studied shorthand a few times, but it was another impossibility for me. I then proceeded to get jobs using the typing skills and clerical knowledge that I had.

In retrospect, I was trying to “fix” myself and took every course, and saw every doctor that I thought would help. I wasted my time with math anxiety classes when I could have been dancing. These classes made me even more anxious. Who knew that my math disability was called “dyscalculia” and that it was genetic? It didn’t do much for my self esteem to have to struggle so much to achieve things that were so commonplace for others.

Professional Help??

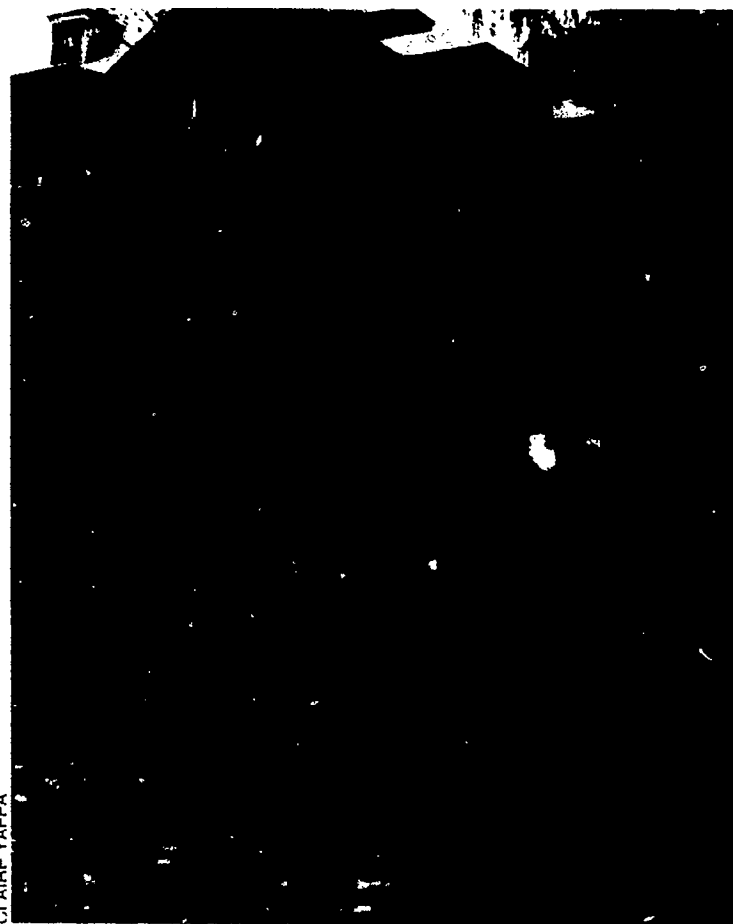
I had many, many years of all kinds of therapy with a variety of physicians, a myriad of “professionals”— from psychiatrists, to psychologists, to neurologists, and social workers. For the most part, each and every specialist must have thought that I was a great challenge. To my recollection, only three of these professionals had any positive effect on me.

Since it must have been obvious to all my therapists (prior to my correct diagnosis) that I could not stay on one topic at a time and jumped around (hyperactivity)—why didn’t they realize that I was also distractible and impulsive? Hadn’t they heard of ADD?

It is indeed very sad that I had my share of psychiatric “mis”diagnoses and that one prominent hospital-affiliated professional actually thought that I should be hospitalized. I guess I knew better! In fact, one psychiatric clinic of a major teaching hospital gave me the message on the telephone: “We can’t help you!” There is no doubt that these experiences leave a terrible toll on the psyche of the person involved.

Finally Home

Through much trial and error and serendipity, however, I heard about the field of learning disabilities. Naturally...I wondered whether I had at last found answers that would help me. I was very fortunate to find a team of professionals, Dr. Marcel Mesulam and Dr. Sandra



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Weintraub, at Boston’s Beth Israel Hospital, who were able to decipher my many symptoms and put them in the proper context. Among the problems were the non-verbal learning disabilities. When I look at someone, I cannot read (i.e., take in) their body messages or the non-verbal cues and recognize the nuances. Therefore, I am unsure as to what to say/do/or how to respond. Those cues are not, for the most part, recognizable by me. However, now that I know what to look for, I am more aware of the world. I underwent a one-and-a-half-day battery of tests which suddenly yielded the answers that appeared to fit the questions. They really made a difference.

More Good Answers

By reading a hospital publication, I discovered the work of Dr. Joseph Biederman, a psychopharmacologist at Mass General Hospital in Boston. When I read about the problems of his patients, specifically with regard to ADHD (Attention Deficit Disorder with Hyperactivity), I felt that I fit the description. Dr.

Biederman has guided me for several years. I am indebted to him. I still see him regularly as he monitors my medication. While there are no magic pills, Wellbutrin has felt like one to me. It works in a way that arrests the many thoughts I have from bombarding my brain and allows me to slow down, stop, think, and listen better. As time has gone on, the combination of Wellbutrin, Ritalin, and Buspar, along with therapy, is helping me to function well. They enable me to be very successful as a telemarketer. I really shine in this work since I enjoy it so much, and my company has benefited greatly.

I am, therefore, less impulsive since I am better able to think things through before taking any action. I am now in a position to evaluate situations and make decisions in a more meaningful way. I have to come to grips with the fact that my learning disabilities and ADHD will never go away. But, on the other hand, I am so much better off now that I am taking medication. I must not have been the easiest person to be around when I was younger. I was behaving in a way that came naturally to me and I did not know any other way to be — and did not have a clue as to how I came across. However, the world saw me differently and could only respond to me as they knew me.

So, at the ripe young age of 40+...I finally found my way, I was able to get a handle on why my life was so complex, and why it didn't work as well for me as it should have.

Who Am I?

One of the major attributes of my personality is my perseverance. This quality, which is part of my very core, has carried me through bad times and has helped me to be victorious. It is very hard to go through life not really feeling that you are "grasping" what is going on in the same way as the rest of the world. It is as though I have been living life with "another set of rules." My rules were based solely on how I saw and interpreted the world, and what was going on around me. Maybe it is this way for most people, but in my case what I saw and felt and heard were sometimes "different" from what many others experienced.

I spent most of my life not really understanding what "was wrong with me," and, unfortunately, there seemed to be so many areas that were not right with me, that my good points were terribly overshadowed by my deficits. Although I have always been motivated, it probably didn't show much in those earlier years when I was grasping at anything to stay alive and be productive.

In closing, I have finally discovered that my strength lies in my energy, warmth, motivation skills and the way I am able to sell myself. If only I had known (when I was growing up or in my early adult years) that there were others like myself in the world, it would have been so much easier to endure all the pain! I know I have a way to go, and that many of the difficulties I have encountered will continue, but I am very proud of my achievements!

Editor's Note: Katharine Wilhelm resides in West Hartford, CT and is active in a number of national and local groups related to learning disabilities and attention deficit disorder.

Become a Member of NCLD



The Experience of LD Students

Editor's Note: The following pieces are authored by students around the country attending schools for individuals with learning disabilities. They were submitted at the request of THEIR WORLD. In order to be instructive to the reader and to preserve the integrity of the student's work the Executive Editor of THEIR WORLD elected to make no editorial changes to the pieces as submitted. The greatest regret is that THEIR WORLD has not been able to publish, because of limited space, all of the many pieces we received.

We have not listed the writer's age or any information other than that part of the name which they gave us. Suffice it to say, each of these authors began at one place and advanced to another. All of us are inspired by the courage of these young people, their success, their directness, and overwhelming sense of optimism as they come to be with individuals who accept them for themselves.

THEIR WORLD is enormously grateful to the young people who wrote for us.

School

I was in my 5th school and in the 8th grade. I have changed so many schools in the last 8 years it's hard to keep track. I have been dealing with a problem that I have had all my life. It is called a learning disability. My family has been very supportive of me all through my school years.

When I was in the first grade I was diagnosed as a learning disabled child. I had a hard time adjusting to this problem. I could see my problem through my schoolwork. The reason I kept changing schools was because of my problem. The help I got was ok during the first couple of years but then I hated school.

In 5th grade my grades really dropped - Even worse than they had been before. The teachers didn't seem to care about my prob-

lems. They knew about my problems but most of them didn't seem to care. At least that's how I felt. I came very close to flunking 4 times: once in the 4th grade, once in the 5th grade, once in the 6th grade and once in the 7th grades. My life had been hell for me. Today though, I didn't realize it was all change.

I walked into the building. This school was different from the other schools I had been to. This school was much smaller than my other schools. The classes were very small: only 8 students to a class. There were so many teachers, and they were all women. I liked that! The only men that I saw were the principal, the janitor, and the gym teacher. There were little kids yelling and screaming to one another as they ran to their rooms and lockers. Many of my teachers began talking to me; they were trying to make me feel better. The other kids were looking at me, they knew I was the new kid. I began walking around the school and looking at things on the wall. I started to talk to some of the kids. I met new people.

The first couple of days, it was hard to make friends. The classes were very different and smaller than I was used to. The classes seemed more structured. Lunch was also different because they did not have a lunch program. At the end of the day, I went home and talked to my mom and dad about my day. That first day at my school was the wierdest day of my life but it was also the beginning of my new life.

I am now 16 years old and in the 10th grade. This is my third year at Churchill. For the last 3 years I have been working on my school problems. I plan to finish my third and final year at Churchill on a good note. I will be ready to return to a traditional school in the fall of 1992. I am kind of scared to go back, but I am also very glad to go back.

*Matt Lanigan
The Churchill School,
St. Louis, MO*

Editor's note: This writing was included along with several others from Churchill in a production done by the Child's Play Touring Theater. Matt, who is now a senior at Christian Brothers College Prep., in Saint Louis, co-authored with several other Churchill students, Mary Anderson, Suzanne Cardinale, Brian Gordon, Rudy Mahanta, Tim Spiegelglass, and Andrew Williams, a book on LD experiences for students entitled, "Looking Through the 'I's" of the Learning Disabled."

On August 18, 1993 I found out that I was Learning disabled. At first I was very skeptical about the test score, until I saw it. The principle of my school showed my parents and I the test I took a week before. It was amazing what kind of mistakes I made on the test. Some of the mistakes could have been prevented if I took my time and looked over everything, but I didn't do that. When I was told that I would be going to Developmental Resource Center I was excited. I thought maybe I would finally do good in school, and I did. I think my success in school has to do with my teacher, Mrs. Dykens ability to teach learning disabled kids. She boosted my confidence and made me feel good about school for the first time. I enjoyed waking up in the morning and seeing my teacher and my friends. My grades went up and so did my confidence. So I really want to say thank-you Mrs. Dykens.

*by Slim Jim,
Developmental Resource Center,
Hollywood, FL*

Reource room! The one thing that made me feel like I was retarded. But I new I was smart. Just walking through a room with kids being torchered! Kids that were cryng and it was like walking through a torture chamber. "I can't do it!" was the only thing i could say. I still have nightmares about school. I had two friends Andrew Davids and Spencer Nelson. When my mom was called to a meeting, theysaid "Sorry



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we thought we could keep him going to the resource room." .."Your son must leave the school. I was kicked out in December for 3 weeks I stayed at home. For the rest of the year they made my mom pay for the rest of the year. Then something extraordinary happened because I had learning problems the Carroll School had another place for me in Mrs. Luz's class. She taught me so I could learn to read and write and no one laughed at me because I came at the middle of the year. I met Andrew Cooper and we became quick friends. As the weeks passed I made more friends. You are probably wondering what's diffeent about a regular school and a school for dyslexics. Carroll School does not have a recourse room and we have little tricks like Sounding out the words and hands on learning. Mrs. STROME was the best teacher I ever had! My favorite subject is Bounders (outside activeteis) Carroll School is a very unigue school.

*by Peter Gray,
The Carroll School,
Lincoln, MA*

I am a sixteen year old girl. My sister, who is 9 years old, makes fun of me because I cannot spell some of the words that she knows how to spell. It hurts me when I am writing a grocery list and she looks at it. I feel that she is snickering behind my back because I have trouble writing a word like potato. Before I

went to this school, she used to tease me and say that she could write better, spell better and that she was the best at everything. I would cry and tell my mother but she did nothing. My sister would keep on teasing me until I told her that I didn't like what she was saying. After I talked to her, she never did it again. When I started to go to this school, the teachers helped me out especially my tutorial teacher Mrs. G.

*by Anonymous,
The White Oak School,
Springfield, MA*

My biggest achievement in life has been overcoming the challenge of dyslexia. It is not that it is bad to be dyslexic, but I found that it made me have to work harder all my life. Some of the world's leading celebrities are dyslexic. For instance Cher and Whoopie Goldberg are some of Hollywood's highest paid actors, and they are dyslexic. However there are many people that are dyslexic that have to fight to get through the hardship of life; and their name is not on the front cover of People. There has been quite a few times that I could have just given up on something, but someone would say to me "you are dyslexic and will have to work harder than anyone else, and that it is not going to get any easier; you just have to learn how to deal with it."

When I was in the first grade my mother and the school that I was attending got together. The school said that I was incorrigible and was doomed to a life in the resource room. The kids in the classes higher than mine made fun of me because I could not keep up with my class. My mother soon invested in a tutor for me. My tutor was the only one that taught me anything at all. The school that I was attending did little for me (except pass me.)

When I was in the fourth grade, my tutor suggested to my mother that I was tested, to check my improvements thus far. The tests showed that I could hardly read, write, or spell. The three most important things in life, and I could barely do any of them. The school knew that I was not capable of doing the work



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that the people in the mainstream class were doing, but they still passed me. After the sixth grade I was sent to Kildonan a school for dyslexics.

When I arrived in the fall of 1988 I was only 12 years old, and I was on the road to knowledge. I have had some of the best teachers that can be found in the world here at Kildonan. When I was having trouble in any subject I could always get the help needed. In the school previous to this one, the teacher just gave me a puzzle or building blocks to keep me entertained for the school day. Everyone is dyslexic at Kildonan. That has been a real help to encourage me. I have learned how to work, organize my thought, and use my time more effectively. I have learned how to read, although it takes a little longer than I would like to. My spelling is my biggest weakness I find that I cannot spell at all, but I have learned to correct it through the use of a computer.

But I have also learned to develop my strengths, and I have discovered that my biggest strength is leadership. I am now in the twelfth grade, and am the student council president. I have been involved in student council for five years. Through that experience I feel that I have become a true leader. I have also been a member of the Kildonan ski patrol for three years. Also I am the captain of the varsity soccer team this year and have been captain of the varsity lacrosse team for two years. This is the first year that this school has introduced a prefect system. I went through

the vigorous application and interview process and was selected to be one of the few prefects.

Because I am dyslexic I have to work so much harder than everyone else does. I know that it is not going to get any better if I do not keep on with my hard work. But I am committed to doing that work to succeed in college. That is why I know that I can succeed.

*by Matthew Mills,
The Kildonan School,
Amenia, NY*

At my old school the boys and girls always made fun of me and they wouldn't let me play with them because I was not as good as them. They thought that I was not as smart as them, but they were wrong. It was hard for me to make many friends but I had a few good friends. I know my true friends wouldn't make fun of me. They would let me play with them.

Now I go to Eagle Hill and I have more friends. I am happier at my new school than I was at my old school. People are nicer to me here and it is easier for me to learn things because I know it is just as hard for other people to learn things too.

*by Adam Schwartz,
Eagle Hill School,
Greenwich, CT*

My language teacher at Camperdown Academy helps me to read. She is nice and takes the time to help me in whatever I am having trouble doing. She only smiles and always cares about me. All her concern helps me to keep trying to do my best.

Camperdown Academy is helping me to learn to read. That's the most important thing. I have to read. I want to read.

*by Timothy Lilley,
Camperdown Academy,
Greenville, SC*

In my old school we had some science, but we had to learn out of books. It was very hard to understand. We were trying to learn about plant life. At Jemicy my science teachers, Joe Chidester and Ginger Reddick, let us do more hands-on learning and projects. Joe is my physical science teacher, and Ginger is my nature science teacher. Right now in physical science, we are learning about chemical reactions and changes. Joe lets us experiment with chemicals to see what happens. I enjoy working with chemicals. In Ginger's class I am doing a science fair project with one baby Gerbil and one baby Hamster. I am trying to see if they can have babies. Now I can learn and understand science.

*by Adie McPherson,
Jemicy School,
Owings Mills, MD*

Hi! My name is Palmina Maglio and I'm a dyslexic. It is hard being dyslexic and understanding what being dyslexic is. At first it took me awhile to get use to being dyslexic. I use to think I had some kind of disease, but now I understand that I'm not stupid or dumb. Did you know that many dyslexics have a higher IQ's than people with out dyslexia?

When my parents learned that I had dyslexia, they first found out about Carroll School. They fought hard to get me into Carroll School because it is one of the top schools for Dyslexics. I started coming to Carroll School seven years ago, thats right, I've been at Carroll School for seven years! This is a long time, but as I like to say, it pays off in the end. Carroll School has helped prepare me so much for the world ahead of me.

One thing that really kept me going through all of this one little saying that I kept in my head. That saying was that some day Ill read as well as them and, as my drama and music teacher says, "believe in your self and work really hard, and you can do anything!" That's the key.

*by Palmina Maglio,
The Carroll School*

My dyslexia affects my life in three ways. One of the ways is by interfering with my language skills. Another is the way I think and do things. The third thing is forcing me to come to Dunnabeck and Kildonan. These are big affects on my life, and yet I like the affects that have been bestowed on me.

One of the parts of being dyslexic is bad or not so great spelling and writing. In my case, it's true. My spelling is at a lower level than my grade level, but my reading is almost at a point where it is at my tenth grade level. The thing that hurts me the most of all is that I can't get my ideas down on paper from my head. Another thing that goes with dyslexia is the reversal of numbers and letters. This is one of the things that I think is in every dyslexic.

The better part of being dyslexia is the way I think and see things. When I look at a paper, I can remember things a lot better on a graph than in word form because I have a better photographic memory. Another part of dyslexia is that I can see things that a lot of ordinary people don't see. This gives me a better edge over ordinary people, and that helps me feel good about my dyslexia.

My dyslexia has, however, required me to go to Dunnabeck (The summer camp held on the Kildonan campus) and Kildonan so I can learn skills that I've been unable to learn. Since I've been at Kildonan and Dunnabeck, my confidence level has skyrocketed, and I feel good about the way I'm learning things. Even though my personal life at home has been changed a lot because of school, I'm glad I have this opportunity, and I would recommend Dunnabeck or Kildonan to any dyslexic.

The word dyslexia means to me as a label of a way of learning things. This label was harsh to my grandfather in which people thought he was stupid for he couldn't spell or write well, or when my mother was beaten because it meant a lot to adults at the time to have a child that is smart in school. I'm very lucky today that a lot of adults understand what dyslexia means and that we can spot it at an early age. Also as technology grows, dyslexics won't have to depend on other people to correct

their mistakes. This will be done through the age of computers.

*by Alex Aronson,
The Kildonan School*

I am a LD kid that goes to Eagle Hill School. I am happy to be at a school with other learning disabled kids because here, unlike my old school, I do not get teased or laughed at. Most people at my old school used to think I was stupid. It is not the greatest thing when kids on your hockey team ask you what school you go to and have you say Eagle Hill because they think it is for messed up kids. Many kids do not know what a learning disability is. It's not my fault that I can't learn as quickly as some other kids. Most kids who go to Eagle Hill are intelligent and would do well in other schools if they did not have learning disabilities. People do not understand that I have to work twice as hard to finish a paper or a test or any school related thing as a non LD student. In my old school I got less homework than everyone else and people thought I was stupid and could not do the work. People don't know that I have a learning disability until they ask what school I go to. People should take the time to know what an LD child really is before they call him stupid.

*by Morgan Lewis,
Eagle Hill School*

Now I am at Jemicy school it is for dyslexic kids it is my first year here and I love it it is a great school. I remember when I was at my old school. Now I am in fifth grade but in fourth grade I met my best friend Jamie Surosky you see at my old school I was like the only dyslexic kid there some kid made fun of me but my best friend Jamie Surosky would protect me she would show them how was boss. This might be hard to believe but I kind of like being dyslexic because people who are dyslexic can be very creative and very intelligent in some of the same way and some different ways.

*by Jenna Gelin,
Jemicy School*

One Person Can Make A Difference



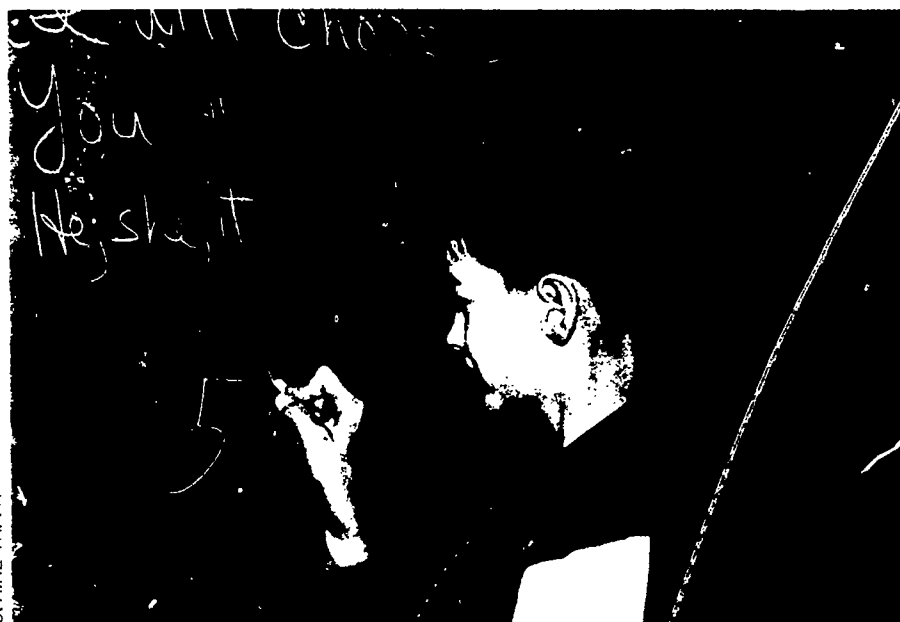
PHOTOS BY CLAIRE YAFFA

The Library for the Study of Learning Disabilities Ashland, Kentucky Community College

by Helen Johnson Ashworth

As I closed the bedtime story book and bent over to give him a good-night kiss, Robert looked up, his beautiful brown eyes brimming with tears and said, "Mrs. Mac says I'm not going to pass." The year was 1968. This innocent comment by my bright, curious and very remarkable six-year-old changed the course of my life and set the direction of many of my activities for the next twenty years. Of course, he was going to pass! No one ever fails the first grade! It was then that I took my first venture into the world of Learning Disabilities, a world about which very few in Eastern Kentucky knew anything at all.

I had never given any consideration to the idea of a learning disability, but I began to think about the miracles that most of us experience every day without awareness or appreciation. We are able to transfer instantly a jumble of strange black marks on paper to words in our own native language. We are able to form thoughts and ideas from the words, to create pictures out of those thoughts and to store them in memory. We are able to use strange symbols to evaluate and structure our world, to solve problems and to answer questions. We are able to decipher and interpret



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the spoken word, to express feelings and to inform. We do all of these things without any conscious effort, and we do them in living color! For those who are learning disabled, the ability to perform these miracles is imperfect—not absent, but imperfect.

Encountering the Misunderstanding

Over the next few years, the search for resources and knowledge of learning disabilities was intense and persistent, but the results of that search were pitifully few. There seemed to be nowhere to turn for information or advice—no textbooks, guidelines, diagnostic material or resources. But little by little, I learned about the children and adults who everyday endure

the frustration and humiliation of a Learning Disability—that misunderstood and mysterious “hidden handicap.”

It is misunderstood, because there are bright, sensitive, curious children who are not able to learn and progress in school according to a prescribed and established curriculum. It is misunderstood, because there are responsible, intelligent, mature adults who are unable to

realize their obvious potential or to meet the demands of the workplace. And it is mysterious, because no one fully understands why. All we know is that there is an inherent difference for some in the way information is processed and interpreted; that there is an imperfect ability to read, write or communicate; and that even superior intelligence does not prevent failure to learn by way of the usual teaching methods.

Since no two learning disabled children are exactly alike, there can be a wide range of symptoms, but the primary characteristic of a learning disability is that there is a significant difference between overall intelligence and achievement in some particular areas. This subtle but important difference goes to the heart of the problem for learning disabled children in the public school system for two reasons. A child's learning ability is usually evaluated on the basis of standardized I.Q. Tests, and sadder still, the child's academic achievement is documented by an inflexible grading system and influenced by a subjective judgment of personality and behavior.

The Shadow Between Idea and Reality

Today, all across this country, there is much discussion about education reform, including a



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commitment to special education programs and individualized education plans. However, between the idea and reality there falls a shadow. Between the law and reality there intrudes a barrier. In too many city and county school districts, the LD student is not distinguished from all other children who differ in their ability to learn or to participate in the normal classroom programs. In too many schools, special education teachers equate “Learning Disability” with “Developmental Disability”, primarily because a student's educational performance is measured by one particular criterion, the documented correlation between classroom achievement and a standardized I.Q. Test score, the Discrepancy Formula. Thus, the system usually fails to meet the desperate need of the LD child for an individualized education program.

Helping with Current Information

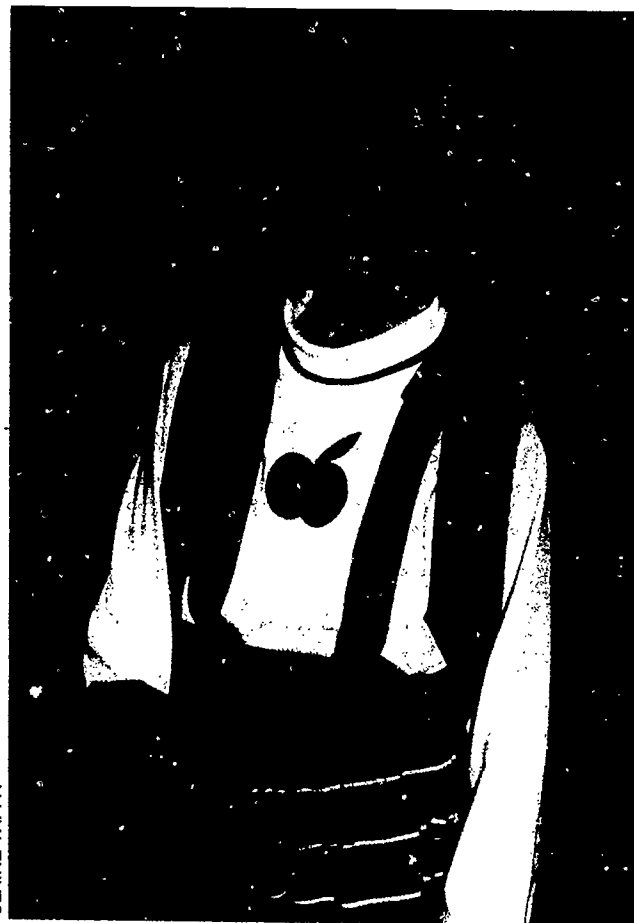
Today, parents continue to be bewildered and confused when they are told that their failing child has the intelligence to do well in school, and they are left conscience-stricken, wondering if the fault is theirs. They search for reasons and for ways to help this deserving child, but in order to do this, they must have access to the latest practical information, sci-

entific research and technical resources. The need is critical.

Sadly, the inspiration to fulfill this need was born of tragedy, but it became a reality in the form of a memorial to a beloved young man.

In November, 1990, a proposal was presented to the President of Ashland Community College to establish a Reference and Resource Library for the Study of Learning Disabilities as a separate and designated part of the College's new Learning Resource Center. It was explained that the need for an information resource which would be available to the entire community is overwhelming. Knowledge and understanding of Specific Learning Disabilities are poor or lacking altogether in the area. Learning disabled children at all educational levels are misdiagnosed or unrecognized, and the potential for long-term damage to these children is ever present. All those interested and involved in our public schools need desperately to be well-informed about Learning Disabilities. Parents and teachers alike must be educated about the signs, symptoms and methods of care. The community must be encouraged to offer support and understanding to the children and adults who endure this disability. A library devoted entirely to the vital subject of Learning Disabilities would be an unparalleled asset to the College.

The proposal was reviewed and accepted by the University of Kentucky Community College Advisory Board. The ensuing plan for securing the necessary funds included the donation of the Robert Warner Ashworth Memorial Endowment Fund as well as contributions from the Ashland community. In July 1991, a Grant of \$5000 was received from the National Endowment for the Humanities as part of a University of Kentucky Library Campaign. In-kind contributions included shelving made by local carpenters, furnishings donated by the College, and two Limited Edition Art Prints, "Learning Together" and "Learning Through Love" by Pat Buckley Moss, given by the Moss Society. Advice on the selection of the initial volumes was offered by The Learning Disabilities Association of America Professional Advisory Board



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Members, Barbara Bateman, Barbara Cordoni, Donald Deshler and Rosa Hagin and by the Director of Libraries at the College. The identifying logo printed on the book plates and on the binding end papers was designed by Cary Wills of the Ashland Community College Art Department.

The Library for the Study of Learning Disabilities

The Library for the Study of Learning Disabilities was opened on November 29, 1991 and was presented as part of the Dedication Ceremony of the Learning Resource Center by the President of the University of Kentucky. It is the only library of its kind in the University of Kentucky Community College System.

It is advised and monitored by a Council of five members of the local community who have a professional knowledge and/or a personal interest in the field of Learning Disabilities. Ex-Officio members of the Advisory Council

are the Director of Libraries and the Chairman of the Department of Humanities.

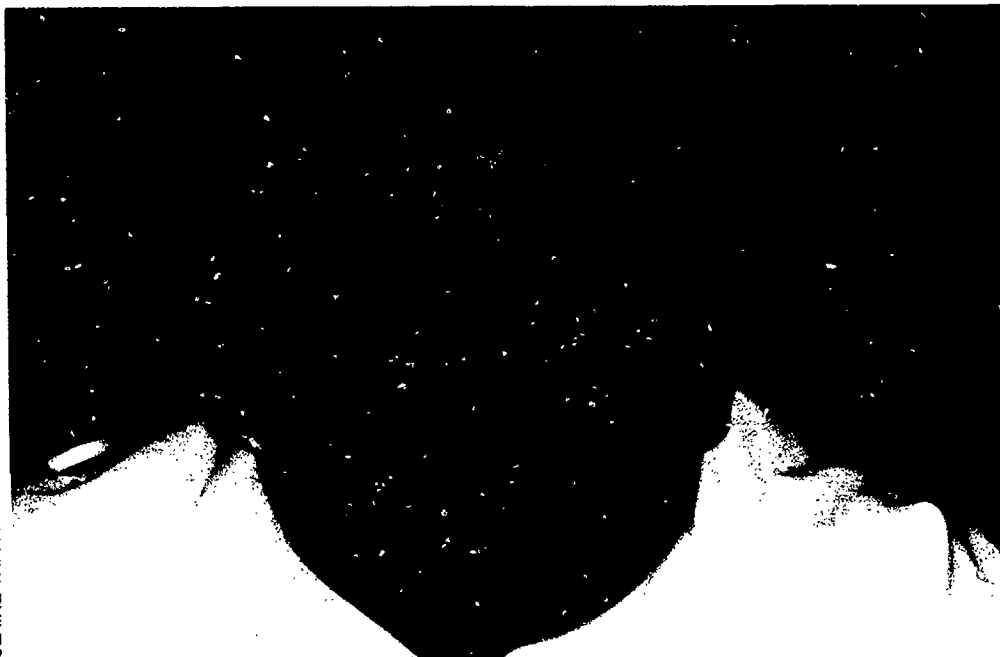
Meetings are held semi-annually by the members of the Community Advisory Council to review publications and to approve and purchase new materials. All materials, such as books, journals, pamphlets, scientific reports, research papers, films, video-tapes and audio tapes deal specifically with

the many aspects of learning disabilities. The materials are catalogued accordingly, labeled with the especially designed book-plates and placed in a uniquely constructed part of the College library. They are then computer coded into the catalogue of the Margaret I. King Library on the main Campus of the University of Kentucky in Lexington. Thus, they are made available to students, parents, teachers, professionals and interested citizens in all parts of the Commonwealth.

Today, the inventory of the Library includes 150 hard-bound volumes of books, as well as journals, free pamphlets, reprints of professional papers, directories of resources, films, video tapes and audio tapes. This year the library plans to provide lectures, seminars, workshops and support group meetings for students at the College as well as for the entire community. Also in development is a plan to offer training to teachers of learning disabled children in the public schools as part of the inservice days required by the Kentucky Department of Education.

Heroes

It is especially important to know that this library is dedicated to heroes; these children and adults who somehow find the courage to go

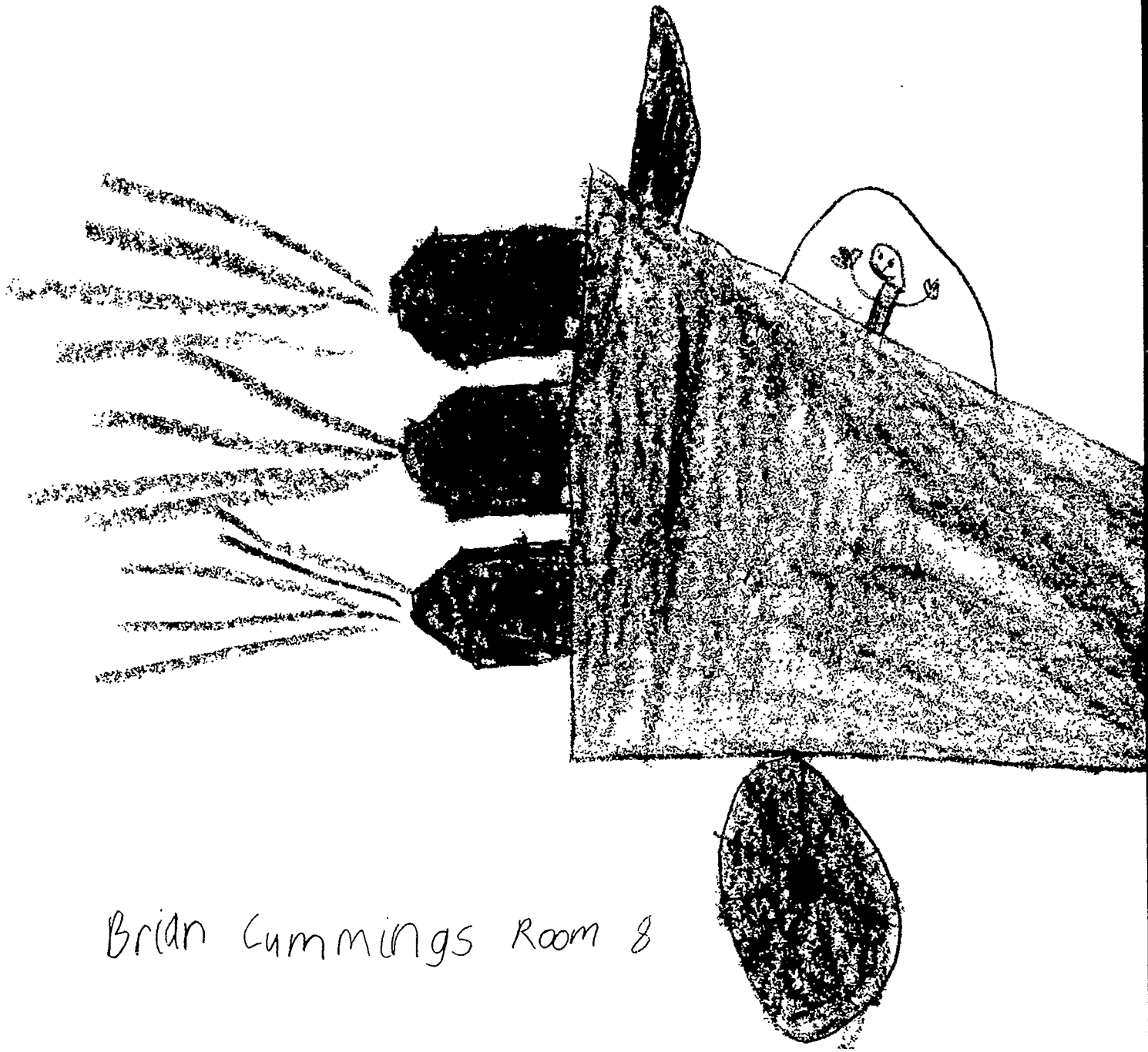


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forth every day into the trenches of the classroom or the workplace, to do battle with whatever talent and equipment they have, to try to fit into a world designed for those without their unique problems, to face almost constant criticism, and always to compete. They are likely to fail, and if they fail, they must suffer the consequences of rejection by all those who mean so much to them. The library is also dedicated to parents who are understandably bewildered and don't know what to do or how to help the child they love so dearly.

When we come to the edge of all that we know, we must believe one of two things: There will be Earth to stand on, or we will be given wings to fly. This unique library is Earth to stand on. The treasures it holds will give wings to fly.

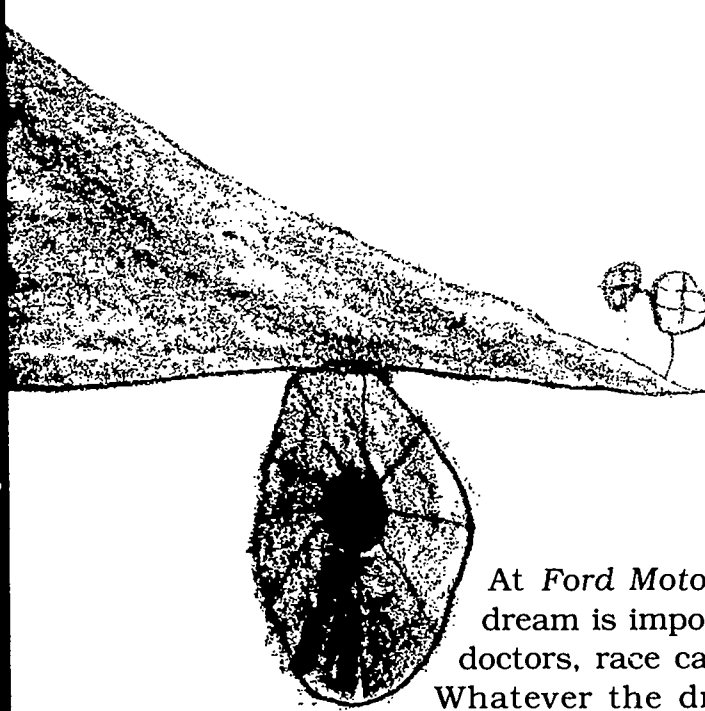
Editor's Note: Helen Johnson Ashworth B.S., R.N., a graduate of Johns Hopkins University, is President of the Learning Disabilities Association of Kentucky.



Brian Cummings Room 8

Brian Cummings is a 5th grade student at Eton Academy in Birmingham, Michigan. The Eton Academy is the only independent school for children with specific learning disabilities in the state of Michigan. Brian has aspirations of someday becoming an automobile designer and he names Jackie Stewart as one of his role models.

We believe today's dreamers may be tomorrow's innovators.



At *Ford Motor Company*, we believe that every child's dream is important. Children dream of becoming teachers, doctors, race car drivers, automobile designers, engineers... Whatever the dream, a learning disability should never prevent a child from living a life of fulfillment and becoming the person he or she wishes to be. That's why *Ford Motor Company* is happy to support *The National Center for Learning Disabilities*. Your continuing efforts enrich the lives of children with learning disabilities, and help to develop the dreams that shape our future.



A man who proves that dreamers can achieve the very best in life.

Jackie Stewart is a world-famous racing expert, a consultant to Ford Motor Company and a leading supporter of the NATIONAL CENTER FOR LEARNING DISABILITIES. Few people know that he had to overcome his own learning disability in order to realize his tremendous achievements in both racing and business.



Substance Abuse Rehabilitation and Learning to Read

by Joan R. Knight and Joan Randell

Individuals entering drug treatment have severe educational and vocational deficiencies. The importance of educational and vocational programming in the rehabilitation of clients enrolled in publicly funded drug treatment is well documented. Less than one third of clients entering drug treatment are employed. The majority have meager work histories and skills. Most are high school drop-outs, many of whom have reading and math abilities functioning below the eighth grade level. Clients recognize the need for educational and vocational services themselves and say that their greatest unmet needs while in treatment are in these areas.

Since 1980, New York State's Office of Alcoholism and Substance Abuse Services (OASAS) has worked with the State Education Department to help ameliorate some of the client's educational deficiencies while they are in treatment. Through local education agencies, such as the New York City Board of Education, teachers are assigned to provide the range of adult education services on site at many treatment programs. The majority of classes are in residential treatment programs where clients stay between one and two years to receive treatment for their drug addiction.

In the mid-1980s, staff from OASAS' Bureau of Vocational Services unit received numerous reports that significant numbers of clients attending on-site education classes were not learning. This was in spite of the fact that their IQ's were average or better and they appeared motivated to learn. Knowing that there were high rates of learning disability and poor self concept among criminal justice



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populations and that over 60% of the clients in OASAS' programs had been involved with the criminal justice system, it was hypothesized that learning disability, specifically dyslexia, and poor self concept might be problems for substance abuse clients as well.

Of the many problems that can interfere with learning, dyslexia is the one that most directly impedes the acquisition of reading skills, upon which school and future vocational success depend. Dyslexia is a condition that

affects the ease with which students begin to learn and use language. For some youngsters, dyslexia may be apparent in their pre-school speech. The first clear signs, however, emerge when the child attempts to learn to read. Decoding — the foundation of reading — becomes inordinately difficult, as does spelling. Both depend upon an intuitive grasp of sounds and sequences in words.

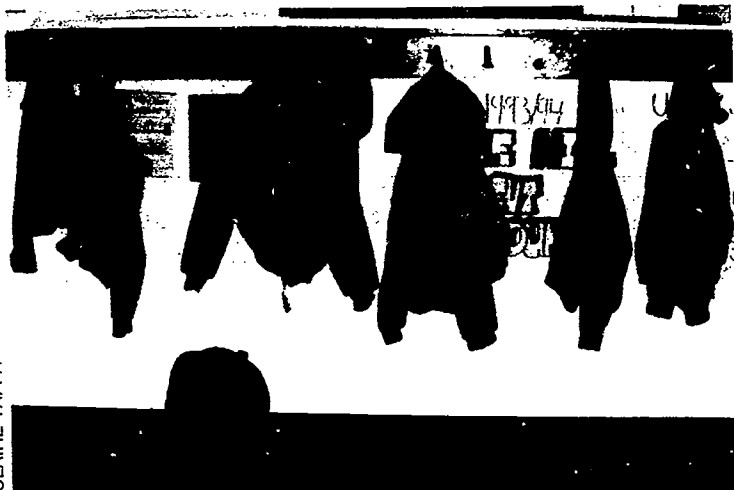
For some, dyslexia is accompanied by difficulties with math, or learning the social skills appropriate to their culture, or contending with the aspects of Attention Deficit Disorders (ADD): hyperactivity, impulsivity, and inattention.

Unattended Learning Disorders and Delinquency

When these disorders occur concurrently, the student faces immeasurable hardships which often lead to interaction with the criminal justice system. It is thought that at least 45% of youth convicted of juvenile delinquency have undiagnosed learning disabilities. OASAS wanted to determine whether, with 40 weeks of intensive classroom remediation, clients with the characteristics of dyslexia would be able to improve their stagnated reading scores sufficiently to pass reading tests to enter vocational training programs or jobs that would have been closed to them. Visible progress towards those ends would increase the likelihood that they stay in treatment and/or sustain recovery.

Unfinished Schooling Produces Diminished Career Choices

Because having a job is the best predictor of success in drug treatment, an important objective of treatment is entry into the job market through vocational training, on-the-job training or higher education. Clients who are high school drop-outs and who have long been reading on low levels are closed out of most of the jobs with upward mobility available in today's economy. They also suffer from low self-esteem and feelings of hopelessness, believing that they are incapable of changing their educational capabilities and improving the quality of their



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lives. Many remain vulnerable to self destructive behaviors, one of which is addiction.

Moderate to severe dyslexia, if undiagnosed and untreated, thwarts the development of language skills which results in unfinished schooling and diminished career choices. Thus, it was believed that if dyslexia were to be found in large numbers of adult clients and a 40 week program of classroom remediation were designed and implemented, reading levels could be expected to rise. The achievement would bolster their self esteem and encourage them to stay in treatment long enough to graduate and enter jobs, skills training, or higher education programs.

Knight/OASAS Program for Dyslexic Adult Substance Abusers

A program of remediation was developed and designed to run 40 weeks. During a five year period from September 1987 to June 1992, over 400 ethnically diverse clients who had been free of illicit substance abuse and in treatment for at least 3 months were evaluated by Knight Education Inc. The students selected for intervention services had moderate to severe difficulties with sounds and sequences. Of the 291 who fit the criteria for dyslexia, 133 were enrolled in classes (36 females, 97 males) and 94 or 70.6% of those completed the course.

Each year seven screening instruments were administered individually to clients at their treatment centers in order to differentiate the

dyslexic from the non-dyslexic client. When screening was completed in all centers, enrollment decisions were made in consultation with treatment personnel. Only those clients who voiced a strong desire to enroll in the program were considered. To complete the diagnosis, the dyslexia-trained teacher administered nine more tests in the classroom before instruction began. The battery of tests included the Test of Adult Basic Education (TABE) and others related to the alphabet, sounds of letters, reading short vowel sounds in long and short words, spelling, handwriting, blending and oral reading comprehension.

With each test, students learned more about their own dyslexia which, like a thumbprint, is different in each person. Instruction was a multisensory structured language program in which all the language areas are taught: decoding, vocabulary, spelling, sentence composing, handwriting, comprehension, writing. Newspaper articles were used to teach content: science, politics, economics, history, art, music, drama, poetry. As decoding improved with remediation, so did comprehension even without remediation. The more fluent and errorless the decoding became, the more time could be spent on comprehension. Explicit comprehension instruction was added about two thirds of the way through the intervention.

During the course of diagnosis and remediation, it became clear that a majority of students had symptoms not only of dyslexia, but also of Attention Deficit Disorder. The combination of these with the inevitable emotional problems developing since childhood forced the students to face daunting difficulties which had never been formally assessed. With enlightenment came relief, cooperation, control and progress.

A social worker saw students once a week for counseling. Two days a month a vocational counselor worked with the class on job related

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attitudes and preparation. The teacher's dyslexia training was continued throughout the 40 weeks as the program director, a nationally recognized dyslexia specialist, visited the classroom once a week to guide and supervise the teacher's performance. A weekly meeting was also held to continue the teacher's education.

Students Become Believers

In the first year and similarly experienced in later years students came to realize that eight and a half months of remediation were the barest minimum needed to reverse a lifetime of language difficulties. Nonetheless, the average reading growth during that time was 1.9 years. Whereas in October they could not imagine remaining in school until June, by March they were requesting another year. Close to the end, students were referred for jobs, skills training, or higher education — all productive activities which 40 weeks earlier would have been neither possible nor realistic.

Some Implications

Students who fail to learn to read in the early grades of elementary school may have dyslexia. Without a diagnosis and specific instruction they are unable casually to pick up the sounds and sequences of the language skills, necessary for mastery of reading, spelling and writing. They fall further and further behind, dropping to the bottom of the

class. There they remain if they are quiet, well behaved and respectful. For those who are also hyperactive, impulsive and/or inattentive (ADD), disruptive behavior in the classroom becomes a major problem. When the inability to read is coupled with poor behavior it often becomes intolerable to the teacher and classmates and many children are required to repeat the grade. This confirms their fears of being bad, stupid, lazy or retarded, and many experience a precipitous drop in self-esteem. If being left back had taught them how to read and how to behave, it would have served its purposes and probably have been forgiven in later life. But, when the learning difficulties are undiagnosed, grade retention serves as a punishment.

Unfortunately, dyslexia and ADD, being neurological conditions, are beyond the control of these students and remain out of their control until intervention occurs. If intervention doesn't occur, they find they cannot easily join the group of children who are avidly reading and learning. Eventually they drift toward the group that finds learning difficult for educational or behavioral reasons. Unable to do school or homework, there is ample time to experiment with drugs.

Pure dyslexia is often called "the hidden disability" because the person is usually well behaved, sociable, and articulate. The attentional problems, on the other hand, are highly observable and make students appear disrespectful as they call out impulsively, push ahead of their turn, don't wait for others to finish, repeatedly disregard what the teacher requests, gaze out the window inattentively, never know what the class is up to and/or talk on and on. Such students are ceaselessly penitent and mystified by their own out of control behavior which often leads them to seek the temporary relief given by drugs and alcohol.

The students in this study raised their reading levels significantly within 40 weeks. Even though most had had adult basic education in their treatment centers or in prison, their scores had remained depressed. The diagnosis



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of dyslexia correctly identified their problems and together with the remediation relieved them of the guilt they had been carrying for having been the cause of their school failures. Their ability to learn was made apparent to them from the first interview and served to keep them in our classes well beyond national averages. They not only stayed the year but asked for more, enjoying the pleasures of intellectual stimulation.

The educational portion of this program, called "Starting Over," has been replicated with similar results in New York City high schools, intermediate schools, a large municipal union, and a community service program for out-of-school youth.

Editor's Note: The above article is abstracted from a longer report containing full references. For a copy of the complete original paper you may write to: Knight Education Inc., 317 W. 89th St., NY, NY 10024.

Joan Knight, a former President of the New York Branch of the Orton Dyslexia Society, is the founder of Knight Education Inc., which, among other interests is actively involved in teacher education programs in the New York area.

Joan Randell is the Director of Vocational Services for the New York State Office of Alcohol and Substance Abuse Services.

Starting Over at John F. Kennedy High School

by Eleanor Harrison

Editor's Note: The following excerpts a testimonial to a related program in the New York City Public High Schools, by Mrs. Knight. Truly one person can make a significant difference!

At John F. Kennedy High School in the Bronx, two Educational Evaluators on the School Based Support Team were responsible for testing, evaluating abilities, and placing students, with parental consent, in "appropriate" educational settings. In so doing, both realized that too many pupils were not making reading progress. In fact, most had not improved their decoding ability since elementary school despite the fact that they had average to above average intelligence. Furthermore, many achieved on or above grade level in their listening skills. That is, although they could not decode and consequently could not read, spell and write, it was apparent that they understood when read to.

Obviously these students had not learned to read through the traditional "whole word" method as it is taught in our public schools. An alternative approach was sought and several ideas were tried. One was to make lists of words and accompany them with auditory tapes. Another was to have the student read while listening to the book on tape. Neither worked. Independent reading skills were not acquired.

Alternatives to Traditional Approaches Sought

This led to a search for a teaching method that was successful with this type of population, and they found the "Starting Over" program developed by Joan Knight for adolescents and adults who had excessive difficulty learning to decode. This multi-sensory structured language approach to teaching decoding is effectively addressing the accompanying problems of alphabetizing, spelling, vocabulary building, handwriting, sentence composition, and reading comprehension.



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Curiosity led the two Educational Evaluators, a reading teacher, and the Assistant Principal of Special Education to visit Brandeis High School where Joan Knight's reading program was already in place. What they found was most encouraging. Of the 17 students who received one and a half years of "Starting Over" instruction, 13 increased their reading scores, ranging from .8 to 8.3 years. Only four of the 17 students showed little or no gain. Furthermore, the students in the "Starting Over" program made gains significantly higher than the students enrolled in the traditional "remedial reading" classes.

Determined to bring the program to John F. Kennedy High School, this small group of enthusiasts approached Kennedy's Principal, Mr. Charles Saltzman, to acquire the necessary funds. These were forthcoming and from here on progress was rapid. Three teachers and the two Evaluators went to Knight's two week summer training course, "Starting Over." Thirty-six Kennedy High School students were pretested using measures that were both formal (e.g., the Stanford Diagnostic Reading Test) and informal (e.g., the Knight Battery). The students were grouped according to decoding ability. Three classes with a total of 36 students began instruction in September 1989. By February 1990, a fourth "Starting Over" class was opened and taught by one of the teachers. Ms.

Knight, hired as the consultant for the year, came to the school one morning a week and spent one period in each teacher's classroom and a fourth period with the three teachers for on-going training, support and feedback.

Impressive Results

In June, 1990 30 of the original 36 students remained. Of the 30, 22 were present for post-testing. The results were impressive. After one year of "Starting Over" the scores indicated, without a doubt, that the program worked. The average increase in reading grade level for the three classes on the Stanford Diagnostic Reading Test was two years.

In September, 1990 The "Starting Over" program continued serving those students who had not graduated. A fourth teacher was trained during the second summer and joined the others in teaching another class. In the spring term Knight taught the course again to four more Kennedy teachers who were joined by 20 others from Bronx schools. The program is now in its fifth year and Kennedy teachers are serving as turn-key trainers offering courses to teachers in Bronx High Schools and Intermediate Schools.

There is good evidence of the success of this program; however, the hope, freedom of choice and dignity that the ability to read contributes to individual lives cannot be measured through statistical data.

A perfect example can be found in the dramatic story of one of these students. Ralph, when initially tested, scored 3.9 on the Stanford Diagnostic Reading Test. On the Knight #9 Short Vowel Test, he was able to decode only 20 out of 40 single syllable words (lax, yen, dun) and on the Knight #10 Test 31 out of 40 multisyllabic words (problematical, establishment, family) – hardly enough skill to attend college or even a good vocational training program. He was also truant and in danger of dropping out of school.

At the end of the first year his post-test score on the Stanford was 11.2, on the Knight #9 he read 40 out of 40 words correctly and on Knight #10 he read 39 out of 40 words correctly. At the end of the second year his post-test score on the Stanford was POST HIGH SCHOOL, which means college level. He graduated in June, 1991



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with a diploma, was accepted into college and has a future that is bright and promising.

Success cannot always be measured by such obvious acquisitions as acceptance into college, or graduating with a diploma. There are more subtle yardsticks. There is hope, and where there is hope, anything is possible. A young man who could only envision himself as a bouncer is now thinking about becoming an air traffic controller. Another is considering becoming a veterinarian. Several young women who could not think of anything they wanted to do at the start of the program are now thinking about becoming counselors, teachers, nurses, and doctors.

At Kennedy High School, "Starting Over" is contagious. One reading teacher, after witnessing the progress of these students could not contain her enthusiasm and began, with the help of a trained teacher, to incorporate this method into her lessons. She was subsequently formally trained. A great spirit of cooperation prevails. Teachers go into each other's classrooms to share methods, ideas and information.

Kennedy has been visited by many educators who observed its "Starting Over" program. Now, children who could not learn to read, are learning to read in more and more classrooms all over the Bronx.

Editor's Note: During the development of the Starting Over program Eleanor Harrison was a Guidance Counselor at John F. Kennedy High School in the Bronx, New York.

Confessions of an Add-On

by Paul Jaffe

At times I've said it was done simply on impulse. Yet, in truth, to write that first newsletter took nearly two months.

In late April 1990, I took part in two meetings of adults with Attention Deficit Disorder (ADD; or in the physically hyperactive version, ADHD). People who, by some lights, weren't supposed to exist: ADD being invariably presented as a childhood disturbance.

But there we sat, in a cozy but crowded waterfront hotel in Plymouth, Massachusetts, a stone's throw from Plymouth Rock. Talking about our lives, many of them sagas of interruption and self-interruption; of lost trains of thought, and the weeks and years that vanished with them; of wars fought in classrooms and living rooms and job sites.

Some of us wanted to do something, to make it known that we existed, and cared; but what could be done, other than to assist the recently-formed advocate organizations for parents of ADD children? To the sign-up sheet, I added my name and address and then went home (a few hours west, in suburban New York). With the patience I had at the time, I waited one week, three weeks, six weeks: silence.

So the question remained: what to do? Well, after the spoken word comes the written word; a process I knew something about. A publication, perhaps? (There were a few for parents of



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ADD children, but none for ADD adults.) Perhaps I could get on the phone, organize a committee, arrange a business meeting? But I was too disorganized, and besides, publications need to be written.

A Newsletter is Born

Write about what? Well, about "Paying Attention to Attention Deficit in Adults," a workshop at the May 1990 annual meeting of the American Psychiatric Association. (A panel led by one Dr. John Ratey, whose address I could not find; but available on audiocassette.) Two pages of material! I pulled together a few stray thoughts: a front-page editorial, some announcements, a reading list, and voila: four pages!

As for the name: "ADD has traditionally been viewed as a childhood disorder; but for those who carry the problem into adulthood, it

has a quality of 'that which is added on.' Hence the title of this publication: ADDendum."

Pasting these onto 11 x 17 sheets, I made photocopies one night when I was alone in the office where I worked. I folded these three ways by hand, inserted little blue slips with which to subscribe, printed some addresses — and mailed the first batch.

After about a week, envelopes started to arrive, with blue slips — and checks! And notes of encouragement scribbled on the back. Subscribers; my God, what was I supposed to do? Well, it was getting near September; I had a Fall issue to produce.

Luckily, some medication studies had lately appeared in the literature, and were easy to summarize. Throw in three letters to the editor, an eight-point action program that had been lying around, an old poem, and ADDendum was up to eight pages!

A chance remark at an unrelated lunch meeting linked ADDendum with a printer. A thousand sample copies of #2 were printed and distributed at the second annual conference of CH.A.D.D. (Children with Attention Deficit Disorders), in Washington, in early November.

At that conference, someone tapped me on the shoulder and handed me a manuscript: the now-classic "Blinks: An Underreported ADD Syndrome" by Michigan activist Jim Raisinger. Dr. Alan Zametkin's landmark brain-scan study of ADHD adults provided more grist. There was mail, and on Christmas Eve came my front-pager: the story of a young man denied a pilot's license for taking Ritalin (for adults as for children, the medication most often prescribed in ADD).

Calls to Washington

Unfortunately, an unrelated 9-5 job does not offer many opportunities to check stories. But one day I was sick, stayed home, and with my sore throat managed to call the Federal Aviation Administration in Washington. I got a return call from the FAA's top medical officer, who confirmed that the denial represented policy, not whim. (The FAA's policy on this is a double whammy. ADDers can be grounded if



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they have ADD, or if they take medication for it.) Another front page! More mail, a study, a hearing, a poem, and that was #4.

At some point during these months, I did hear from Dr. Ratey, who would be coming to New York to lecture on another topic, would I care to join him? So I rushed from my job on Manhattan's West Side to a hotel on the East Side, and asked an hour's worth of questions. Later, I joined Dr. Ratey and eight others at a jazz club on the West Side. When I staggered out at 1:30 a.m., I realized that the last train had departed. So I walked 10 blocks to the office and sacked out at my desk!

When pared down to its essentials, the Ratey Q&A took up five pages, and pushed ADDendum up to 16 pages, where it has stayed. Another poem, a long letter from a California ADDer therapist, and some childhood recollections: more material. Plus, a petition to get increased recognition of adulthood

ADD in the upcoming revision of the clinician's bible, The Diagnostic and Statistical Manual or DSM-IV. (I've run four follow-up reports; ADDendum remains the only source of DSM-IV coverage within the ADD community.)

In the end, a total of 191 people signed these petitions, which I delivered to the American Psychiatric Association headquarters in Washington. That was after spending all night doing the paste-up on #6, and riding Amtrak. That issue featured articles on what ADD adults thought about themselves, what their marriages were like, how they forced themselves to remember, and what they did on vacation (and swore never to do again).

I needed six more pages, so I wrote about what ADD was like — what with “cognitive noise” and “cognitive dimming” — at least from my interior vantage point.

In Washington, I found material for my next front page: data from psychologist Rachel Klein's 20-year follow-up of early-1970s hyperactive kids. (If you missed it in ADDendum, you could have picked up the story in Newsweek — eighteen months later.) I also lined up a distributor, and thus survived to put out #7!

A Legal Editor Joins the Effort

That issue featured a discussion of “cognitive noise” and “cognitive dimming” between myself and Peter Latham. Peter is a Washington attorney with a background in disability law. His books *Learning Disabilities and the Law* and *Attention Deficit Disorder and the Law* will be familiar to THEIR WORLD readers.

Peter volunteered to serve as Legal Editor, and his first piece analyzed how the 1990 Americans with Disabilities Act, which had then just gone into effect, might affect ADDers. On the train home, by chance I picked up a copy of the New York Law Journal. In it, I read about an ADD (and dyslexic) young woman who was suing New York State for the right to take the bar exam in a way that accommodated her disabilities. Here was a lead for #8! I got the rest of the story over the phone.

Around that time, the ADD community was abuzz with talk of a new — or not-so-new — treatment: EEG biofeedback. It occurred to me that I myself had undergone this treatment, 10 years earlier, with the leading practitioner in the field, Dr. Joel

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Lubar of the University of Tennessee in Knoxville. A personal account — mixed with a discussion of the treatment's scientific rationale — provided the lead for ADDendum #9.

I also ran a brief description, by CH.A.D.D.'s Mary Richard, of the ADD computer bulletin board of the Prodigy Interactive Personal service. A month later, when I finally did log onto Prodigy, it quickly hooked me with its 22-hour-a-day stream of information-sharing, support, and unexpected fun.

For #10, I strapped myself into what I call Starship ADDendum, with a piece on how Ritalin might be made into a cleaner and better-tolerated medication. But that same issue featured six signed pieces — all by ADD adults — on topics ranging from computers to calligraphy to horseback riding.

#11 featured more Starship ADDendum, with an editorial on how an experimental treatment now used in Parkinson's Disease might possibly be adapted for use in ADD. There was more on computer shopping; and a piece on the fortunes of Yankee pitcher Steve Howe. (Howe was expelled from baseball for cocaine use, and then readmitted on the grounds that the baseball Commissioner had not considered his ADHD diagnosis when pronouncing judgment.) The baseball part was fun to write about!

But the world moved on. The Prodigy ADD bulletin board went into decline when an hourly charge was added to what had been a flat rate; #12 led off with an elegy. A study connecting ADD with a rare thyroid-related disorder provided material for a threepage Q&A. Peter Latham wrote more about how the Americans with Disabilities Act is likely to change — or not change — the job situation. A personal account from 20 years back illustrated Peter's point that "compassion, tolerance and understanding" — items which could not be mandated by law — were nonetheless crucial.

Up to #13

#13 delved into some of the debates surrounding President Clinton's plan for health-care reform, specifically the question of whether federal legislation should mandate the equal reimbursement of mental-health expenses. It segued into a consideration of whether certain pep-talks might help or hinder ADD's inclusion in such a plan. The issue also included a wistful, and yet triumphant,

account of one woman's progress in being diagnosed and treated. And it launched a discussion of a peculiar type of cognitive noise: "romantic obsessionism."

And that's ADDendum: science meets law meets politics meets human experience, meets baseball, meets computers, meets country music. A potpourri, but the focus has never wavered from the topic at hand: what are the short-range and long-range issues affecting the ADD community, especially its adult segment; and how can these be discussed in ways that are meaningful, yet clear?

Editor's Note: Paul Jaffe is Editor of ADDendum and runs support groups in the New York area.

ADDendum is \$36/yr (for four issues) and is available from:

ADDendum
C/O CPS
5041-A Backlick Road
Annandale, VA 22003



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Coping and Advocacy Skills for the Learning Disabled

by Sarah Ginsburg

As a young, learning disabled adult, having fought "the system" for most of my academic life, I have learned many advocacy tips and coping skills. I suffer from a variety of learning difficulties, including reading, spatial relations, and depth perception problems in addition to Attention Deficit Disorder. My learning difficulties are serious enough that my choices for undergraduate and graduate schools were based solely upon which institutions would be the most willing and able to accommodate me. I can do well, as most people with learning disabilities would maintain, as long as I have special accommodations.

The University of California at Santa Cruz, my alma-mater, has several hundred learning disabled students, and is a magnet school for special learners. The school provided me with paid note takers, readers, and proctors for extended-length exams.

While at Santa Cruz I authored a coping and advocacy manual entitled, *Fighting for Your Rights - An Advocacy Guide for Students with Learning Disabilities*. It is being distributed to learning disabled students by the school's Disabled Student Services. As some students learn better auditorally or through a multi-media presentation, the essence of the manual was transferred onto video. The guide is based upon my own experiences, research, and interviews of learning disabled students and specialists in the field. This article presents some of the suggestions offered in the guide.



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Academic Tips

1. Register with Disabled Student Services.

Most universities have a D.S.S. office to insure special accommodations. D.S.S. should speak on your behalf and meet with faculty or staff who are resistant to accommodating you.

2. Take a reduced and balanced course load.

Take fewer classes; you will have more time to focus on your studies, get through your material, and organize your time. If you have difficulty reading, for example, take fewer heavy reading classes.

3. Communicate with faculty.

Students must meet with faculty members to establish good relations. Faculty members should be apprised early on of any special circumstances or needs. By attending a professor's office hours, you will have the opportunity of acquainting uninformed faculty with learning disability problems.

4. Utilize computers.

Apple Macintosh computers are particularly user-friendly. Microsoft Word is an uncomplicated word processing program which allows the user to enlarge type, change fonts, and employ a thesaurus and spell checker.

If you learn best by listening, the Kurzweil Reading Machine reads books and other documents aloud. Bookstores usually offer a variety of books on tape. Students with learning disabilities may register with Recording for the Blind (609-452-0606), which has a large taped book library and, upon request, will read books and texts onto tape. Many books are on CD ROM. Users can listen to the computer read while they watch the words on the screen as they are pronounced.

5. Study creatively.

For learning disabled students, learning is a slow and difficult exercise. Make it easier by using colors, crayons, and markers to learn concepts. Be creative in determining how you learn best. Experiment with different styles and methods of learning; see what works best for you.

6. Study alone if you are distractible.

Locate a quiet place in a clutter-free area. Be organized, and use earplugs if noise is distracting.

7. Sit in front.

Sitting in front, despite where your friends sit, helps you to focus on the lecture.

8. Do not procrastinate.

Procrastination undermines the student with learning disabilities. Added time pressures compound the anxiety of studying with a disability.

Personal Coping Strategies

1. Join or begin a support group for people with learning disabilities.

Talking with other people with learning disabilities is helpful. You can learn new coping tips, develop friendships, and build self-esteem among people who understand what it means to struggle with learning disabilities. If you learn best auditorally, talking out your

problems may be the most useful way to work out solutions.

2. Never give up.

If a task is difficult, stick with it, find help, and work until you succeed.

Advocacy

Being an advocate for your own needs and rights is critical in overcoming the many challenges and misconceptions with which you are faced. It is important to become familiar, comfortable, knowledgeable and confident with your disabilities so that you can become an effective self-advocate. Knowing your specific needs will allow you to explore ways with which to deal with them.

When you talk about your disability, be clear, polite, respectful, and unapologetic. Make it clear that you are not lazy or trying to get out of work. Explain that a learning disability does not mean you have low intelligence or an emotional problem. Explain your learning disability as clearly and as concisely as you can; discuss how it will affect your ability to take a course or perform at work successfully. Be positive and emphasize the things you do well and in what situations you perform best. Take printed information on learning disabilities to your meeting to help explain and legitimize your problems.

Role playing with a friend before your meeting is a useful tool. One of you should play the devil's advocate while the other plays the role of the student/employee with learning disabilities. Then switch roles to help familiarize yourself with possible opposition.

Be prepared to field ignorant, callous, and unsympathetic comments. Some remarks you might have to respond to are:

Professor/Employer: "Gee, I don't see why you need special accommodations; you seem intelligent enough to me."

Student/Employee: "Learning disabilities are not linked to intelligence; they act as a barrier to processing information."

If the faculty member/employer does not grasp what you are saying, relate your learning disability experience to a condition with

which he or she might be familiar. For example, you could say, "You know how it is when you are really tired, your eyes hurt, and you have a headache? Well, after ten minutes of reading, it is like that for me."

Professor/Employer: "I don't understand why you need to take the test with extended time or work in a distraction-free setting. It would not be fair to the other students/employees. Everyone would do better in a distraction free setting."

Student/Employee: "Yes, others might also do better in a distraction free setting, but for me it is not an option. I can't function, concentrate, or perform in a regular classroom or working situation. My learning disabilities and Attention Deficit Disorder make me highly distractible. In addition, my learning disabilities cause me to read slowly and painfully. It is an organic deficit over which I have no control. In order to be fair to me, I must have extended time for an exam or work project."

Professor/Employer: "Yes. You might be less stressed taking the exam or working under special accommodations, but life is full of stress and you should learn now how to cope rather than run from it."

Student/Employee: "Life is stressful, especially for a person who has to deal with learning disabilities. However, where you can perform under stress, I do not have that option. When I become anxious, particularly in a testing or at-work situation, I can't read, concentrate, or function effectively. I have no choice but to try to minimize the amount of stress I'm under when having to perform. To do that I must have special accommodations."

Professor/Employer: "How could you have ever made it to this university or employment position if you've got these kinds of problems? If you can't keep up with the other students/employees, you shouldn't be here."

Student/Employee: "I had to work hard to get here, many times harder than the average student or employee. Learning disabilities have no relationship to intelligence. I process information slower than people without learning disability; however, with special accommo-

dations, I can perform either at their level or better. If my problem were low intelligence, my achievement level would be limited."

Professor/Employer: "I do not believe that learning disabilities exist. It is just a matter of working hard and being committed to your studies or work. As long as you are organized, disciplined with your time, and study or work enough, you should not have any problems at all."

Student/Employee: "Learning disabilities do exist. They are recognized medically as a neurological deficit that impairs the central nervous system. The Rehabilitation Act and the Americans with Disabilities Act (ADA), both federal laws, recognize the existence of learning disabilities and require special accommodations for the learning disabled that will put them on a level playing field with those who are not disabled."

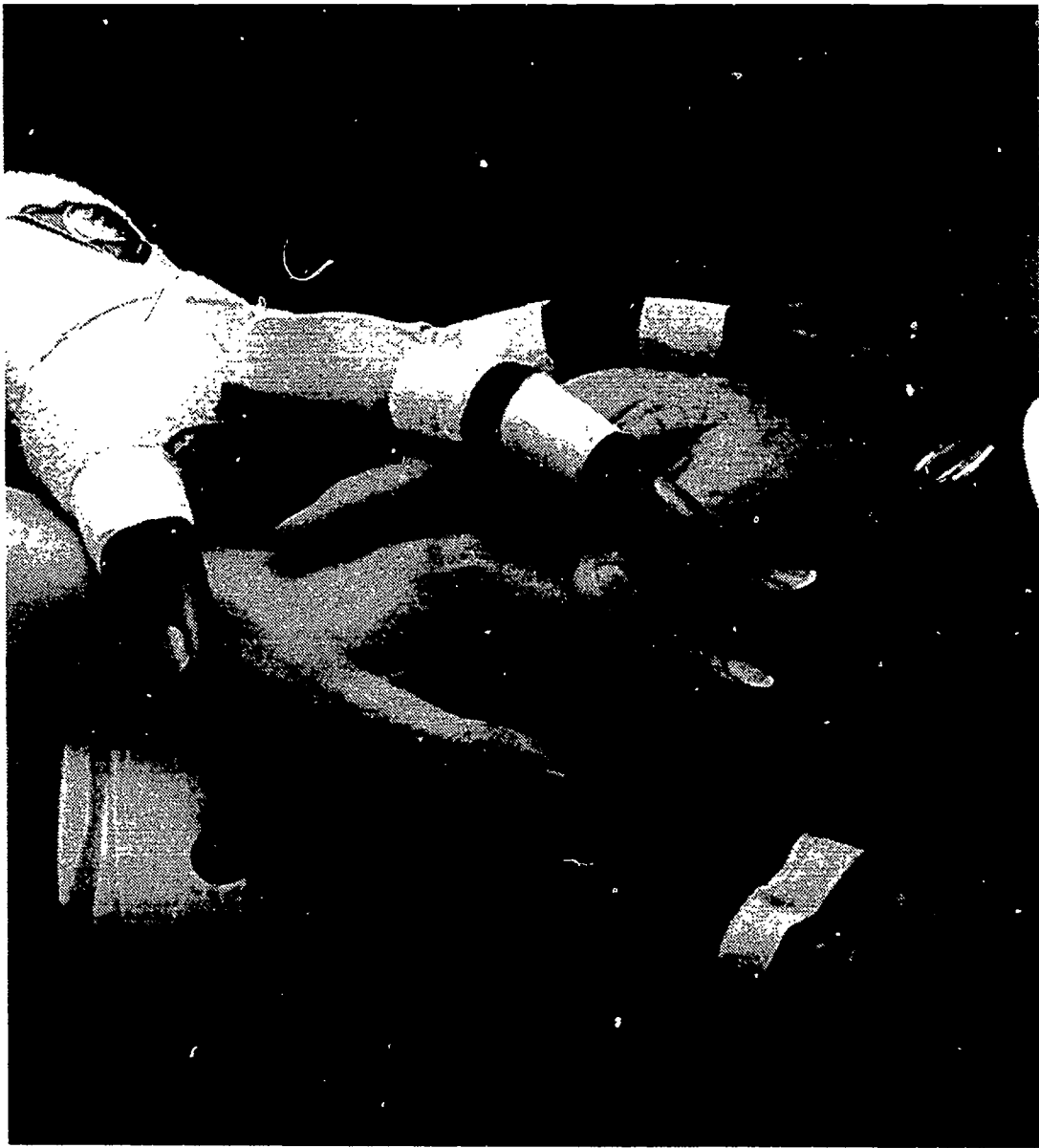
Don't Lose Faith

The learning disabled form a prestigious group that includes:

Woody Allen
Agatha Christie
Winston Churchill
Charles Darwin
Thomas Edison
Albert Einstein
Woodrow Wilson

Society would be the poorer, handicapped without the accomplishments of these and other learning disabled individuals

Editor's Note: Sarah Ginsburg, 22, is a native New Mexican who graduated with honors from the University of California at Santa Cruz. She has authored Gambling on Yucca Mountain: The Politics, Geology, and Risks of Nuclear Waste Disposal (1993). It is under review for publication. She has also written the learning disability advocacy manual which is the subject of this piece. Sarah is attending her first year at the University of Michigan's School of Law.



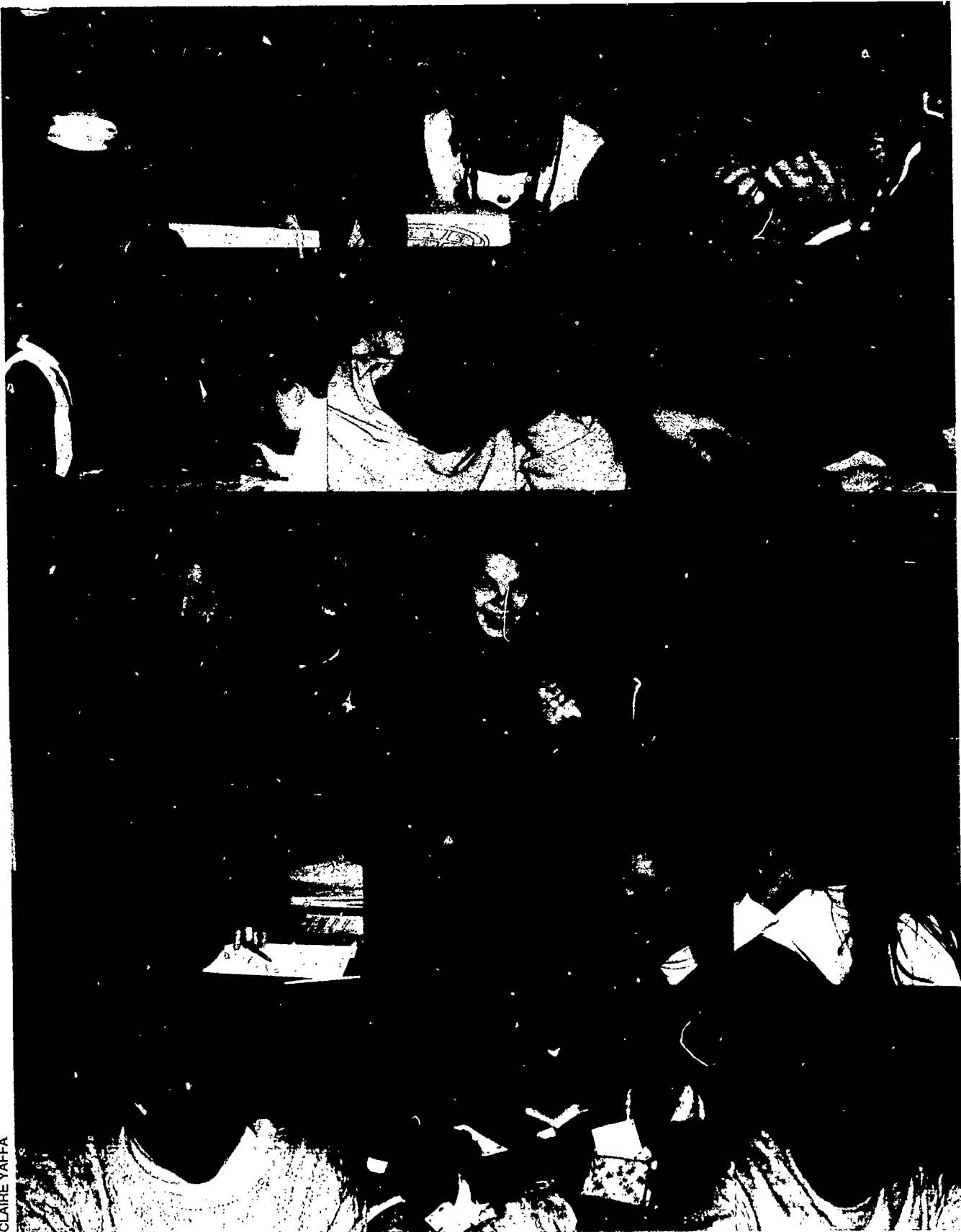
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Socialization and Learning Disabilities



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Bridging the Gap: Life Skills Materials and Teaching

by *Ellen Dietz*

There is a wealth of information — textbooks, workbooks, videos, and more — developed for people with learning disabilities. Much of this material has been developed outside the field of education, in such arenas as health care and social work. For whatever the reasons, there is a communication gap between these service providers and special education teachers. This gap distances special education teachers from the materials their students can use.

More Than the Name Implies

One case in point is drug education material. A thorough drug education curriculum includes far more than biological drug facts, by teaching life skills such as stress management, decision-making, self-esteem building, and skills in communication and assertiveness. Drug education activities can be used to supplement or lead other classroom learning activities.

The concept behind preventing alcohol and other drug involvement is to enable people to respond to stressors that can have negative consequences. This ability to have a positive response in a negative circumstance is especially important for persons with disabilities, since they are pressured by more stressors than non-disabled persons. It has been documented that people with “invisible handicaps,” such as learning disabilities, are at high risk for developing substance abuse problems and a variety of other social and personal difficulties because of, among other things, the stresses created by the disability. Research is beginning to show that prevention programs which

provide information and socialization skills for persons with disabilities increase their resistance to substance abuse and the broader problems they face.

Project Oz and “A Special Message”

“A Special Message” was the nation’s first drug education curriculum for students with learning disabilities or behavior disorders; its creation freed teachers from time-consuming research in a rapidly developing field of study and illustrated how prevention skills carry over into general life skills development. “A Special Message” was revolutionary in that it was designed by special educators and drug educators to address issues in a relevant, non-condescending manner.

Through our work in drug education over the past 20 years, at Project Oz we are aware of the communication gap between the fields of special education and drug prevention, and have been working to bridge this gap through training programs, and through presentations and exhibits at special education conferences nationwide. Ms. Chris Carlton, the Director of Drug Education for the past 20 years says, “We consistently find the misconception that drug education is unsuitable for young learners. Collectively, educators are beginning to realize that material designed for young learners is not only appropriate classroom material, but is essential for building healthy habits and strong self-perceptions at an early age.”

Project Oz staff have been teaching drug education in schools since 1976 and released a K-12 curriculum in 1981. Following its success, educators requested a similar program

for students in special education classes, and the program, "A Special Message", was released in 1988. Since then we have developed two drug education videos for students with mental disabilities. Each year, we help plan and execute drug prevention programming in school districts which includes classroom teaching, parent education classes, teacher training courses, and community-based fairs and special events. Much of our effort is spent training special education teachers strategies of teaching life styles to their students.

Teacher Training Course

The best way to get drug prevention education to students with disabilities is to train their teachers how to use the material effectively. Project Oz, supported by the National Center for Learning Disabilities Replication Initiative, launched a project that would enable educators from across Ohio and Pennsylvania to practice the learning activities and learn the concepts contained in "A Special Message" in a training course held in November 1992. The teachers then took the curriculum back to their classrooms and began teaching drug education in their spring 1993 class schedule.

Each of our training courses, including the NCLD-sponsored course, uses several different methods to train teachers. We believe very strongly in hands-on learning, and use this approach in the curriculum and in our training courses. A significant portion of every course is devoted to using learning activities which are taken directly from the curriculum. This way, teachers gain insight about completing activities from a student perspective and also see how the activities work in a group setting. We supplement this with lecture and visual material and discussion.

Agenda items in the NCLD course dealt with implementation issues, drug facts (including the drugs commonly taken by persons with disabilities and how these react with other drugs), how to involve parents in their child's education, fetal alcohol syndrome, helping children of alcoholics, understanding and living



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with disabilities, peer pressure and assertiveness skills, communication skills, and improving self-esteem.

Implementation

After completing training, participants were given the choice of implementing drug education as a stand-alone unit of instruction, or incorporating it into the curriculum. The majority chose to incorporate it, which is the best way to teach drug education, especially life skills. Incorporation has several distinct benefits. Most students, including those with disabilities, learn most effectively when they are able to use material in examples or activities. This material is reinforced when students use it more than once, and in more than one subject area, such as happens when material is incorporated into the curriculum. Another reason that teachers may have used the incorporation method is that it is difficult to add another unit of instruction to an already crowded class schedule.

The drug categories taught by most of the teachers were tobacco, alcohol, marijuana, inhalants, and over-the-counter drugs. Research shows that these drugs are used more frequently by adolescents than other drugs, such as hallucinogens. The high rate of alcohol education in participating classes is very encouraging, since students with disabilities are very susceptible to experimenting with alcohol, and are more likely (according to research) to develop alcohol problems than their non-disabled peers.

It is encouraging that nearly half of all the participants planned to include amphetamines and barbiturates in their drug education units, since these are also widely available and potentially quite harmful, but are not given the media attention that other drugs receive. Inhalant education was included, because inhalants have gained significant popularity in the past two to three years, and are especially dangerous.

Among the life skills most frequently taught were communication, assertiveness, self-concept, and peer pressure. This pattern shows that teachers were most concerned about getting their students to identify and build upon their strengths, while decreasing the degree of influence that other people have over them. The emphasis on teaching communication skills is encouraging because communication is the basis for our relationships with our friends, peers, teachers, and parents. All of these topics intertwine, encouraging students to take charge of their rights and opinions, and to let other people know what they think and feel. These steps are integral to forming a healthy attitude toward their abilities, rather than feeling controlled by their disabilities.

Another topic frequently taught by teachers was the unit on Children of Alcoholics. Most teachers are unaware of the magnitude of the nation's alcohol problem, and are unaware of how many of their students may be affected by a family member's drinking problem. The odds are likely that about 30% of the students are children of alcoholics. By teaching students some of the reasons for alcoholic parents' behaviors and exploring the boundaries of adult/child responsibilities, teachers inspire their students to take charge of their lives rather than being controlled by the behaviors of an alcoholic parent.

Where to Go From Here

Due in part to communication gaps, teachers are still unaware of many specialized materials they can put to immediate use. Due to fragmented communication routes, material creators and material users do not easily find each other. Many materials have been produced by the not-for-profit sector, which does not have the luxury of professional advertising campaigns, but must rely on small-scale marketing and community service media

attention. Teachers, parents, and school resource developers should be aware of this and include non-traditional sources in their search for information, especially since the fields of drug prevention and special education are relatively unfamiliar with each other.

Research has shown that the concepts and skills taught in drug education programs directly address stressors faced by students with learning disabilities. By participating in training courses, teachers can explore how drug prevention skills relate to and supplement socialization skills taught in special education classes. Educators should not be intimidated by the label "drug education" and excuse it as unnecessary, but look deeper into the life skills training which drug education has to offer and apply these lessons to broader aspects of socialization.

As we open the communication routes for providing resources for people with disabilities, we must include professional associations, the not-for-profit sector, education associations, and parent advocacy groups along with schools and their associated organizations. When looking for educational material, look not only to the accepted sources, but consider non-traditional sources, as well. We have nothing to lose in broadening our search and our range of experience, and our students receive the benefits. Let's work together to bridge the communication gaps.

Editor's Note: Ellen Dietz, M.S., has coordinated publicity and has written many successful grant proposals for Project Oz, located in Bloomington, Illinois, over the past three years. She is a successful freelance writer, and has attended writer's workshops at the University of Iowa and Leelanau, Michigan.

Ms. Chris Carlton, C.R.A.D.C., Director of Drug Education and Youth Outreach at Project Oz, a youth services agency, holds an M.S. from Illinois State University. A founder of the agency, Ms. Carlton has 21 years in the prevention field. She has coauthored a number of curricula and programs in the drug education field.

Social Skills: The Bottom Line for Adult LD Success

by Marnell L. Hayes

Learning disabilities are school-related problems, closely tied to the old "3 R's"—Reading, 'Riting, and 'Rithmetic"—yet the byword with parents often seems to be "social skills—that's the bottom line!" Indeed, adults with learning disabilities find, too, that their successes or failures in their personal lives or jobs are often more affected by their social skills than by their academic learning.

Adults with learning disabilities who are beginning to share their successes (and their failures) in life have indicated repeatedly that many of the problems they have had are related to social skills generally taken for granted by others without learning problems. They have had to learn these skills, often completely on their own, after very painful social and vocational experiences of failure.

These areas of learning are usually considered to be chiefly social, because although they are not exclusively so, all of them have certain social implications. All seem to be related either to the learning disabilities of the individual, or to some of the characteristics of Attention Deficit Hyperactivity Disorder (ADHD), a frequent accompanying problem.

In most of the literature, the focus is on the deficit side of these problems as they affect children's relationships and self-esteem as children, rather than on the positive learning which might help children and adults with learning disabilities avoid the social and vocational penalties they might otherwise suffer.

Social Skills Deficits

Social skills deficits may be related to impulsivity, both verbal and motor, poor visual perception of facial and body language cues, poor auditory perception of vocal cues, invasion of the personal space of others, inappro-

priate touching, untidiness, disorganization, and a number of other such problems. Mood swings, overreaction, and depression may also provide problems for the individual with learning disabilities.

For example, Roger is a brilliant designer. Some of his learning disability and ADHD problems were overlooked because society generally is more tolerant of quirky behavior in creative artists. But Roger often failed to get important contracts in projects for which his talent and creativity seemed to make him a clear choice. It seems that among Roger's LD-ADHD related problems was great difficulty in reading social signals and body language. He was unable to interpret the signals given in an interview or during a design presentation which signaled that the interview was over, and that he should thank the interviewer for his time and leave. In other words, Roger overstayed his welcome and often talked himself out of a job.

Importance of Early Intervention

Parents and teachers can help children with learning disabilities learn to deal with some of the common problems they experience in such a way that these problems do not hit home in adulthood for the first time. Early intervention can help teach the skills other children learn almost automatically, and provide plenty of practice in developing strategies which will help in ensuring greater social acceptance in childhood and adolescence as well as greater social and vocational competence in adulthood.

Strategies for Early Intervention at Home

Some of the most useful techniques, ideal for parents to use on a day-to-day basis, combine self-talk, role-playing, and reinforcement.

Self-talk is simply describing your own techniques for dealing with particular situations so that the learning disabled child becomes aware of what the parent is doing, and why.

- *Self-Talk*

For example, a parent might say, "Since I know that I want to look nice when I go out, I'm going to go look in the mirror and see if I look all right. Oops! I think I need to comb my hair before I go."

Certainly, most adults would take a quick glance in the mirror before going out. Few, however, would make a point of describing to a child what is happening, or why. This is exactly the sort of behavior the child with a learning disability might not notice, but the non-LD child would pick up without instruction.

- *Reinforcement*

Parents might lead the child with learning disabilities to perform the same action, and then reinforce (praise or reward) good observation. "Let's see what you might need to do before we go to grandmother's. Oh, your shirt is dirty? Good for you for noticing! Let's get a clean one on."

- *Role-Playing*

Role-playing can be useful in helping children learn many of the social conventions with which learning disabled adults have difficulty, but which most non-LD children learn easily through simple exposure. For example, parents might play "What is the thing to do if" or "What is the thing to say if" as a good car trip game or even a dinner table game. "What is the thing to do if you are at your friend's to play, and her mother says 'My, it's getting late. It will be time for supper soon?'"

"What is the thing to say if someone calls and you answer the telephone while Mother and Daddy are having an argument?"

In role-playing, parent and child might take turns in the roles. Part of the time, the child should make up the situation, and the parent

should play the role of the child giving the answer. This gives the child the opportunity to think of social situations which require good social skills, and lets the parent model appropriate responses without "preaching."

Types of Social Skills Affecting Adult LD Success

Some of the common adult problems related to learning disability or ADHD which may cause social or vocational difficulties are listed below, along with early intervention strategies which parents and teachers may find helpful.

- *Perception of Facial Expression and Vocal Cues*

Adults with visual perception problems often miss the messages that people send and receive through facial expression. Such common expressions as a frown, narrowed eyes, or pursed lips, which might signal that what is being heard is inappropriate in some way, are often missed. Parents and teachers can help by using role-playing often, or by simply asking for feedback in day-to-day situations: "David, what do you think my face is saying to you? Do I look like I am pleased about what you are doing, or not?"

Difficulty with auditory perception more often results in problems in interpreting vocal tone. Practice with the child in noticing and responding to such vocal cues as rising volume, sounds of exasperation and anger, or tones of impatience or boredom.

- *Language and Social Conventions*

A common problem for some learning disabled adults is not recognizing the language conventions people use daily. Perhaps the most common is the recitation of physical woes which may follow the innocuous "Hi, there, how are you?" or "How's it going?" Lots of practice with such common expressions, including what the expected reply might be, can be helpful.

- *Vocal Monitoring*

Knowing just how loudly one is speaking, and how closely that loudness level approaches the right level for a particular situation, is difficult for some adults and children with learning disabilities. Parents can use particular cues, such as hand signals or cue phrases ("use your indoor voice" or "your almost-whisper voice") to help the child reach the right level. When the child is speaking appropriate level, provide praise: "That was good—you used your indoor voice the whole time at dinner tonight!"

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- *Skills in Asking for Help in Receiving Information*

Sue is a secretary with learning disabilities. Her charming "I know this message is important, so I need to write it down. Would you say your name again for me, please?" disarms even the most impatient caller to the office where she works, and gives her time to get the written messages she needs to supplement her memory problems. She had to learn by trial and error, rather than by direct instruction, how to get both the time and the repetition she needs to be the top-notch secretary she is.

Students with learning disabilities are rarely taught how to get their regular classroom teachers to give them information in a way they can best use it. The parent or special teacher can help the child learn to say, "I want to remember—can you say it again for me?" instead of "Huh?" or to say "I have to write it down—can you give me more time?" or even "I want to get a good grade—please explain the directions to me one more time."

- *Body Awareness Skills*

Poor body image and lack of awareness of the position of body parts can make adults with learning disabilities appear awkward or even provocative. Role-playing, sitting in various chairs or couches, getting out of cars, sitting or standing up, walking up or down stairs, or performing a variety of ordinary physical activities, with the parent and the child taking turns observing and practicing the moves, can be helpful. Parents with camcorders can use them while youngsters act out their own skits and then view themselves.

Mealtime behavior, too, is often difficult for adults and children who lack ease and grace. Too much tolerance of poor table manners in children can be socially crippling for the adult who must be able to manage social conversation and table manners simultaneously. One or two "table manner practice" meals a week can be ideal training time for the whole family, including the non-learning disabled siblings. Restaurant practice, with discussion of what foods are easiest to eat in public social situations can be useful as well.

- *Organizational Skills*

Not exclusively a problem of people with learning disabilities, disorganization builds upon itself to further complicate life. For the individual with learning disabilities, however, its complications are many. Disorganization leads to visual distraction, time-consuming backtracking to find things or do something that would have been easier done earlier. Well-meaning parents of learning disabled children often keep the child's environment organized, instead of helping the child learn the skills for himself or herself.

Parents or teachers can work with the child to organize things in a way that is personally helpful by having the child be a part of the process: "Where would be a good place for you to put all the things you need to take to school each morning? If you find a place that is easy for you to remember, I'll help you get things there each night before bedtime" or "How can you arrange your desk so that you have room to work, and still have all the things close that you might need?"

- *Personal Space Awareness*

Personal space, that invisibly-defined area surrounding a person which varies in extent according to culture and personality, can be invaded by a person who doesn't easily observe body language or facial cues as to how much closeness a person can tolerate. Learning disabled people who also have spacial discrimination problems may move too close or touch inappropriately, and not be aware of the other person's backing away or negative response.

Children with learning disabilities may stand too close and miss visual cues, and they may touch the other person often and inappropriately, but they may also touch or handle other objects in the environment, such as items on the teacher's desk or decorative objects in a living room. Adults with this problem often find themselves misunderstood. Men may be thought fresh or pushy, and women may be thought to be inviting physical attention they do not want if they stand too close to others or touch inappropriately. Both

men and women may be thought too forward or even threatening.

- *Mood Swings, Overreaction, and Depression*

A variety of emotional difficulties may accompany the social skills problems of children and adults with learning disabilities. While social skills training is a natural area for direct help by parents, more severe social and emotional problems can best be treated by those with special training. Parents can look to the school for help in locating school-based or community-based counseling services. Parents of adults with learning disabilities can encourage their adult children to seek assistance as well.

Conclusion

Whether or not social skills are the "bottom line" for individuals with learning disabilities, it is certainly true that children with good social skills have more opportunities for positive interactions with their peers, and enhanced ability to benefit from academic and prevocational training. For help with children's social skills deficits, parents may wish to seek the assistance of their child's teacher. Social skills training may be written into the IEP, just as other skill training might be. Helping your child learn those things he or she needs to achieve this goal can be time well spent, and seeing your child achieve success both vocationally and professionally is more than ample reward.

Editor's Note: Dr. Hayes is Professor of Special Education at Texas Woman's University. The author of several books published by Academic Therapy Publications, she is the mother of an LD child through whose learning problems her own were discovered.



“The Steelers Congratulate
NCLD For Their
Work With Children.”

The Social and Emotional Side of Learning Disabilities: Characteristics and Interventions

by James Javorsky

Yesterday was like every other day in school for Katie, a twelve-year-old child with a learning disability. As her teacher began class, Katie tried to pay attention but there were all kinds of birds flying around a tree outside the nearby window. She started to think about what it would be like to fly. She pictured herself flying out the window, soaring in the sky with the birds.

The birds surrounded her as they swooped back down toward the tree in the yard. Then Katie began to hear her name called out. She could not figure it out. Birds do not talk. "Oh no," she thought, "I recognize that voice." It was her teacher. "Katie, quit daydreaming, get your book out and read with the rest of us. Katie, quit daydreaming I said." As Katie "landed" in her chair she realized that she was really only dreaming and that she had to read with the rest of the class.

While Katie sat with the book opened on her desk, the teacher started calling on students to read aloud. Katie hoped that the teacher would not call on her because every time she had to read, everyone laughed at her. She did not read like the rest of the kids. She always went too slow and she did not understand anything. The kids always laughed when she would pronounce words differently.

Katie's "Friends" Laugh at Her

Today, the teacher did call her name. A minute after she began to read, Katie started stammering and stuttering. The teacher told

her to slow down and sound out each letter. The other students in the class began making fun of how she pronounced them. Confused and frustrated, she could not understand why she did not read like the rest of her fourth grade class. Then she ran out of the room to the bathroom where she locked herself in a stall.

Her teacher came in to talk with her but Katie would not talk. When asked if she wanted to go back, Katie felt scared and refused to return to class. She told her teacher that the other students always laugh at her. Every time she reads, they make fun of her. Her teacher tried to console her by saying she was a good reader and that the kids were just being mean.

When she returned to the room, the class was told to apologize for making fun of her. They all apologized, but Katie knew that the next time she was selected to read she would be teased again.

The rest of Katie's day was much like the morning. During recess, she played alone. At lunch she ate by herself. When she took a spelling test she missed half the words and could not find her homework for science.

Katie Feels She is Different

As her day ended, the teacher gave her an envelope which described her behavior during reading class to give her mom. While she waited outside for her mom to pick her up, she thought about how different she was from her friends. She wished she was as smart as the rest of the kids. She wanted to be able to read, understand,

kids. She wanted to be able to read, understand, and play just like everybody else, unfortunately she believed she was just too 'dumb'.

Her mom drove up and she got in the car. When her mom asked how her day was, Katie responded with a simple "fine", and gave her the envelope. Her mom frowned as she read the letter. Katie felt depressed and sad because she was a failure to her family.

Katie could be any number of children with a learning disability. This disability is at constant war with their emotions, behaviors, and school performance. Because of this emotional tug-of-war, children with LD are at risk for the development of significant emotional and behavioral disorders. Severe psychiatric disorders, such as depression, chemical dependency, and conduct disorders, have been shown to have a higher incidence for children with LD than children without LD.

Emotional and Social Aspects of Learning Disabilities

Children with LD are likely to develop negative feelings, as Katie did, about themselves and their abilities because they are exposed to failure every day.

Often these children may have problems with the following:

- Developing a positive self concept and a sense of competence and security.
- Being overly dependent upon teachers and parents.
- Establishing self confidence.
- Controlling anxiety.
- Maintaining motivation.
- Developing appropriate morals and values.
- Acting maturely.
- Trusting others.
- Tolerating frustration.
- Accepting criticism.

Coupled with these emotional problems, children with LD may also have problems socially. Because of these weaknesses, appropriate development of social skills may be delayed or



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altered. As a consequence, children with LD generally have difficulty with the following:

- Understanding and building relationships with peers.
- Relating to authority figures and adults.
- Using appropriate personal hygiene and table manners.
- Understanding humor and sarcasm.
- Knowing what to say in a situation.
- Stating their feelings and thoughts.
- Controlling impulsive comments during conversations.
- Understanding body language and facial expressions.
- Developing appropriate family relationships.
- Establishing good relationships and working appropriately with others.

Interventions for the Social and Emotional Side of Learning Disabilities

Generally, psychologists and mental health professionals are trained to assist children in understanding and dealing with their emotions and differences. Counseling is used to address moderate to mild behavioral, emotional and social difficulties of these children. Psychological intervention may include one-on-one therapy about feelings and past or present experiences children with LD have had. This

may also entail group therapy in which a group of children with learning disabilities meet to talk about problems and experiences. For example, children with LD, in group settings, may interrupt the natural flow of therapy by talking out of turn, talking too much, or not providing appropriate verbal feedback.

Through a support group, children with a learning disability may be able to gain insight and understanding of their talents, strengths, and weaknesses. In addition, a group setting may provide an environment in which the family and child may effectively address parent and child roles at home. Due to their language weaknesses, children with LD may have a difficult time talking appropriately about their feelings and emotions.

Furthermore, children with LD may have difficulties in remembering what incidents and feelings they should explore with a therapist. To complicate matters, children with LD may have problems expressing and interpreting language. Given the child's disabilities, psychological counseling may provide limited assistance in addressing the emotional and family issues which may be caused by a learning disability.

The Psychoeducational Approach

The psychoeducational approach may offer children with LD an opportunity to learn and develop appropriate social and personal skills. Programs which utilize this approach are usually designed as a class with a schedule of topics. These classes may be conducted by a special education teacher, counselor, or social worker. The following is an example of a class schedule:

- Week 1: Introductions, magic words and class rules.
- Week 2: Conversation skills.
- Week 3: Handling anger and frustration.
- Week 4: Sportsmanship and sharing skills.
- Week 5: Personal hygiene and table manners.
- Week 6: School skills; - Asking questions, asking for help.
- Week 7: School skills; - Homework and test taking.

An advantage to this approach is that it provides direct instruction and remediation of language skills through role modeling and real life experiences. By developing language skills, these children may be able to effectively and appropriately interact with peers and adults. In turn, this may enhance children's self esteem and confidence.

When educating or counseling children with LD, professionals must remember that children have a disability in the processing and usage of language. Professionals may find it necessary to review previous test reports, interview the family, and/or assess the child's performance in order to ascertain what difficulties the child has and how to best work with the child. Furthermore, the professional may need to assist the parents and child in understanding how the learning disability affects the child's communication and performance at home and school.

Therefore, it would be beneficial for parents to investigate carefully any type of treatment or intervention program they may be considering. Parents should be assured before enrolling their child that the professionals they are dealing with have a complete and thorough understanding of children with learning disabilities. A good starting point would be to ask the professionals about their background and training in dealing with children of learning disabilities.

Children with LD need encouragement to let them know they are good people and that they can succeed, even if others tell them differently. Sometimes all that is needed is a "little" positive reinforcement, a positive role model and caring teacher, to encourage the child. By working together, parents, teachers, mental health professionals, and children with LD may build a foundation of personal, social, and academic success.

EDITOR'S NOTE: James Javorsky, M.Ed., diagnosed with both dyslexia and ADD, is the Psychoeducation Coordinator at the Harold E. Fox Center, St. Joseph Mercy Hospital in Pontiac, Michigan. Among other duties he directs the P.A.S.S. Program, which is a social skills and parenting program for children with ADD.

Struggling to Survive

by Laura S. Boulton

As the number of Learning Disabled (LD) students in the regular classroom increases due to mainstreaming and inclusion, educators need to be aware of the social competency difficulties learning disabled students may experience and the lack of social acceptance many encounter during and throughout their interactions with nondisabled peers (NLD). Mainstreaming and inclusion increase the probability for social contact between LD students and their NLD peers, but this does not guarantee the interactions will be positive or lead to social competence.

Why do so many LD students experience social rejection from their peers? One reason could be that LD students have different academic and social experiences than their NLD peers and this has an impact on their interpersonal relationships. The acquisition of appropriate social skills is very important to everyday functioning, but social skills are not directly taught.

For the LD student who already has difficulty understanding and participating in social situations this ineptness may make them less inviting to interact with. The label of LD may also affect and influence peer perceptions, but placing the blame on the label is not solely justified since many LD students are less accepted by their peers prior to identification. Research has shown that inadequate social competence is a major factor contributing to the LD students lack of acceptance by NLD peers.

Social competency can be described as "a set of social skills that allows one to adapt and to respond to the expectations of society". Social competency includes: sensitivity and understanding in social relationships, development of positive and affectionate relationships, appropriate regulation for antisocial behavior, appropriate language, good perceptual and memory skills, a positive attitude toward



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school experiences and learning, personal care and maintenance, ability to initiate contact or respond cooperatively with others, and to understand and interpret social situations.

Turning Off Peers

There are characteristics that many LD students exhibit that may contribute to being less accepted by NLD peers. First, many LD students have inadequate or inappropriate social skills. For example, LD students are more likely to make competitive and negative statements, both verbally and nonverbally, that are viewed as inappropriate by their peers. LD students are often fidgety, more aggressive, disruptive, easily distracted, irresponsible, impulsive, and have shorter attention spans. LD students may also exhibit academic underachievement, poor school performance, social uninvolvedness, and have a negative attitude toward school and education.

Impulsivity on the part of many LD students causes them to make poor decisions that affect them academically and socially. For LD students school is often a place where they experience frustration and rejection. One common

characteristic that many LD students share is academic underachievement. Some have emphasized that good peer relations are associated with academic achievement as well as social development. It is felt that not all LD children have social difficulties, although as a group LD children may be more 'at risk' for social problems than their nondisabled peers. If the rejection LD students experience is not automatic, what causes them to be less accepted and more frequently rejected by their NLD peers?

Academic achievement has major impact on an LD student's acceptance, but they are not only rejected on the basis of academic difficulties. Social interaction and overt behavior seems to have the biggest impact on the acceptance or rejection of LD students by NLD peers. As a group, LD students tend to enter into interactions less frequently than their NLD peers, but they are just as interested in establishing relationships with their peers. However, the manner in which they attempt to elicit interaction is viewed as unappealing and offending by NLD peers.

Gaps in Communication

Researchers have found that LD students are viewed as more disruptive, aggressive and less cooperative by their peers. During social interactions LD students are often more difficult to communicate with. For example, many LD students tend to jump from subject to subject during a conversation and are less likely to adapt their communication to accommodate the listener. Their conversational styles tend to be more negative, competitive and self-centered. Many LD students tend not to focus on the speaker and constantly interrupt, or wait for a pause in the conversation to interject what they are thinking, often neglecting to formulate their thoughts before they speak. This often becomes frustrating for the communication partner due to the lack of reciprocity. Therefore, LD children are found to be less desirable social partners.

For LD students this gap in communication is difficult to bridge because they are often not adept at reading social cues correctly and often

respond inappropriately. Many of their difficulties center around the inappropriate comprehension of non-verbal communication with others and their inadequate expressive language. For example, LD students tend not to integrate new information with previously learned information. They tend to accept statements without questioning the validity and if a statement is ambiguous they tend not to clarify or ask for more information.

Helpful Interventions

What can be done to assist the LD student who is socially incompetent and experiences social rejection? First, the proper learning environment must be cultivated so that adjustment difficulties can be reduced or prevented. For example, incorporate social skills training into the classroom. This can be done through direct and indirect instruction. Secondly, the interventions must be relevant to the student and tailored to meet the specific needs. For example, academic remediation, impulse management, cue sensitivity, social skills training or cognitive or behavioral modification are appropriate interventions to assist LD students in skill acquisition. Finally, discover and develop the talents LD students display so that they know they are successful at something.

In closing, LD students are no less likely to attempt to interact with their peers; it is the quality of the interaction that is suspect, for their social incompetence seems to encourage the rejection and isolation they experience. Since the interpersonal difficulties that LD students experience seem most apparent in their comprehension of nonverbal language, expressive language, and affective involvement with others, these students need to be provided a context in which to learn and practice appropriate social competency skills. The social deficit skills that LD students exhibit now will continue to impact negatively on their social interactions if they are not taught or do not learn to relate properly in social situations.

Editor's Note: After a period working as a probation officer, Laura Boulton is currently working on her certification and graduate degree in special education at Wright State University, Ohio.

Thoughts for Parents



Our Children's Best Advocates: The Amazing Power of the LD Parent

by Susan Lapinski

We make such a difference. This is what I've discovered about parents of LD children, both as a journalist who has researched this topic and as the mother of Susannah, my 10 year old with Attention Deficit Disorder and learning disabilities.

Susannah's differences began showing up when she was a toddler. Bright as a button though she appeared to my husband Michael and me, she wasn't a chatterbox like her older sister. Susannah preferred humming and skipping to talking. And when it came time for bed, she couldn't sit still long enough to be read a book, so I began singing soothing songs to her instead.

This sunny restlessness continued after Susannah was accepted at a preschool for gifted children in New York City. While the other children in the class sat at tables snapping together puzzles or shaping clay, Susannah was literally running circles around them, making endless loops around the room on her long, thin legs. And in kindergarten, while the other kids zoomed through their ABC's, Susannah was the Teflon kid — none of the letters stuck in her memory, even when she got plenty of individual help in the classroom and at home.

A speech and language specialist who tested Susannah in those days said her skills were only slightly below normal, and that her problem might be developmental — in other words, that she might simply outgrow it. But then we moved to Pennsylvania, and in her new first grade in public school, Susannah's problems became more apparent. Reading came slower to her than to her classmates, and she had dif-

ficulty focusing and persisting. This time, she was given a much more comprehensive battery of tests, and the pieces of the puzzle began falling into place. We were told that Susannah had Attention Deficit Disorder (without the hyperactive component some other children have), as well as difficulty with retrieving words and recalling things in sequence.

Afterwards, I remember sitting in utter anguish through a parent-teacher conference at which we discussed Susannah's learning difficulties. The professionals in that room had a lot to tell me about Susannah, and I could have learned a lot from them. But I was too busy choking back tears to ask questions or take any meaningful notes. More than anything, I just wanted to parachute out of that room and be told that it was all a terrible mistake, that my child was like everyone else's.

Learning that a child has LD is one of the bitterest pills any parent must swallow. "Research shows that parents tend to mourn over a child's learning disability more than for any other exceptionality, even Down's syndrome and cerebral palsy," says Richard LaVoie, M.A., M.Ed., Director of the Riverview School in East Sandwich, Massachusetts, and one of the nation's leading authorities on LD issues. Why?

Because learning disabilities remain "hidden" for years. This makes the delayed verdict particularly painful. "Parents think they have a normal child on their hands, until the child hits school and the problem is identified," Mr. Lavoie explains.

But no matter how paralyzing our first feelings may be, we desperately need to get past

them, say other members of our nation's LD brain-trust. "No one else will be able to figure out your child if you can't," warns Larry Silver, MD, clinical professor of psychiatry at Georgetown University School of Medicine in Washington, D.C. "Parental support is the best antidote, indeed the most important aspect of all in helping children," adds Betty Osman, Ph.D., a psychologist and learning disabilities specialist at White Plains Hospital Center in White Plains, New York. "The greater the understanding parents have of a child's disability, the more helpful and accepting they can be."

Researching the Topic

My own understanding of my daughter's disability got a major boost when I was asked by Child Magazine to spend the summer of '92 researching and writing about it. The editors at Child knew about Susannah and wanted me, as a parent of a child with LD, to author a three-part series on mastering the challenge of learning disabilities. The series was scheduled to run in the October, November and December issues.

At first, I balked. Susannah's diagnosis was only a year old, and my pain still felt pretty fresh. But my husband, who is also a journalist, recognized the assignment as a rare opportunity to combine professional and personal goals. "You're the one to do it, Susie," he said. I quit agonizing and got to work.

Early in my research, I uncovered a major theme: the amazing power of the LD parent. According to a study on what motivates LD kids conducted by Edward Deci, Ph.D., a motivational psychologist at the University of Rochester in New York, parents are the dominant influence when the children are under the age of 12. "Parents have a particularly crucial role to play in the elementary school years," Dr. Deci says. The trick, he adds, is for us to avoid being too controlling, yet still stay involved enough to help our children accomplish things that make them feel confident.

When LD children FEEL capable, they do better in their schoolwork, Dr. Deci's research shows. "Learning disabled children who felt



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more competent did better in math and reading than those who rated themselves less competent — REGARDLESS of the student's actual abilities," he says.

I was encouraged, too, by the observations of Martha Benoff, Ph.D., a Philadelphia psychologist who works with dozens of LD families. "Children are malleable," she says, "and they can incorporate many strategies for dealing with a disability from a very young age. The earlier parents start working on the learning disability, the better the child's coping mechanisms will be over time."

Areas of Special Impact

Knowing how important we are to our children's success gives us added impetus to become what we can and should be: their best advocates in the world. But where do we start, and how can we be most useful? My research helped me to identify these three critical areas:

1. **HEEDING THE WARNING SIGNS.** The first big difference parents can make is in watching out for the symptoms of LD. In some children, there is an obvious red flag, such as the inability to speak in phrases or sentences around the age of 3. But sometimes, the clues aren't so obvious. A child might meet all the normal developmental milestones for walking and talking, yet have trouble naming her colors, or completing her schoolwork.

Since children with LD often appear bright and even uniquely talented, we may at first excuse a child's inability to name colors or the letters of the alphabet. Yet these are among the classic warning signs of LD. The National Center for Learning Disabilities has developed a wonderfully detailed and inclusive checklist of telltale symptoms. (See checklist below.) We should use this list and also share it with other families. And if we DO see two or more telltale symptoms in a child, we should keep on looking for answers, regardless of those who tell us not to worry. This includes the pediatrician who tries to brush aside our concerns by saying, "He'll outgrow it." Parents are the experts when it comes to their kids, Dr. Benoff

reminds us. "Trust your instincts," she urges, "and go forward."

Not that this is necessarily easy to do. Many of us worry about the effects on our children of being labeled "learning disabled" or "special ed." Yet labeling may be necessary, because "without the label, the school can not provide the help the child needs," Dr. Silver says. And the sooner a child is diagnosed, the sooner she starts getting the help she needs.

2. FINDING THE RIGHT TEACHING METHODS. Another major challenge is playing matchmaker between our children and right schooling. Often, this requires adjusting the child's program, and sometimes even changing schools. But how do we know when a

Common Warning Signs—A Checklist

Does the individual have difficulty with:

ORGANIZATION

- knowing time, date, year
- managing time
- completing assignments
- organizing thoughts
- locating belongings
- carrying out a plan
- making decisions
- setting priorities
- sequencing

PHYSICAL COORDINATION

- manipulating small objects
- learning self-help skills
- cutting
- drawing
- handwriting
- climbing and running
- mastering sports

SPOKEN OR WRITTEN LANGUAGE

- pronouncing words
- learning new vocabulary
- following directions
- understanding requests
- relating stories
- discriminating among sounds
- responding to questions
- understanding concepts
- reading comprehension
- spelling
- writing stories and essays

ATTENTION AND CONCENTRATION

- completing a task
- acting before thinking
- poor organization
- waiting
- restlessness
- daydreaming
- distractibility

MEMORY

- remembering directions
- learning math facts
- learning new procedures
- learning the alphabet
- identifying letters
- remembering names
- remembering events
- spelling
- studying for tests

SOCIAL BEHAVIOR

- making and keeping friends
- social judgement
- impulsive behavior
- frustration tolerance
- sportsman's ip
- accepting changes in routine
- interpreting nonverbal cues
- working cooperatively

From: *We Can Learn: Understanding and Helping Children with Learning Disabilities*, National Center for Learning Disabilities, 1991

school or school program isn't working? "To know if a school is working, you have to listen to - and watch - your child," says Sally L. Smith, M.A., founder and director of the Lab School of Washington, which has pioneered teaching methods for these children. "Some kids complain. Other's don't."

Besides staying attuned to how our kids are feeling about school, we also need to be aware of the best teaching methods for them. "These children don't do well using workbooks, ditto sheets, timed tests," says Annabelle Most Markoff, Ph.D., Director of a resource center for parents of children with learning disabilities in San Mateo, California. Conventional methods like these focus on what the child can NOT do, Dr. Markoff explains, so that her feelings about school and self can be badly shaken.

Schools and programs specifically for the LD child, on the other hand, take a much more concrete "hands-on" approach to learning. An example is Stratford Friends (for children who learn differently) in Havertown, Pennsylvania, the school my husband and I chose for Susannah. A Quaker school with one teacher for every five students, Stratford employs multisensory methods as part of every lesson.

When children look at and recite letters of the alphabet, they also write them in the air with big, swooping arm movements. To get practice adding and subtracting, Susannah's math teacher set up a candy store with pretend candy and taught the children how to make change with real coins and a real cash register. And to learn the months of the year — a daunting task for kids who often have trouble recalling things in sequence — the class sang out "January, February, March, April, May" to a catchy little tune that made remembering them so much easier. These sorts of direct experiences, as well as repetition in practicing them, helped my daughter organize her thinking and learn the material much more readily.

Our school decisions are often fraught with painful indecision — whether to go public, private or residential; and if the child is in the public school, whether to opt for an inclusive or a separate classroom. But at least there are

many more options for us than there were 20, or even 10 years ago. And once we've made our choice, and the choice works, the whole family can celebrate.

Our daughter's first year at Stratford was an exultant year. Susannah was obviously very comfortable sharing a classroom with children who were fighting the same dragons as she. And after she began taking a stimulant medication to help her focus her attention, she made tremendous strides in her classroom work. She not only read fluently, but could pluck out the main idea from what she read. She not only did math problems, but gloried in getting them right. We had renewed confidence that our daughter was going to make it — and that we were going to make it too.

3. CREATING THE BEST HOME ENVIRONMENT. But just as important as finding the right school is helping our children feel good about themselves at home. The experts I interviewed stressed the importance of a structured, predictable home environment. "No surprises, no curveballs," says Mr. Lavoie. Rules about regular bedtimes and mealtimes need to be explained and outlined clearly. Family meetings can be helpful. And expecting cooperation from the LD child, as well as her nondisabled siblings, is vital. "A double standard sends a nonverbal message that you, too, think that the LD child is inadequate," Dr. Silver explains.

Involving the child in household chores often means more parent involvement — showing him, step by step, how to make his bed or set the table. But we should consider this time well spent, since all children gain a great deal of self-esteem from accomplishing things on their own and siblings won't feel as resentful if the child is treated like them.

Homework, too, might require more parent involvement. "When the child breaks a pencil in frustration, you can say, 'I know this is tough for you; I still love you, but now it's time to go back to work. How can I help you?'" Dr. Silver suggests. We should never do the homework for the child, however. "When your child is working on something he's not enjoying, you can say something like, 'How about if you work

on this for another half hour and then come back to it later?" Dr. Deci adds. Helping structure homework for our kids is fine, as long as we involve them in solving their own problems.

Sherry Farmer, M.C.A.T., a family therapist who grew up with learning disabilities herself and is now school counselor at Stratford Friends, recommends another home strategy, called special attention time. This is the time that parents purposely choose and plan to be with the child — not just an interval when they happen to be home alone together.

Another important aspect of special attention time is that the parent leaves it up to the child to decide what they do—or don't do—during their time together. "The child is the leader, the boss, she's a success even if she's unable to come up with a plan," Farmer explains. "It's time when parents do not impose their ideas and when kids do not have to be productive."

Kids often do have their own ideas about how to spend the time, however. One dad I interviewed said he and his 8-year-old son, Peter, spent special attention time together once or twice a week. "Sometimes we take a hike," this dad says, "and once we went to a baseball game. Just the other day we ran around the track at the school across the street. I leave it up to Peter, and he usually has a lot of ideas. It's good for both of us."

Kids need to feel that parents are doing special attention time because they enjoy it, and not just for the child's sake, Farmer notes. "When children know they don't have to perform, and yet they're getting attention from



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people they love, they're more willing to pour in energy at school and at home."

Ah, yes — parent power in action. We have it. We can use it. And what a difference we can make in the way our children take charge of their lives and face the future. As Dr. Silver observes, "It's critical that these children become their own advocates. But they can only do it if we help."

Editor's Note: Susan Lapinski is a senior editor of Child Magazine. Her series, "Learning Disabilities: Mastering the Challenge," won first prize for National Education Reporting from the Education Writers Association; a distinguished achievement award from the Education Press Association; and was a finalist in last year's National Magazine Awards competition. It also won an EDI Award from the National Easter Seal Society for furthering public understanding of disability issues. She and her family live in Swarthmore, Pennsylvania.



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The Learning Disabled Child and the Home

by Cheryl G. Tuttle and Penny Paquette

Parents of children with learning disabilities are tired. In addition to the normal stresses of family life, they are continually working on their child's behalf. They mediate, advocate, intervene, referee, preplan, negotiate, and adapt until they are exhausted. In the meantime, they provide emotional support for their learning disabled child, while trying to balance the attention given him with the attention given the other members of the family. No wonder they are worn out.

Activities that cause normal stress in most homes cause an extraordinary level of stress in homes of children with learning disabilities. Homework is a stressful issue in most families, but when your child is learning disabled, the simplest assignment can become a nightmare. Most children with learning disabilities work extra hard in school just to keep up with their classmates. Then, when they get home, teachers expect them to sit down with their parents to work some more. They are already tired, and their parents are tired, too.

Organization and structure can help. A specific time and place should be set aside for homework assignments, and let your child know you are going to stick to the plan. Sometimes your child's best time for doing assignments is not your best time to work with him. Whenever possible, work during your child's best time. If he is less frustrated, it is likely you will be less frustrated as well.

Tools can be especially helpful for children with a learning disability. A typewriter or word processor can end the constant frustration of a child who has trouble with his penmanship. A word processor with a spell checker can make life a lot more pleasant for a child with spelling disabilities. A calculator can be a source of joy to a child with math problems.

Assign your child a place to keep his school-related materials — his books, his homework, school notices, lunch money, supplies, etc. Mornings will run more smoothly if all his things are kept in one place.

Fathers Must be Responsible too

When a child has a learning disability, the entire family is affected. Mothers are often the most involved in the day-to-day issues. They are usually the ones who meet with the teachers, drive to the doctors, and consult with the specialists. Most often it is mothers who listen when the child is hurt, who intervene when there are social problems, and who act as referees among the other family members.

It might be difficult for fathers to acknowledge their child has a problem because many children have two behavior patterns — one for when his mother is around, and another for when his father is there. Lots of times children are really horrendous to the parent who is with them all day. Dads tend to see them for much shorter periods of time.

When fathers become directly involved in the process, they get a better understanding of the issues involved in educating a child with special needs.

Try to schedule team meetings at times when both parents can attend. When both parents attend meetings, there are four ears instead of two absorbing all the information the team has to offer. Make sure fathers are involved whenever the child sees a specialist. When he can't be there, be sure he has a chance to see copies of all reports. When families face these issues together, parents can offer each other comfort and support. Everyone ends up feeling better about the possibilities for success.

Fathers should be encouraged to attend parent support group meetings. Support group organizers would do well to address the needs of the fathers by holding special fathers' evenings or inviting speakers to address issues of particular interest to dads.

The Needs of the Siblings Must be Considered

It is also difficult for the brother or sister of the child with the learning disability. They just don't understand why parents have to spend so much time with one child. Often they are jealous.

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Occasionally they are embarrassed. Sometimes they must explain to friends why their brother or sister has such a hard time learning. Sometimes they are frightened it could happen to them.

Most of these emotions find their way out — usually in negative ways. The name calling, fighting, and tattling, common in most homes, gets magnified in the homes of learning disabled children. There are only 24 hours in a day, and many times the learning disabled child consumes most of them.

Sometimes brothers and sisters who do not have learning disabilities find they have to spend much of their time helping a sibling with a learning disability. Occasionally a child can lose his own childhood caring for another.

Parents can help alleviate some of these difficulties by carefully explaining the difficulties to all the children. You are not being disloyal by telling the children their brother or sister has learning problems. It helps them understand what is happening in your home.

It's hard for siblings of a learning disabled child, but it is even harder for the child with the learning disability. Imagine struggling all day to write a report. Then, a younger brother



or sister comes home and whips off an essay on Christopher Columbus without even opening the dictionary. It can be very frustrating.

Report card days are especially unpleasant for learning disabled children. Comparisons are not unusual, and the child with a learning disability does not usually come out on top. It's easy to understand the resentment many of these children feel toward their brothers and sisters.

Don't drive yourself crazy trying to do everything for everyone. It's just not possible. When children complain you are not being fair, try to remember the true meaning of the word. Fair is when everyone gets what he or she needs, not necessarily what he or she wants. Learning disabled children have greater needs. It's really that simple.

The best you can do is to encourage your children to be open and honest about how they feel. When those feelings are suppressed, they often escape in anger. If your learning disabled child sees a counselor or therapist, be sure to include your other children in some of those meetings.

Brothers and sisters aren't the only ones to react in a family with a learning disabled child. Though grandparents can be most supportive of young children, when learning disabilities are involved they frequently do not

understand the problems enough to be of help. They do not always have enough information and do not understand. Sometimes, they actually make matters worse.

Grandparents often believe grandchildren should be raised the way their children were raised. They don't understand learning disabilities, especially the behavior problems often associated with ADD, and they can be very critical.

It might be helpful to include a grandparent in team meetings. This is especially helpful if grandparents are frequently caregivers or baby-sitters. Team meetings will help them understand the complexity of a learning disability and help them understand some of the issues you face each day.

Just as your child has exceptional learning needs, you will find you have exceptional obligations when it comes to disciplining.

Whatever problems you have with regular kids, they are compounded with learning disabled children. Learning disabled children need structure, structure, structure. They need to know not just what the rules are, but how to follow them as well. Don't just tell them what not to do. Tell them and show them how you want them to behave.

Hold your Ground

Once you have established your expectations, discipline must be highly organized. You have to hold your ground.

Flexibility and compromise are not sensible approaches when dealing with learning disabled children.

Spend some time focusing on what goes well. So often we get consumed by all the things that need to be corrected and forget to stop and congratulate ourselves or our children when we do something especially well. If you make an effort to catch your child doing something well, you may not need to do so much disciplining.

Many children with learning disabilities need extra time to follow directions. They sometimes get angry when they are expected to respond immediately. Don't expect them to

jump the moment you ask them to clean up or get ready.

Children with learning disabilities are usually not very good at planning ahead. You can help them by giving them ample warning when you want them to do something.

Organization helps everyone involved with the special education process. Children with learning disabilities function best when their lives are structured and their parents' responses are predictable. Family members respond most positively when they understand the effects of learning disabilities and can anticipate the learning disabled child's reactions and behaviors. A structured, cooperative environment can make home a safe, nurturing, and non-competitive place for a learning disabled child and that environment can have a positive effect on the entire family.

*EDITOR'S NOTE: This article is a condensation of a chapter in *Parenting a Child with a Learning Disability*, Lowell House. It may be obtained for \$21.95 from Lowell House, 2029 Century Park East, Suite 3290, Dept V., Los Angeles, CA 90067; (310)552-7555, Ext 112. The publisher will cover postage and handling costs. California residents add 8.25% sales tax.*

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School Programs



Education Beyond Classroom Walls: The Newgrange Community Outreach Center

by Kate O'Neill

Editor's Note: A heartening development throughout private sector schools and institutes is the effort to share their expertise and service with the broader community. This article describes one of them.

In September, 1991, The Newgrange Community Outreach Center opened in Princeton, New Jersey, to serve the area's learning disabled population. Through a wide range of programs, including consultations, training workshops and referrals, the Center extends the work and the vision of The Newgrange School, which was established 16 years ago to serve the specific needs of children with learning disabilities.

The Newgrange School was founded by Lois Young and Francesca Benson, two Princeton learning consultants experienced in the field of reading and learning disabilities. The School, an independent day school, provides a full curriculum with specialized instruction for students ages 8 - 18 who have good intellectual potential but who have not been academically successful. It is approved by the New Jersey Department of Education and is eligible, therefore, to receive tuition funding for students placed by Child Study Teams.

A 1:3 teacher-student ratio, combined with the staff's high level of training in specialized educational techniques, individualized diagnosis and teaching, allows teachers to meet each student's needs. These needs stem from specific skill weaknesses or learning disabilities. Dr. Lew Gantwerk, Director of the Center for Applied Psychology, Rutgers University believes, "...the professionalism and dedication

to children shown by the Newgrange staff and administration are at the top of any school that I've seen in this country. I think that contributes to its being such a wonderful place for these children to learn." Parents who witness their children's progress are also among the School's strong proponents. One father, commenting on his son's Newgrange education, says, "It is gratifying to see our son make use of his native intelligence, studying math, science and social studies while getting the special attention he needs in reading and writing."

"Sixteen years ago, when we opened the School," says Executive Director Young, "we concentrated on teaching young children with learning disabilities. But the School grew and our agenda expanded. As part of our educational program, we have always done outreach, presenting workshops for our parents and teachers as well as others interested in learning disabilities. From the start, our program always 'reached out,' drawing people from far beyond the Newgrange walls."

The Center Broadens its Scope

Opening The Newgrange Community Outreach Center was a logical next step. The School could no longer adequately assist the hundreds of people who called seeking informed guidance, advocacy and support.

The Center, located in Princeton, has grown rapidly in its three years of operation. This year, its Outreach program will educate, support or otherwise assist over a thousand people affected by learning disabilities. The program is divided between work done at the Center and events which Newgrange either sponsors or co-

sponsors at other locations. On-site, the Outreach office and library can serve individuals and small groups. Larger conferences and workshops meet either at The Newgrange School, located in Trenton or at other facilities in the community.

Parent groups, open house programs, and a motivational club for reluctant young readers meet regularly at the Center. A multi-media library on learning disabilities is available as well. Individual adult literacy consultations and support for literacy volunteers also take place at the Princeton Public Library or at other area libraries. Literacy tutors frequently call on the Center's staff for help, especially when learning disabilities appear to be at the root of reading difficulties.

The Outreach Program Director is a specialist in learning disabilities and reading. Her career has focused on adult education, particularly adult literacy. She heads Newgrange's pilot screening program, consults on literacy and visits interested businesses and organizations to educate the community about learning disabilities.

Callers to the Center are helped to connect with appropriate resource people. This fall, Newgrange published a new reference guide for central New Jersey, listing qualified professionals and organizations specializing in the field of learning disabilities. Packets tailored to the specific requests of callers are mailed out. The Center maintains a library of materials on post-secondary options for young people with learning disabilities, and a staff specialist in transition issues is available to advise students and parents. She remains current on the colleges and universities which offer academic and social accommodation to LD students and the schools which offer appropriate vocational training.

As The Newgrange Community Outreach Center grows, its staff assesses the outcomes of its work, adding and reworking programs. This year, workshops offering training for educators predominate, with events set for experienced teachers and teachers-in-training, as well as administrators and counselors. These workshops take place at the Newgrange School and

are led by nationally noted specialists and Newgrange staff members.

"The Learning Environment"

The Newgrange Community Outreach Center's opening program this fall, "The Learning Environment," was a forum for teachers from the central New Jersey area. Drawing on techniques developed at The Newgrange School to help teachers and students succeed in an individualized educational environment, mainstream and special education teachers learned to work side by side in a diverse classroom. The educational trend toward the inclusive classroom demands that teachers develop new attitudes and additional skills to meet this challenge.

Outreach programs are often a collaborative effort with libraries, community centers and businesses. Over 200 students, parents and educators attended Newgrange's third annual "Life After High School" program, held at the Educational Testing Service in Princeton. Parents note that specialized post-secondary information for students with learning disabilities is hard to find. Each year this all-day event finds new participants seeking a comprehensive look at post-secondary choices for LD students in a concentrated, "college fair" format.

The Interaction Project

Many other Newgrange programs have their roots in the School. A new Outreach program, the "Interaction" project, is an example of the evolution of a classroom program into a community project. Several years ago, a curriculum teaching communication and conflict resolution skills through role play was developed. This led recently to the formation of an inter-generational community group, "Interaction," to bring these skills to wider audiences in schools, churches and senior centers in central New Jersey.

Recently, Newgrange expanded its adult and workplace literacy services. Because many adult literacy problems are rooted in learning disabilities, the Outreach staff will offer diagnostic screening for adults and will continue to give special training to teachers and volunteer tutors

who may be unfamiliar with techniques that are effective in working with LD individuals.

Other Symposia

A 1993 symposium, entitled "Learning to Achieve," was a first step in educating employers about learning disabilities in the workplace. Dr. Paul J. Gerber, Professor of Special Education at Virginia Commonwealth University, served as keynoter and discussion leader. Dr. Gerber and a roundtable of successfully employed adults with learning disabilities noted the often unconventional abilities of LD employees and stressed the benefits they bring to the workplace.

They also discussed the ease of accommodating employees with learning disabilities and the advantage to employers of capitalizing on the creativity, problem solving skills and determination of learning disabled adults. "A good fit is the key," says Dr. Gerber. "In the proper setting, armed with proper support, technology, and, sometimes with proper medication, a person with a learning disability can become a singularly valuable contributor to an employer ... and to society."

In response to requests from the "Learning to Achieve" audience, Newgrange will devote its February, 1994, symposium, "Assessment of Learning Disabilities in the Workplace," to the question of assessment. Research and training activities, including empowerment and enablement programs for people with learning disabilities, will be reported.

Like most non-profit organizations, Newgrange constantly seeks stable sources of funding. Its wide-ranging Outreach program is supported by minimal charges to participants; fees for workshops and referral services would be out of reach if they were geared to



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actual cost. The Newgrange Annual Fund and support from corporate sources help make the programs accessible to all.

"Our search for underwriting continues," says Executive Director Young. "We hope that as we become an important resource to the business community, corporate leaders will support us and direct us to new sources of funding." Newgrange is built on the belief that people with learning disabilities can find Dr. Gerber's "good fit." The Newgrange School and The Newgrange Community Outreach Center have grown successfully because the Newgrange staff knows how to empower people with learning disabilities to reach their full potential as educated and productive members of society.

Editor's Note: For further information on the resources of The Newgrange Community Outreach Center, call (609) 924-6204, Tuesday through Thursday, 9:00 a.m. - 4:00 p.m. (EST).

Essential Math

by Mary Anne Gray

The Essential Math class at Winston Preparatory School is designed to meet the needs of juniors or seniors with dyscalculia and language processing difficulties. The objective of the class is to implement National Council of Teachers of Mathematics' standards in which mathematical reasoning, problem solving, communication and connections are emphasized. Math concepts are learned through experience and then related to textbook exercises, and the focus is on problem solving through immersion in cooperative learning activities. Students are evaluated on the various aspects of the projects they participate in rather than through performance on standard-type quizzes.

The Essential Math class engages in a number of projects designed to spark student interest. The first project involves running a school supply store. The students are involved in the planning, ordering, and selling of school supplies for the entire student body. Supplies are sold during math class in the first week of school and periodically throughout the year.

Students learn to analyze sales, determine profit and loss, and maintain records. They keep journals on their activities and are graded on the way they run the business—writing receipts, calculating tax, doing inventory—rather than through the standard quiz. When students' interests and intellects are engaged, it is amazing how "invested" the students become. As a result, they grasp and retain what might otherwise be dry math concepts.

Another project is the school bank. The bank is open on a bi-weekly basis to members of the student body as well as to the faculty and office staff. In this enterprise, the students learn about the different aspects of personal banking as they deal with clients, create and reconcile bank statements, and calculate interest on savings. Again, concepts are learned through real-life experiences and coor-



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minated with textbook activities, journals are kept, and evaluation is based on performance rather than "exams."

One of the most enjoyable enterprises for students and teachers is running a restaurant. The math class learns about many aspects of the business, from creating a menu to buying and serving the food. Cooperation is encouraged to question, to try alternatives, and to make decisions. They learn that problems may have more than one solution.

We are always seeking new activities for Essential Math. The success of last year's projects suggests that the incoming class could run a laundry service for the students' gym clothes. Students are looking forward to starting a new business—and to having a fresher smelling school. After all, problem solving is a vital part of what this class is all about!

Editor's Note: Mary Anne Gray is Chair of the Mathematics Department at Winston Preparatory School, a school for children with learning disabilities in New York City.



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An NCLD Statement on Inclusion

Prepared by NCLD'S Professional Advisory Board

Inclusion: Can it Work for the Learning Disabled?

It is abundantly clear that every child deserves not only the right but the opportunity to receive the most appropriate education given their characteristics, their needs, and their potential to learn and contribute to society. This statement not only reflects common sense, but is also codified in Federal law.

While parents, teachers, policy-makers, and other educational professionals agree with the above stated theme, there exists substantial disagreement among educators and policy makers about how to achieve the provision of an appropriate education for all. Recently, major conflicts have arisen about the educational concept of *Inclusion*, and its actual benefits for children with learning disabilities.

By most recent accounts, the concept of inclusion refers to an administrative arrangement within schools and classrooms whereby all children, regardless of handicap, receive educational services within a "regular" classroom environment. Inclusion, therefore, refers to an educational concept where children receive even specialized services within the context of the general classroom.

Forces Propelling the Inclusion Model

Historically, the concept of educating children with handicaps within the regular classroom setting had its roots in the "normalization" movement of the late 1960's and early 1970's. The concept of "normalization" primarily emerged from observations that youngsters and adults with severe to moderate handicaps who were being educated in segregated institutional settings were not benefitting from their

isolation from the larger society. The logic underlying "normalization" was that individuals with limitations in cognitive and behavioral skills could clearly acquire more appropriate *Social and Behavioral Repertoires* if their education occurred in an environment where "typical" or "normal" behaviors and social interactions could be observed, modelled, taught, and reinforced. The benefits appear to accrue primarily in the social/affective domains, not necessarily the cognitive and academic domains.

During the past decade, and in particular, during the past five years, the educational establishment has promoted the concept of *Inclusion* as an alternative to traditional special education primarily on the basis of the results achieved in the social domain via the "Normalization" movement. Another important factor, though, is the perceived failure of special education for many children. Data obtained from studies relating to the efficacy of special education classrooms (i.e., resource rooms, self-contained classrooms, etc.) did not demonstrate any clear benefit of removing any child from the regular class environment. It is important to keep in mind that the lack of efficacy of special education for some children is due to factors that have not been fully explored. Consider also, that children with learning disabilities who did receive services in special education classrooms and did benefit from such services, did not continue to demonstrate gains once placed back in the regular classroom—primarily because the special educators and regular educators did not communicate with a common language about what might work and what did not work for an individual child—thus, no generalization and

maintenance of skills learned in special education classes.

It is possible also that the current move towards inclusion is driven partly by expectation of cost savings and many school systems may have seized on the idea to do that in times of budget crisis.

In adopting the concept of inclusion, enhancement of social development of children may be fostered, but it is not clear that the cognitive needs of children with learning disabilities will be addressed. Where, then, will the cost savings be? Many educators and administrators have already embraced inclusion with too little thought or planning.

Given that Inclusion, as an educational policy, will be paramount in our children's educational experience, success, and outcomes, a number of critical conditions must be in place in schools and classrooms to ensure its effectiveness.

A brief overview of some of the most critical conditions is provided below. The status of each condition in our classrooms of today is evaluated and analyzed with respect to the most current information available.

General Knowledge

Condition

1. Classroom teachers and special educators perceive that they have the skills to adapt instruction to meet the needs of children with learning disabilities in inclusive settings.

Status – Not met

Sources – Gans, 1987; Gersten & Woodward, 1992; Lyon, Vaasson, & Toomey, 1989; Shum & Vaughn, 1992.

Comments – Teachers do not feel adequately prepared in their teacher preparation programs to address individual differences in classroom settings. Teachers, however, are willing to make adaptations that do not require extensive time or preplanning. Adaptations that meet the needs of students with learning disabilities are viewed

positively if they do not detract from time spent with other students.

Condition

2. Classroom teachers and special educators are capable of communicating and collaborating with one another about individuals children's needs using a common language.

Status – Not met

Sources – Lyon, et al., 1989., Nolen, McCutcheon, & Berninger, 1992; Moats, in preparation.

Comments – The diversity that exists in the preparation of both classroom teachers and special educators results in a limited number of common vocabularies to describe learner characteristics, teaching concepts, and assessment strategies resulting in frequent misunderstanding among teaching professionals.

Student's Academic Learning

Condition

3. Data exist demonstrating that children with LD who manifest severe reading deficits can be taught effectively in an inclusion setting.

Status – Not met

Sources – Baker & Zigmond, 1990; Deno, Maruyama; Espin; & Cohen, 1990; Felton, 1993; Moats, in preparation.

Comments – Students with LD who manifest significant deficits in basic reading skills make minimal progress in reading when placed in general education classrooms. The data indicate the instruction is minimally differentiated for students with learning disabilities as they receive teaching programs and method similar to those provided good readers.

Condition

4. Data exist demonstrating that children with LD who manifest severe oral language deficits can be taught effectively in an inclusion setting.

Status – Not met

Sources -- Data not Available

Comments -- A review of 33 studies indicate that significant academic and pragmatic deficits manifested by students with LD are highly related to underlying oral language deficits that inhibit their learning (Lapadat, 1991). Students with language deficits are extremely vulnerable in school settings (Bashir & Scavuzzo, 1992) and demonstrate significant difficulties in learning to read (Tallal, 1988) and to communicate effectively in social situations (Mathinos, 1988). Despite this large body of evidence that children with LD display language deficits that exacerbate school learning difficulties, no evidence is available that indicates that such deficits can be addressed in inclusionary settings.

Condition

5. Data exist demonstrating that children with LD who manifest deficits in mathematics calculation and reasoning can be taught effectively in an inclusion setting.

Status -- Not met

Sources -- No Specific Data Available

Comments -- While substantial advances in understanding the mathematics difficulties of students with LD have been made and successful interventions identified (Bottage & Hasselbring; Carnine, 1989; Montague 1992), no formal studies have been completed that evaluate the extent to which these interventions can be effectively implemented in inclusive settings. For the most part, classroom teachers provide little differentiated instruction for students with LD (Baker & Zigmond, 1990).

Teachers' Planning and Instructional Adaptations

Condition

6. Classroom teachers routinely plan for the individual needs of students with learning disabilities.

Status -- Not met

Sources -- Schumm & Vaughn (in Press)

Comments -- A central finding from a series of studies on teacher planning within general education for students with LD indicates that classroom teachers plan for the class as a whole and not for the needs of individual students. The majority of classroom teachers report that they perceive their responsibility to be for the progress of the entire class and that meeting the needs of students who fall outside the typical academic ranges is not possible.

Condition

7. Instructional grouping procedures practiced in general education classrooms are designed to meet the individual learning needs of students with LD.

Status -- Not met

Sources -- McIntosh (in preparation)

Comments -- Few formal studies have been carried out to address this critical question. McIntosh has found that teachers' grouping practices across grade levels demonstrate a preference for large group instruction with individual or paired learning occurring infrequently.

Condition

8. General education teachers are receptive to the logistical and instructional demands of inclusive classrooms.

Status -- Not met

Sources -- Ellet, 1993; Jenkins & Pious, 1991; Semmel, Abernathy, Butera, & Lesar, 1991

Comments -- Classroom teachers are unwilling to make significant changes in their planning or instructional procedures. Teachers do indicate a willingness to make adaptations or accommodations that they "can do on their feet" without significant replanning.

Summary

The analysis of the status of critical conditions necessary for the effective implementation of Inclusion as an educational policy reveals discouraging results. Simply put, the essential elements of teacher preparation,

teaching practices, and teacher collaboration are clearly absent.

This is unfortunate. In the very best sense Inclusion seeks to provide for all children an opportunity to gain a respectful and profound knowledge of each other. It is a concept born of a desire to see children treated with equality and dignity. It epitomizes values which are worthy and consequential.

However, the ideal and the implementation are likely to be at odds with each other unless serious attention is paid to the true individual needs of all children. In the opinion of the National Center for Learning Disabilities

insufficient attention has been paid to this important issue. Enough data now exist that children with LD demonstrate a variety of unique learning needs. These needs are complex and require careful strategies in order to be effectively met. Given the present state of the art, vis-a-vis Inclusion, children with LD and their parents have good reason to be concerned.

Editor's Note: All references supporting this statement are available from the NCLD office.

NCLD Priority Statement on Teacher Training

Prepared by NCLD's Professional Advisory Board

NCLD believes that the key to the development of a positive learning environment—for all learners—is the teacher. We believe that teaching practices and principals that are good for the learning disabled student are good for all learners.

Such good principals and practices include:

- Sensitivity to and understanding of the uniqueness of each learner,
- Differentiating between behaviors that are environmentally or culturally caused and those caused by learning disabilities,
- Thorough mastery of the skills and content to be taught and of the nature of learning and the learner.

We believe that teachers can be the most significant influence in the life of a student, and that teachers therefore need to have the broadest possible training.

Successful teachers are life-long learners. They explore a variety of instructional approaches in their efforts to fit the curriculum to the child, rather than the child to the curriculum.

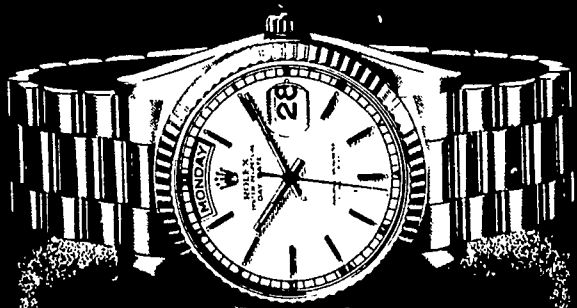
Our schools and teachers are expected to assume an ever-increasing number of responsibilities, including many previously accepted by the family and the community. We must support our teachers from whom we demand so much by providing them with opportunities to increase their knowledge and their skills in working with students, parents and colleagues responsibly and effectively.

NCLD endorses preservice and inservice teacher training which emphasizes child development, assessment of learning strengths and weaknesses, individualizing instruction to meet students' needs and sensitivity to the differences between learners.

At its highest level, the teacher-student relationship can be magical. Teachers can, and often do, change lives, inspiring their students to reach for the stars. The National Center for Learning Disabilities is committed to quality education for all, knowing that the needs of the learning disabled will be well-served when teachers are enabled to serve all students more effectively.

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Thank You, Claire Yaffa—

NCLD and THEIR WORLD are very fortunate that Claire Yaffa has contributed her remarkable talent to our organization and as photographer for THEIR WORLD. Through the years, Claire's superb skill, combined with her tremendous, heartfelt dedication, have created the perfect visual complement to the text of this publication. She beautifully captures the diversity of emotions and situations experienced by individuals with learning disabilities.

Professionally, Claire's work communicates, through photography, some of the most critical and poignant issues people confront, including children with AIDS, and abused mothers and children. A graduate of Sarah Lawrence College, Claire has exhibited there a number of times. She has done a great deal of freelance photography for *The New York Times*, *The Daily News* and *Gannett* newspapers. She has also exhibited extensively, at the International Center of Photography, a one-person show at the Hudson River Museum and at several other sites across the nation.

Claire Yaffa brings to THEIR WORLD a rare combination of skill, devotion and love, and for that we are truly grateful.

NCLD'S PROFESSIONAL ADVISORY BOARD

The Professional Advisory Board brings an unusually strong and diverse expertise to the National Center for Learning Disabilities. Coming from all disciplines, they are researchers, teachers, practitioners and advocates whose wide array of experience and understanding ensures for NCLD a comprehensive and current examination of LD issues. The Professional Advisory Board meets twice a year and during the course of the year reviews promising practices for possible replication on a national basis, with financial and technical support from NCLD.

This year a particular emphasis has been placed on the concerns about Inclusion and the potential difficulties its emerging forms in school systems are creating for many students with learning disabilities. A particular interest, also, has been the growing convergence of research findings in the learning disabilities field and the possible ways of dissemination to a wide audience. Transition issues, early childhood intervention concerns, parent education issues, and the integration of special and regular education teacher approaches, have also been important aspects of the PAB agenda this year.

Many members of the Professional Advisory Board have been actively involved in the production of and presentation for summits and meetings held in Westchester County, New York, Phoenix, Arizona, and Dallas, Texas. They will be participating in a variety of ways in a summit being planned for Washington, DC in the early fall of 1994.

The Professional Advisory Board are the eyes and ears of the National Center for Learning Disabilities, without whose enthusiasm and energy the work of NCLD could not go forward. NCLD is very grateful for the dedication and time consuming service which this esteemed group gives to the Center.



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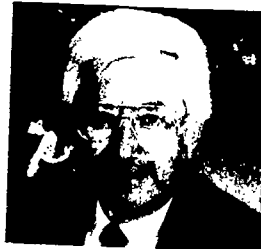
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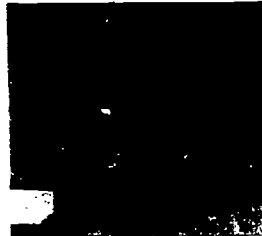
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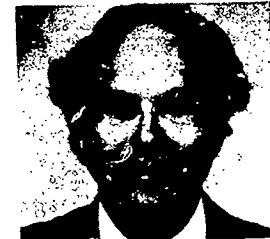
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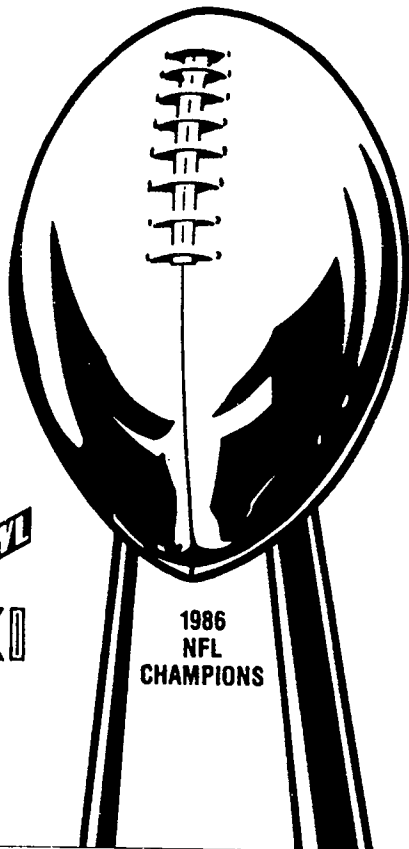
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Reid Lyon, Ph.D.
Psychologist
National Institutes of Health
NICHD-CRMC

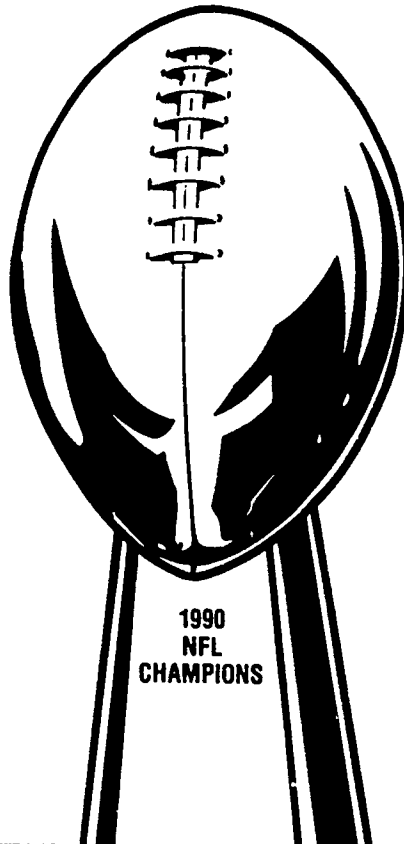




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Special Section for Service Providers

This year *Their World* has included this special section for messages from Service Providers. We will continue to do this in each upcoming issue of *Their World*.

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Director of Admission and Placement

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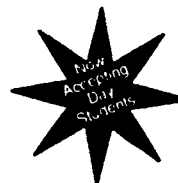
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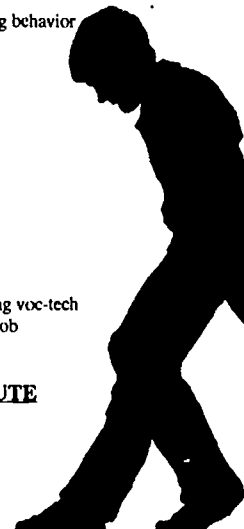
PHASE II -

- * Strategies for learning how to learn
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Delia Fleming
Director

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Telephone: (813) 676-6091

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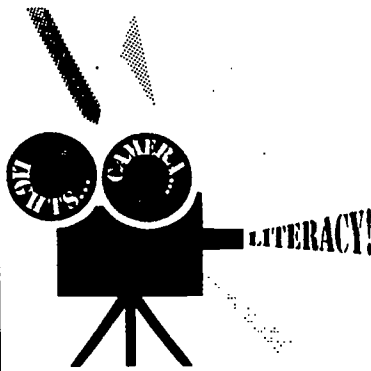
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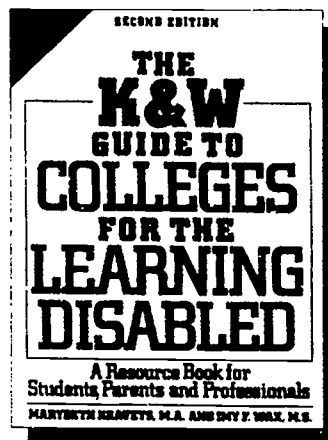
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Written for professionals, parents, and students, this completely updated and expanded edition of *The K&W Guide to Colleges for the Learning Disabled* by Marybeth Kravets, M.A. and Imy Wax, M.S., provides information on programs and services in more than 200 colleges; covers everything the student with a learning disability needs to know about admissions,

costs, learning resource centers, and more; includes advice and helpful information from students, parents and professionals; and features an additional Quick Contact Reference List with essential information about each of the colleges described in the guide as well as information on 550 additional colleges. ISBN 0-06-461048-9. Paperback, \$20.00

"...a college resource for parents, students and professionals which demonstrates a very clear understanding of the needs of those with learning disabilities who are reviewing college opportunities. It is a pleasure to recommend it."—Anne Ford, Chair, National Center for Learning Disabilities

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Betty Osman & Henriette Blinder

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THEIR WORLD MAGAZINE RESOURCE LIST 1994



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Understanding Learning Disabilities

Learning Disabilities (LD) are frequently a "hidden handicap", and the effort required to process information causes the LD person to respond differently from others in daily living situations. Early diagnosis, appropriate intervention and support can make all the difference to an LD individual. People with LD may demonstrate one or more of the following characteristics:

- difficulty with reading, writing, speech and

- mathematics;
- difficulty with perception of time and space;
- problems with concentration and attention;
- impulsive behavior; difficulty with short-term memory;
- socialization problems;
- difficulty with fine motor coordination;
- low self-esteem;
- difficulty with organization.

While not necessarily always present with learning disabilities, attention deficits are sometimes associated with them.

A Few Important Facts

- LD individuals represent an estimated 10% of the total population in the U.S.
- Individuals with LD have average or above average intelligence, and many are gifted.
- LD affects each person differently.
- LD appears to run in families and frequently more than one family

member has learning disabilities.

- LD cannot be outgrown, but can be compensated for.

Tips For Parents

No two learning disabled children are exactly alike — there can be a wide range of symptoms. The primary characteristic of a learning disability is a significant difference between overall intelligence and achievement in some areas.

School

If you recognize warning signs of LD:

- Request diagnostic assessment by the school psychologist. A diagnosis of learning disabilities entitles your child to services of Public Law 94-142.
- Request copies of the assessment and a clear explanation of your child's strengths and weaknesses. Parents are entitled to copies of all tests, including I.Q.

- Following diagnosis of LD the school must design an Individualized Education Plan (I.E.P.) for your child.
- Make sure each teacher follows the I.E.P. If you are not satisfied with your child's progress after a reasonable period, you can request an impartial hearing to amend the I.E.P.

Home

Establish a caring relationship with your child. Make sure the child and siblings understand the learning disability. Create a family support system to help your child build on strengths and find ways to move around deficits. This not only brings achievement in studies but helps self-esteem. Keep directions simple and brief—repetition is often necessary. Help your child organize daily routines and homework assignments. Encourage independence and self-motivation. Develop a sense of humor.

LD AND THE LAW

P.L. 94-142 The Education for All Handicapped Children Act of 1975

This law mandates a free appropriate public education for all children with disabilities at public expense. It ensures due process rights by requiring that the public educational

system inform parents of the procedures that can be followed to obtain such education under the law.

It mandates education in the least restrictive environment with non-disabled children when appropriate, and requires Individualized Education Programs for each child with a disability, among other things. It provides the core of federal funding for special education and attempts to assess and ensure the effectiveness of efforts to educate children with disabilities.

P.L. 98-199 The Education of the Handicapped Act Amendments of 1983

This law reauthorizes the discretionary programs and establishes services to facilitate the transition from school to work for youths with disabilities through research and demonstration projects. It provides funding for demonstration projects and research in early intervention and early childhood special education.

It also creates parent training and information centers where trained advocates can provide clarification and information for parents about education and their rights. For information about the parent resource center in your state contact:

Martha Ziegler
Federation for Children
with Special Needs

Technical Assistance for
Parents Programs
95 Berkley Street, Suite
104
Boston, MA 02116
Phone 617-482-2915

P.L. 99-372 The Handicapped Children's Protection Act of 1986

This law provides for reasonable attorneys' fees and costs to parents and guardians who prevail in administrative hearings or court when there is a dispute with a school system concerning their child's right to a free, appropriate special education and related services.

P.L. 99-457 The Education of the Handicapped Act Amendments of 1986

This law mandates services for preschoolers with disabilities and creates the Part H program to assist states in the development of a comprehensive, multidisciplinary and statewide system of early intervention services for infants and toddlers birth to age 3. It also reauthorizes the discretionary programs and expands transition programs. Contact your state Education Department for details on eligibility and services provided.

P.L. 101-476 Education of the Handicapped Act Amendments of 1990

or the Individuals with Disabilities Education Act of 1990 (IDEA)

Besides changing the name of the Education of the Handicapped Act to the Individuals with Disabilities Act (IDEA), the 1990 EHA amendments replace the term "handicapped" with the term "disabilities" and expands the general definition of children with disabilities to include children with autism and traumatic brain injury.

Other changes include: a new definition of transition services; a requirement that the Individualized Education Plan (IEP) include a statement of the required transition services and assistive technology for students; an addition of "rehabilitation counseling" and "social work services" to the definition of "related services;" and a greater emphasis on outreach to meeting the needs of children with disabilities from minority backgrounds.

P.L. 93-112 The Rehabilitation Act of 1973 (amended by P.L. 98-221 in 1983, P.L. 99-506 in 1986 and P.L. 100-630 in 1988 and P.L. 102-569 in 1992)

The purpose of this law is to develop and implement through research, training and other services a comprehensive and coordinated program of vocational and independent living for individuals with disabilities in

order to maximize their employability, independence, and integration into the workplace and the community. This law primarily serves adults and youth who are transitioning into employment settings. For more information, contact your state or local education or employment agency.

Section 504:

This law also contains Section 504 (civil rights provision) which specifies that a person with a disability has a guaranteed right to education, employment, health care, welfare, or any other public or private service in programs or activities receiving Federal assistance. Many students with disabilities (especially those with ADD/ADHD) have been denied services under special education but are now receiving accommodations in the regular classroom under Section 504.

P.L. 101-119 Individuals with Disabilities Education Act of 1991

This law amends Part H of the Education of the Handicapped Act of 1986, which previously established the early intervention program for infants and toddlers with developmental delays from birth to age three. It expands the law to allow states to also include children 3 to 5 who are experiencing developmental delays without hav-

ing to label them as having any specific disability.

It also permits funds for programs of early education for infants and toddlers who are at risk of having substantial developmental delays if early intervention services are not provided, especially to low-income, minority, rural and other underserved populations and to support statewide projects to change the delivery of early intervention and special education and related services from segregated to integrated environments.

P.L. 100-407 The Technology-Related Assistance for Individuals with Disabilities Act of 1988

Passed to help states develop comprehensive, consumer responsive programs of technology-related assistance and to extend the availability of technology to individuals with disabilities and their families, this law will help people with learning disabilities access computers and other such devices.

P.L. 101-336 The Americans with Disabilities Act of 1990

Eased on the concepts of the Rehabilitation Act of 1973, this law guarantees equal opportunity for individuals with disabilities in employment, public accommodations, trans-

portation, State and local government services and telecommunication. The ADA is the most significant federal law assuring the full civil rights of all individuals with disabilities.

This law will directly assist persons with learning disabilities by providing for "reasonable accommodations" such as job restructuring, part-time or modified work schedules, equipment modification, appropriate adjustments or modification of examination, training materials of policies and the provision of qualified readers or interpreters.

FICTION BOOKS WITH AN LD THEME FOR CHILDREN

- Aiello, Barbara & Shulman, Jeffrey. *Secrets Aren't Always For Keeps*. Chicago, Ill.: Twenty-First Century Books, 1988. (grades 3-6)
- Blue, Rose. *Me and Einstein Breaking Through the Reading Barrier*. New York: Human Sciences Press, 1979. (grades 3-6)
- Carris, Joan. *Aunt Morbelia and the Screaming Skulls*. Boston, Mass.: Little Brown & Co., 1990. (grades 4-6)
- DeClements, Barthe. *Sixth Grade Can Really Kill You*. New York: Scholastic, Inc., 1985. (grades 4-6)
- Fassler, Joan. *One Little Girl*. New York: Human Sciences Press, 1969. (grades 2-4)

Gehret, Jeanne. *Eagle Eyes: A Child's View of Attention Deficit Disorder*. Fairport, New York: Verbal Images Press, 1991. (grades 1-3)

Gehret, Jeanne. *Learning Disabilities and the Don't Give Up Kid*. Fairport, New York, Verbal Images Press, 1990. (grades 1-3)

Gilson, Jamie. *Do Bananas Chew Gum?* New York: A Minstrel Book, 1980. (grades 4-6)

Janover, Caroline. *Josh A Boy with Dyslexia*. Burlington, Vt.: Waterfront Books, 1988. (grades 2-5)

Kline, Suzy. *Herbie Jones*. New York: Puffin Books, 1985. (grades 4-6)

Kraus, Robert. *Leo The Late Bloomer*. New York: Windmill Books, 1971. (picture book for all ages)

Martin, Ann M. *Yours Turly Shirley*. New York: Scholastic, Inc., 1988. (grades 3-6)

Moss, Deborah M. *Shelly the Hyperactive Turtle*. Maryland: Woodbine House, Inc., 1989. (grades 2-5)

Shreve, Susan. *The Flunking of Joshua T. Bates*. New York: Scholastic, Inc., 1984. (grades 2-5)

Smith, Doris Buchanan. *Kelly's Creek*. New York: Harper Collins Publishing, 1975. (grades 2-5)

Wolff, Virginia Enwer. *Probably Still Nick Swanson*. New York: Scholastic, 1988. (grades 6-12)

NON-FICTION BOOKS WITH AN LD THEME FOR CHILDREN

Cummings, Rhonda, & Fisher, Gary. *The School Survival Guide for Kids with LD*. Minn.: Free Spirit Publishing, Inc., 1991. (grades 5-12)

Levine, Mel. *Keeping a Head in School*. MA, Educators Publishing Service, Inc. 1990.

Nadeau, Kathleen G. & Dixon, Ellen B. *Learning to Slow Down and Pay Attention*. Annandale, Va.: Chesapeake Psychological Service. P.C., 1991. (grades 2-6)

BOOKS FOR PARENTS AND TEACHERS

Bloom, Jill, "Help Me to Help My Child," Little, Brown and Company, 1990. A sourcebook for parents of LD children.

Brooks, Robert. *The Self-Esteem Teacher*. American Guidance Service, Circle Pines, Minnesota 55014-1796, 1991.

Dane, Elizabeth, "Painful Passages," NASW Press, 1990. For Social Workers assisting LD children.

Dias, Peggy S., "Diamonds in the Rough," Infancy to college reference guide on the LD child. Slosson Educational Publications, Inc. P.O. Box 280, East Aurora, NY 14052 Toll free phone: 1-800-828-4800

Fisher, Gary and Cummings, Rhoda, *"The Survival Guide for Kids with LD,"* Free Spirit Publishing, Inc., 1990.

Healy, Jane, *"Your Child's Growing Mind,"* Doubleday and Company, Inc., 1987. A Parents guide to learning from birth to adolescence.

Kelly, Kate and Peggy Ramundo, *"You Mean I'm Not Lazy, Stupid, or Crazy?!—A Self Help Book for Adults with Attention Deficit Disorders"* Tyrell & Jerem Press, 1993.

Lessons Learned. Written and Compiled by Dave Fuller. The Learning Disabilities Series, Mountain Books, P.O. Box 21-1104, Columbus, Ohio 43026.

Levine, Mel, *"Developmental Variation and Learning Disorders,"* Educators Publishing Services, Inc., 1987. 75 Moulton Street, Cambridge MA 02138-1104

Levine, Mel, *"Keeping A Head in School: A Student's Book about Learning Abilities and Learning Disorders,"* Educators Publishing Services, Inc. 1990.

Lipkin, Midge, *"The School Search Guide to Private Schools for Students with Learning Disabilities,"* Schoolsearch, 127 Marsh Street, Belmont, MA 02178, 1989.

Lyon, G. Reid, et al. (Eds.) *Better Understanding Learning Disabilities.* Paul

Brookes Publishing Co., Baltimore, 1993.

Osman, Betty B., *"Learning Disabilities: A Family Affair,"* Warner Books, reprinted 1989.

Osman, Betty B., in association with Henriette Blinder, *"No One to Play With,"* Random House, reprinted 1989.

Friedberg, Joan Brest, et al. *Portraying Persons With Disabilities: An Annotated Bibliography of Non-Fiction For Children and Teenagers.* R.R. Bowker, New Providence, New Jersey, 1992. (800) 521-8110.

Robertson, Debra. *Portraying Persons With Disabilities: An Annotated Bibliography of Fiction For Children and Teenagers.* R.R. Bowker, New Providence, New Jersey, 1992. (800) 521-8110.

Schwarz, Judy. *Another Door To Learning.* Crossroad, NY, 1992

Smith, Sally L., *"No Easy Answers, The Learning Disabled Child at Home and At School,"* Bantam (paperback), 1981.

Smith, Sally L., *"Succeeding Against the Odds,"* Jeremy Tarcher, Inc., St. Martins Press, 1991.

Understanding Learning Disabilities: A Parent Guide and Workbook. (1991) The Learning Disabilities Council, Inc., P.O. Box 8451, Richmond, VA 23226 804-748-5012.

Vail, Priscilla, *"About Dyslexia, Understanding the Myths,"* Modern Learning Press/Programs for Education, 1990.

Vail, Priscilla, *"Smart Kids with School Problems,"* E.P. Dutton, 1987.

Vail, Priscilla, *"Common Ground: Whole Language and Phonics Working Together,"* Modern Learning Press/Programs for Education, 1992.

Vail, Priscilla, *"Learning Styles: Food for Thought and 130 Practical Tips,"* Modern Learning Press/Programs for Education, 1992.

Weiss, Elizabeth, *"Mothers Talk about Learning Disabilities,"* Prentice Hall Press, 1989.

VIDEO AND AUDIO TAPES

We Can Learn: Understanding and Helping Children with Learning Disabilities, the exciting new video series on 1/2" VHS videotape, with its accompanying study guide, is full of good news for children with LD. Produced by the National Center for Learning Disabilities in cooperation with WNBC-TV, New York, *We Can Learn* is an important resource for parents, teachers and professionals. In language that is easy to understand, the five 8 to 10 minute segments tell you: what learning disabilities are; their impact on the individual,

family, school and community; all about the assessment process; the legal rights of children with learning disabilities; and how to get the right services for the child.

Video Series and Guide available from NCLD for \$39.95, plus \$3.95 shipping and handling.

F.A.T. CITY, by educator Rick Lavoie, is an exploration into the world of difficulties faced by children with learning disabilities. By using visual and language aids, and the language of the classroom, Mr. Lavoie conducts a class consisting of parents and teachers and shows them what it is like to feel the "Frustration, Anxiety, and Tension—F.A.T. CITY"—some children with learning disabilities face. **The Video is available for \$47.88, pre-paid, which includes shipping and handling, from CACLD, 18 Marshall St., South Norwalk, CT 06854. (203) 838-5010.**

Issues of Parenting Children with Learning Disabilities is a collection of audiotapes featuring 12 of the most popular programs from The Lab School of Washington's Lecture Services for parents and professionals. The six tapes have a lecture on each side and can be purchased as a series or individually. The tapes include:

- **No Friends, No Fun—The Social Problems of**

Learning Disabled Children by Larry B. Silver, M.D., and **Confidence in Parenting** by Milton F. Shore, Ph.D.

- **I Wish My Kid Was Normal** by Patricia O. Quinn, M.D. **Learning Disabled Children Build Character** by Sally L. Smith
- **Attention Deficit Disorder: Controversies and Treatment** by Larry B. Silver, M.D., and **Which Pre-Schoolers are at High Risk for Learning Disabilities?** by Neela M. Seldin, M.Ed and Patricia O. Quinn, M.D.

For a complete listing and more information, contact The Lab School of Washington (202) 965-6600.

ORGANIZATIONS AND RESOURCES

The National Center for Learning Disabilities (NCLD), promotes public awareness about learning disabilities. NCLD provides resources and referrals to services and schools on a national level to a wide range of parents and professionals. NCLD's legislative advocacy, publications and educational training seminars assist parents, educators, physicians, nurses, social workers, psychologists and others in this country and abroad.

Membership Information

Individuals, parents and professionals are invited to become members of NCLD. Please return the membership application in the front of this issue, or call or write for a membership application.

Annual members receive the annual magazine *Their World* and periodic newsletters, and new members receive a special information kit on LD, in addition to these items. You can also order additional copies of *Their World* magazine.

Publications/Products

Their World, published annually, is the only comprehensive publication in the field describing true life stories about ways children and adults cope with learning disabilities. *Their World* is widely used for inservice teacher training and accreditation courses for physicians, nurses, children's librarians and social workers.

Youth serving agencies, such as Girl Scouts USA, Boy Scouts and Y's, include *Their World* in training packets for volunteer and professional youth leaders. Bulk rates are available for conferences and training workshops. Call (212) 545-7510.

During 1992 NCLD officially launched the first national computerized information and referral service on learning disabilities.

The NCLD five-part video series and training package on learning disabilities, *We Can Learn: Understanding and Helping Children with Learning Disabilities*, is available for \$39.95 plus shipping and handling. Contact NCLD, 381 Park Avenue S. #1420, New York, NY 10016.

Seminars

NCLD initiates seminars each year, focused on critical LD issues and awareness raising for specific professional parent and voluntary groups. These have included: attorneys; probation, corrections and police officers; Family Court Judges; law students; schools nurses; educators; parents; employers and corporate employee assistance personnel; librarians; religious educators; corporate and foundation grantmakers.

OTHER ORGANIZATIONS

NCLD works with the following organizations to promote public awareness about learning disabilities, encourage research, legislative action, and information and referral services for families who have children or adults with learning disabilities.

American Bar Association Child Advocacy and Protection Center

1800 M. Street, N.W., Suite 2005
Washington, D.C. 20036

Howard Davidson,
Executive Director (202)
331-2250

Send for Manual for Attorneys—*Representing Learning Disabled Children* by Bogin and Goodman (\$10). Written with a grant from the NCLD.

ASHA—American Speech, Language, Hearing Association

181 Rockville Pike
Rockville, MD 20852
(800) 638-8255

C.H.A.D.D.—Children and Adults with Attention Deficit Disorders

(National)
499 N.W. 70th Avenue, #308
Plantation, Florida 33317
(305) 587-3700

The Attention Deficit Information Network, Inc. (AD-IN)

475 Hillside Avenue
Needham, MA 02194
(617) 455-9895.

Council For Exceptional Children (CEC)

1920 Association Drive
Reston, VA 22091-1589
(703) 620-3660.

Learning Disabilities Association of America (LDA)

4156 Library Road,
Pittsburgh, PA 15234, (412)
341-1515.

A membership organization of professional and parents devoted to advancing the education and well-being of children and adults with learning disabilities. Their literature inventory lists over 300 publications on learning disabilities which are purchasable through

the national office. Local and state chapters also publish materials, sponsor events and are an excellent resource in your immediate area. We recommend their free booklet, *Taking the First Step to Solving Learning Problems*. Get on the mailing list for LDA Newsbriefs.

National Council of Juvenile and Family Court Judges

P.O. Box 8978
Reno, Nevada 89507
(702) 784-6012

Send for the Bench Book on learning disabilities for juvenile and family court judges. Written with a grant from NCLD. *Juvenile and Family Court Journal: Learning Disabilities and the Juvenile Justice System*. Available from NCLD for \$6.

(N.I.C.H.Y.) National Information Center for Children and Youth With Handicaps. Academy for Educational Development
1233 20th Street, #504
Washington, D.C. 20036
(202) 416-0300

The Orton Dyslexia Society

(National)
Chester Building, Suite 382
8600 La Salle Road
Baltimore, MD 21204
(410) 296-0232

A professional and parent membership organization offering leadership in language programs, research and publications, all related to dyslexia. Their publication list consists of books, packets and reprints helpful in understanding dyslexia.

Chapters are located in most states.

PLUS, Project Literacy U.S.

4802 Fifth Avenue
Pittsburgh, PA 15213
(412) 622-1491

NCLD and PLUS cooperate to promote volunteer tutoring programs and training for volunteer trainers, which assist LD children and adults

Parents of Gifted/LD Children, Inc.

2420 Eccleston Street
Bethesda, MD 20902
(301) 986-1422

P.T.I.: Parent Training and Information Projects

Provide information, local resources, and advocacy training. To find the PTI in your state, call NCLD, or Martha Ziegler
95 Berkely Street, #104
Boston, MA 02116
(617) 482-2915

State Departments of Education

Call your State Education Department (in your state capital) and ask for the Director of Special Education

U.S. Department of Education, Office of Special Education and Rehabilitative Services

Rm. 3006, The Switzer Building
330 C Street, S.W.
Washington, DC 20202
(202) 205-5465

United Way Youth Serving Agencies

Major youth-serving agencies, such as Boy and Girl

Scouts, Boys' and Girls' Clubs, and Y's are committed to mainstreaming youth with learning disabilities into their programs. Contact local or national offices to inquire whether there is a group in your community with a volunteer leader who has received training about youth with special needs. Contact your local United Way for referrals to these agencies.

LD ADULTS

Adult Basic Education Programs

Contact the Department of Education in your state.

National Center for Learning Disabilities

(212) 545-7510

ERIC Clearinghouse On Adult Career and Continuing Education

The Ohio State University
1900 Kenny Road
Columbus, OH 43210
(800) 848-4815

HEATH Resource Center

(800) 544-3284

Job Accommodation Network

West Virginia University
P.O. Box 6080
Morgantown, WV 26506-6080
(800) 526-7234

National Network of Learning Disabled Adults

(602) 941-5112

GED Testing Service (Accommodations for LD Adults)

One Dupont Circle, N.W., #250

Washington, DC 20036
(202) 939-9490

ADA Information Hotline

The Great Lakes Disability and Business Technical Assistance Center
354 S. Broad Street
Trenton, NJ 08608
(800) 349-4232

Association on Higher Education and Disability

P.O. Box 21192
Columbus, OH 43221
(614) 488-4972

Equal Employment Opportunity Commission

1400 L. Street, NW, #200
Washington, DC 20005
(800) 669-3362

Department of Justice Office of the ADA

P.O. Box 66118
Washington, DC 20035-6118
(202) 514-0301 (voice)
(202) 514-0381 (TDD)

Vocational Rehabilitation Agencies

Contact your state's VRA.

BOOKS ON TAPES

Go to public libraries and inquire about Library of Congress services for the Blind and physically handicapped since LD resources are included under this service. Books on tapes are available free for children and adults documented as learning disabled. It is necessary to have a special tape player in order to listen to Books on Tape. For equipment, contact the National Library Services

for the Blind and Physically Handicapped 1-800-424-8567. Also:

Recordings for the Blind

The Anne T. MacDonald Center

20 Roszel Road
Princeton, NJ 08540
(609) 452-8567

Textbooks on tapes. Send for application form.

NATIONAL ASSOCIATION OF PRIVATE SCHOOLS FOR EXCEPTIONAL CHILDREN (NAPSEC)

1522 K Street NW, Suite 1032

Washington, DC 20005
202-408-3338

Provides a referral service, publications, and conferences for persons interested in private special education placements.

INDEPENDENT SCHOOL ENTRANCE EXAMINATION

For information on accommodations for LD students, contact: Educational Record Bureau, (E.R.B.), 37 Cameron Street, Wellesley, MA 02181.

COLLEGE INFORMATION

Students with documented learning disabilities and dyslexia can apply for special college entrance testing. Options include untimed tests, tests on tape, or test reading by a

counselor or LD tutor. Write to:

ACT Special Testing

ACT Test Administration
P.O. Box 168
Iowa City, IA 52243
(319) 337-1332

— or —

Scholastic Aptitude Test (SAT)

Admissions Testing Program for Handicapped Students
CN 6603
Rosedale Road
Princeton, NJ 08541
(609) 734-1280

— or —

AHEAD—Association on Higher Education (formerly AHSSPPE)

P.O. Box 21192
Columbus, OH 43221-0192
(614) 488-4972

Tests For LD Students

Educational Testing Service (ETS). E.T.S. has announced special administration of college and graduate admission tests for individuals with visual, physical, hearing or learning disabilities. The tests include: the SAT (Scholastic Aptitude Test) and GRE (Graduate Record Exam) and the GMAT (Graduate Management Admissions Test). These tests are offered in four versions: *braille, large type, cassette* and *regular type*. Additional accommodations may include a reader, amanuensis, interpreter, additional time, and frequent rest periods. For more information, call (609) 921-9000

and specify the test in which you are interested.

College Related Publications:

The K & W Guide: Colleges for the Learning Disabled, (2nd Ed.) by Marybeth Kravets and Imy F. Wax. Harper Collins Publishers, NY, 1992.

Peterson's Guide to Colleges With Programs for Learning Disabled Students. 1992. Available at bookstores or by contacting: Peterson's Guides, Dept. 5626, PO Box 2123, Princeton, NJ 08540.

Dispelling the Myths: College Students and Learning Disabilities by Katherine Garnett and Sander Porter with assistance from Hunter College. Written with a grant from NCLD. Van Dyck Printing, NY 1992. Available through NCLD.

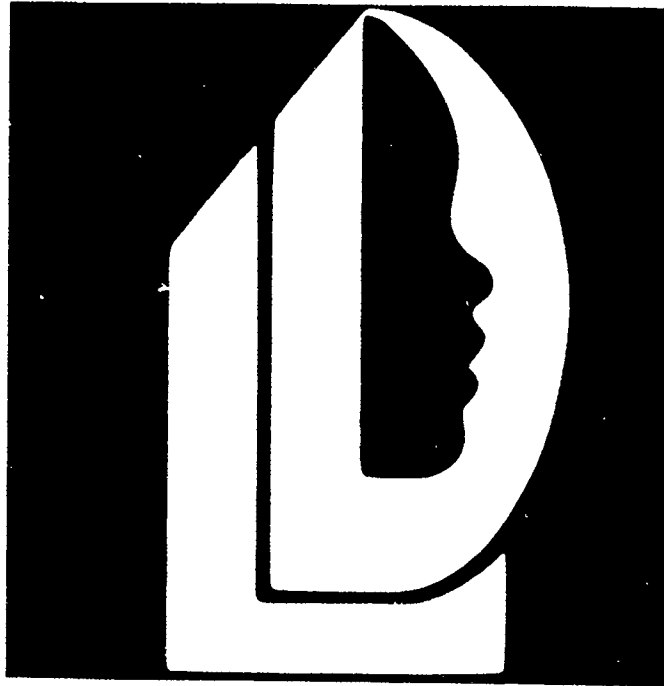
Unlocking Potential College and Other Choices for LD People by Barbara Scheiber and Jeanne Talpers, Adler and Adler Publishers, Bethesda, MD (1987).



In recognition of the
National Center
For Learning Disabilities
whose understanding,
commitment and patience
provide valuable assistance
to children with
learning disabilities.



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THE NATIONAL CENTER
FOR
LEARNING DISABILITIES

381 Park Avenue South, Suite 1420
New York, NY 10016
(212) 545-7510

*Let no children be demeaned,
or have their wonder diminished,
because of our ignorance or inactivity;*

*Let no adults be deprived of discovery,
because we lack the resources to
discover their learning differences;*

*Let neither children nor adults — ever —
doubt themselves or their minds because
we are unsure of our commitment.*