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ABSTRACT

A descriptive study examined how school districts in Texas identify students for dyslexia programs. Of the 300 districts surveyed, one-third responded with a long list of assessment instruments with no clear focus towards a definition of dyslexia, nor were notations cited accounting for discrepancies within learning achievement and other demonstrations of thinking. Districts generally said they followed the guidelines of the Texas Education Agency and used a variety of intelligence tests and achievement tests. The districts did list a number of tests to assess phonological information processed by the individual, but none were of recent publication date. In addition, visual/auditory perception, visual motor integration and listening comprehension were all important areas of assessment linked to success in language development and reading, writing, and spelling. Perhaps what is important in the end is the sense that the learner, not the label, is important. (Contains 16 references.) (RS)

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# What is Dyslexia? Is there a Test for Dyslexia?

*by Margaret H. Hill*

Daily, my phone rings with questions from adults who want **the test** for dyslexia administered to themselves or their children. The term has been used randomly across the state to address difficulties exhibited by learners in reading, writing, and spelling. However, because of the vague definition in Texas, the definition for dyslexia is obscured. Texas defines dyslexia in exclusionary language. We know what it is not, but we do not know what it is. Therefore, it is not surprising to learn that in a recent random sample of 1/3 of the districts in Texas, over 140 different instruments were identified to help teachers and specialists identify what they think might be characteristics of a dyslexic learner.

The intent of the survey was to obtain a description of how districts identify students for dyslexia programs. Of the 300 districts surveyed in Texas, 1/3 responded with a long list of assessment instruments with no clear focus towards a definition answering what is dyslexia. Nor were notations cited accounting for discrepancies within learning achievement and other demonstrations of thinking. This study is a descriptive study of dyslexia programs in Texas public schools and investigates the student identification procedures.

## What are the criteria for qualifying a child for a dyslexia program?

Students with dyslexia and related disorders may qualify as handicapped persons under Section 504 of the Rehabilitation Act of 1973. According to the Texas Education Agency's (TEA) description for dyslexia, it is regulated under the federal law as part of the civil rights statute to protect qualified handicapped persons from discrimination in any program that receives federal funding. However, unlike the Individual with Disabilities Act and the Handicapped Act, this section is not an entitlement or funding statute but only provides certain procedural protections.

According to the stated evaluation procedures, evaluation procedures must be validated for the specific purpose for which it is used and be administered by trained personnel. In addition, evaluation must be tailored to assess specific areas of educational need and not instruments which provide a single general intelligence quotient. The test must also be selected and administered so that it best ensures a reflection of aptitude or achievement or whatever other

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factor the test purports to measure. Additional informal instruments (anecdotal records, book lists, audio recordings, parent and teacher descriptions) were also cited as being important information for the evaluation process.

> *"It was very difficult for districts to distinguish between the dyslexic student and the reading, writing, and spelling learning disabled student."*

Districts generally said they followed the guidelines listed for the four Phases established by Texas Education Agency(TEA). It was very difficult for districts to distinguish between the dyslexic student and the reading, writing, and spelling learning disabled student. In fact, many districts did not make the distinction. Some listed severity, while others listed specific language disorders. Some districts indicated that they have the same assessment but different programs for learners while others indicated that there were different assessment procedures. The responses indicated that only 16% followed the exact state suggested definition while 18% indicated that the dyslexic child was served in special education. Only 3.5% of the responses indicated that they look specifically at reading, writing, or spelling problems, and 1.4% indicated that they look for language disorders. Clearly, there is confusion with the state districts as referenced from their responses.

Dyslexia and related disorders under Texas state mandate must be diagnosed and remediated apart from special education programs. Each district is currently mandated to provide a specific program for children who manifest dyslexia or a related disorder. The program must include identification along with learning modifications and remediation. Since 1986 specific legislation under the Texas Education Code Section 21.924 indicates that dyslexia and related disorders are specific language disorders and must be in a different category apart from special education. The state code reads as follows:

1) Dyslexia means a disorder of constitutional origin manifested by a difficulty in learning to read, write, or spell, despite conventional instruction, adequate intelligence, and sociocultural opportunity.

2) "Related disorders" includes disorders similar to or related to dyslexia such as developmental auditory imperception, dysphasia, specific developmental dyslexia, developmental dysgraphia, and developmental spelling disability.

In order for districts to identify and remediate children with these disabilities, a four phase program has been established. Phase One involves collecting the data with screening instruments (vision and hearing, progress reports, parent conferences, TAAS scores, NAPT scores, etc.). Phase Two includes remedial programs for the children who have been identified in Phase One as needing additional help. Further assessment procedures may include the following: a test to determine basic reading level, reading comprehension, writing, spelling competency, and specific related programs as identified in an informal reading inventory. At this point a child may be placed in an appropriate remedial or compensatory program such as bilingual, tutorial, or summer reading programs.

If the child does not make adequate progress in any of these programs, services in Phase Three may be implemented. The identification for Phase Three includes the following:

1) characteristics associated with dyslexia,

2) a lack of appropriate academic progress,

3) adequate intelligence,

4) conventional and regular remedial instruction which hasn't proven to be effective,

5) a lack of progress which is not due to sociocultural factors, inconsistent attendance, or lack of experiential background, and

6) a lack of progress which is due to a constitutional origin, in other words, having an inborn developmental basis.

Programs for students which fall into these categories must exhibit the following characteristics: involve individualized and multisensory activities, provide for both intensive and synthetic phonics instruction, incorporate a meaning and linguistic basis, and incorporate systematic, process-oriented, sequential, and cumulative instruction. Over the five years of implementation of the new state mandate for dyslexia, districts have been grappling with solutions. The intent of the questionnaire was to appraise the districts' current status as they deal with the label "Dyslexia."

Many recent researchers of children identified with dyslexia ( Catts, 1989; Ehri & Robbins, 1992; Frith, 1986; Kamhi, 1992; Sawyer, 1992; Stanovich, K., 1991) suggest that the difficulty with these language users may be an impairment of phonological processes. Kamhi's (1992) definition of dyslexia is much more inclusionary in tone than the Texas definition.

> Dyslexia is a developmental language disorder whose defining characteristics is a lifelong difficulty processing phonological information. This difficulty involves encoding, retrieving, and using phonological codes in memory as well as deficits in phonological awareness and speech production. The disorder which is often genetically transmitted, is generally present at birth and persists throughout the lifespan. A prominent characteristic of the disorder is spoken and written language (p. 50).

The Texas definition, by contrast, is much more exclusionary than Kamhi's and as a result has confused many districts dealing with the labeling of dyslexia. Kamhi (1992) indicates that although individuals with

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> *One might question the use of many of these instruments . . .*

dyslexia may learn to read fairly well, they will always have difficulty with phonological processing. He also indicates that his definition excludes readers with other problems: general cognitive delay, visual processing deficiencies, higher level language disorders, and attention deficits. However, he does warn that "if nothing can be used to differentiate individuals with dyslexia from the garden-variety poor reader, then we should stop using the term" (p. 50).

From the survey, it was apparent that many assessment instruments were used to identify children with dyslexia. And one might question the use of many of these instruments which certainly were not designed to assess the dyslexic child. Of course, if the definition for dyslexia is so unclear, districts have little choice.

## Intelligence Tests

One criteria listed by TEA indicates that the dyslexic student must exhibit adequate intelligence. Therefore measures of general intelligence must be identified. A number of instruments were listed in this category, both group administered and individually administered. Individual intelligence tests were used twice as often as group administered intelligence tests. These include:

*Wechsler Intelligence Scale for Children III*
*Slosson Intelligence Test*
*Test of Nonverbal Intelligence*
*Kaufman Ability Battery for Children*

The group administered intelligence tests that were used include:

*Otis Lennon*
*Thorndike-Hagen Cognitive Abilities Test*
*Test of Cognitive Skills*

## Achievement Tests

A lack of academic progress is a second criteria established by TEA. Therefore, all districts used achievement tests as an indicator for this criteria. Group achievement tests were used twice as often as individual achievements tests. The six most widely used achievement tests were:

*Iowa Test of Basic Skills*
*California Achievement Test*
*Texas Assessment of Academic Skills*
*Science Research Associates Achievement Test*

The three most widely used individual achievement tests were:

*Woodcock-Johnson PsycholEducational Battery*
*Wide Range Achievement Test*
*Kaufman Test of Educational Achievement*

## Reading, Writing, Language Characteristics

Because, dyslexia point to deficiencies in reading, writing, and spelling, specific difficulties within those academic areas must be defined. Reading scores came most frequently from informal reading inventories, the *Gates MacGinitie Reading Test*, and basal programs. Writing scores came most frequently from the *Texas Assessment of Academic Skills*, from informal writing samples, and from the *Test of Written Language*.

## Districts vs. Research

If, however, Kamhi's definition for dyslexia is employed (1992) it would be appropriate to use instruments which would assess phonological information processed by the individual. Districts did list a number of these. However, none were of recent publication date. Those listed by districts were as follows:

*Auditory Analysis Test*
*Decoding Skills Test*
*Diagnostic Screening Test*
*Purdue Perceptual Motor Test*
*Herman Screening Method*
*Informal Reading Inventories*
*Kaufman Test of Educational Achievement (subtest)*
*Slingerland Screening Test for Identifying Children with Specific Language Disability*
*Slosson Oral Reading Test*
*Rapid Alternating Stimulus Test*
*Wide Range Achievement Test*
*Woodcock Johnson Reading Mastery Test*

Diagnostic skills that accompany the basal

Interestingly enough, researchers of phonological awareness from the past decade do not list any of these instruments as ones that were used in recent research. Instead, they (Ackerman, Dykman, Holloway, Paal, & Gocio, 1991; Flynn, Deering, Goldstein, Rahbar, 1992; Johansen, 1988; Kershner & Stringer, 1991; Newby, Recht, & Caldwell, 1989; Stanovich, 1991) listed the following instruments as being helpful in the identification and subclassification of dyslexic students.

*Decoding Skills Test* Part 1 and 2 (Richardson & Dibeneditto, 1985)
*The Boder Test of Reading and Spelling Patterns* (Boder & Jarrico, 1982)
*Sound Categorization Test* (Bradley, 1984)
*Rapid Alternating Stimulus Test* (Denckls & Rudel, 1976)
*Rhyme Supply* (Stanovich, 1984)
*Lexical Decision* (Olson et. al, 1985)
*Sound Segmentation Test of Awareness of Language Segments* (Sawyer, 1987)
*Quick Neurological Screening Test* (Revised Ed.) (Mitti, Sterling & Spalding, 1978).

## Additional Indicators of Language Difficulties

In addition, visual/auditory perception, visual motor integration and listening comprehension were all important areas of assessment linked to success in language development and reading, writing, and spelling.

Instruments listed for visual/auditory perception include:

*Bender* (Bender, L., 1946)

*Benton Visual Retention Test* (Rev. Ed.) (Benton, A.L., 1963)

*Purdue Perceptual Motor Survey* (Roach, E.G. & Kephart, N.C., 1966)

*Dyslexia Informal Screening Test*

*Frostig Developmental Test of Visual Perception* (Frostig, Maslow, Lefever & Whittlesey, 1964)

*Golman-Frostoe-Woodcock Test of Auditory Discrimination* (Golman, R., Fristoe, M. & Woodcock, R.W., 1970)

*Jordan Left Right Reversal Test* (1980)

*Keystone Visual Screening Test* (1949)

*Recognition Discrimination Test*

*Slingerland Screening Tests for Identifying Children with Specific Language Disability* (1974)

*Test of Visual Analysis*

*Digit Span in WISC-III*

*APT II Motor Level 1 and 2*

For visual motor integration the following instruments were identified:

*Bender* (Bender, L. 1946)

*Developmental Test of Visual/Motor Integration* (Berry & Buktenica, 1983)

*Purdue Perceptual Motor Test*

*Goodenough Draw-A-Man Test* (Harris, D.B., 1963)

*Frostig Developmental Test of Visual Perception*

*Handwriting Samples* (Test of Written Language)

*Jordan Left-Right Reveral Test*

*Slingerland Screening Tests for Identifying Children with Specific Language Disability*

*Wechler Intelligence Scale* for *Children III* - (subtests of performance scale: coding, mazes, block design)

Nearpoint/farpoint screening

From this list, it is clear that there is not one diagnostic instrument. As long as the definition for dyslexia is elusive, it will be impossible to precisely evaluate the condition some call dyslexia. For teachers who deal with these children in the classroom on a daily basis, it might be far more productive to learn that there are discrepant scores within a range of language abilities, and then to learn effective means for understanding the language process through a systematic miscue analysis, through think alouds and through retell profiles. Through these more descriptive measures, teachers can discover what the learner is thinking as he/she reads, writes, and expresses himself/herself.

As we search for more specific ways to teach children—all children—how to read and write, it is important to keep in mind the individualness of each learner. Perhaps what is important in the end is the sense that the learner, not the label, is important. Thus, a reading/writing program which is based upon sound pedagogy, along with the professional educator's understanding of human growth and development will be the best combination in the end— not the label.

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