

**Response to Intervention – See Johnny Run**

Presentation

For

The 2010 Annual CEC Conference

Jackson Convention Complex

Jackson, Mississippi

February 18-19, 2010

By

Ruben Gentry, Ed.D.

Professor of Special Education

And

Glenda Windfield, Ed.D.

Assistant Professor of Special Education

Jackson State University

Jackson, MS 39217

[ruben.gentry@jsums.edu](mailto:ruben.gentry@jsums.edu)

(601) 979-1064

## **Response to Intervention – See Johnny Run**

### **Abstract**

Previous efforts at leveling the learning field for all students have not met with success. In 1955 Johnny allegedly could not read because of the “look-and-say method” of teaching reading; 26 years later he still could not read because most elementary schools continued to use the aforementioned unproductive system. Perhaps now is Johnny’s real chance to “run” with the wind. The 2004 reauthorization of the Individuals with Disabilities Education Act (IDEA) allows school districts to spend up to 15 percent of federal special education dollars on early-intervention programs for students not identified as needing special education but who need extra support in the classroom. The law allows response to intervention (RTI) to be used as part of the process for determining if students have a learning disability. RTI is a potential method for ensuring that students are provided with instruction that is responsive to their educational needs. Through the RTI procedure, children with limited progress are assigned to specific evidence-based interventions designed to improve their behavior or rate of learning. Students who do not positively respond to the intervention may be considered to have a learning disability, making them eligible for special education services. The primary potential benefit of the RTI model is its efficacy for serving students whose instructional or behavioral needs are not being met. Children no longer need to attend schools where they wait to fail and become candidates for thorough evaluation for specialized education. With proper design and implementation of RTI, Johnny’s schooling can become a continuum of successes and all stakeholders can see him “run” as he masters the curriculum. This presentation provides a compelling rationale for RTI, delineates its

legal provision and means of financial support, elucidates its procedural tiers and framework, and addresses the extent of its use and success as a service delivery model.

## **Introduction**

Making school a successful experience for all students has been an ongoing challenge for educators, but a continuous demand from parents and the public. Educational systems have implemented numerous strategies and procedures to meet the challenge with varying degrees of success. The current program of promise is response to intervention (RTI). This paper presents an aggregate of RTI research, analysis of data, its effectiveness, and recommendations for meaningful discussion as this model evolves into an integral part of our educational system.

The general aim of RTI is to determine whether any student, regardless of type of disability needs more intensive instruction. It was originally developed for determining whether a student had a specific learning disability and was eligible for special education. But RTI has since been broadened to apply a problem-solving framework to identify and address a spectrum of student learning difficulties (Turnbull, Turnbull, & Wehmeyer, 2010).

In most RTI programs, students are given a basic screening early in the school year to spot any potential education deficits. Students thought to have difficulties are given additional tests, to allow school-based teams to zero in on the problems and craft an approach to addressing them. The thinking is that general education teachers will be able to accurately identify the problems that students are having and nip them in the bud before they lead to entrenched difficulties, or referral to special education (Samuels, 2008).

There is a relationship between RTI and previous innovations in education over the last several decades. Its roots are in innovative practices such as curriculum-based assessment, criterion-referenced testing, precision teaching, and more general performance monitoring initiatives. They all represent an increasing emphasis on using assessment practices as tools for learning; they emphasize the importance of assessment for learning rather than assessment of learning. Appropriate assessment becomes a tool to enable the teacher and student, working in concert, to strengthen the student's learning (Bender, 2008). In theory, RTI holds considerable promise for advancing learning for persons experiencing an array of difficulties in school.

### **Problems Faced by Johnny (Children with learning disabilities)**

The alleviation or remediation of entrenched learning problems does not always come easily. This is evident in the classical reading problem that “Johnny” had. Rudolph Flesch wrote *Why Johnny Can't Read* in 1955, saying the main reason for a decline in Scholastic Aptitude Test scores is the “look-and-say method” of teaching reading. In 1981 he wrote a sequel, *Why Johnny Still Can't Read*, emphasizing that the “phonics-first” method should be used in all schools. Flesch believes that all children can be taught to read and discounts economic circumstances, ethnic group membership, and learning disabilities as barriers to learning how to read. He cites scholars in reading who are convinced that dyslexia is the result of look-and-say teaching (Faison, 1982). It is argued that most of the hundreds of thousands of cases of dyslexia diagnosed in recent years are only imitations of true neurological dyslexia. This pseudo-dyslexia is provoked by poor reading instruction and has been promoted into a biological disorder by educators looking for excuses for bad reading performances and for federal money available for

handicapped children (Vigilante, 1981). However, in subsequent years there has been much controversy over reading instruction and many research studies have been conducted, but little improvement has been made in children's reading ability (Hopkinson, 1981).

Sometimes in education terminology changes but practice remains the same. For example, it was reported that twenty-six years after the publication of *Why Johnny Can't Read* 85 per cent of American elementary schools still used a proven failure to teach reading called the "look-and-say" system. Even today educational publishers claim to use phonics but really use disguised versions of "look-and-say" (Vigilante, 1981).

Most children with mild disabilities are generally not identified as having a potential disability until they start school and begin to fall behind their classmates in areas such as reading or math, or demonstrate behavior problems such as withdrawal, aggression, or lack of compliance (Taylor, Smiley, & Richards, 2009). Eighty percent of students with learning disabilities have noted difficulty in reading, and this often results in poor academic performance in many reading-dependent subject areas (Bender, 2008).

The regular education teacher frequently makes the determination that a significant difference is evident based on classroom performance. Another means of identifying potential problems is through the results of routine districtwide or statewide testing administered for accountability purposes and for monitoring student academic performance. A recent approach has been the use of the RTI model, in which the entire class, or school, is screened to see who is at risk of having a disability and needs additional help (Taylor, Smiley, & Richards, 2009).

According to Turnbull, Turnbull, & Wehmeyer (2010), the problem-solving nature of RTI includes:

- Defining the problem (Is there a problem? What is it?)
- Analyzing (Why is it happening?)
- Developing a plan (What shall we do about it?)
- Evaluating (Did our plan work?)

### **Rationale and Objectives for RTI**

RTI is an educational framework that promises to raise achievement through modification of lesson plans based on frequent “progress monitoring” and is one of the most-discussed education topics today (Samuels, 2008). Many schools are adopting RTI models in order to prevent reading difficulties among students, identify those at-risk for academic failure early on, and to create a better instructional match for students (Barnes & Harlacher, 2008).

RTI is an innovative approach to service delivery within schools. As practitioners became increasingly frustrated with current practices (i.e., waiting for a student to fail before services can be provided) and were faced with the pressure of No Child Left Behind, they acknowledged that a more proactive and preventative approach was needed. RTI was offered as a way to answer this need. Defined as a multi-tiered method of service delivery in which all students are provided an appropriate level of evidence-based instruction based on their academic needs, RTI involves frequent assessment of students’ progress, data-based decision making, and placement of students within a range of instructional supports. The philosophy of RTI is finding “which children need what services, delivered with how much intensity” (Barnes & Harlacher, 2008).

The RTI process is designed to identify at-risk children early, to provide access to needed interventions, and to help identify children with disabilities. The process is intended to assist in identifying children with disabilities by providing data about how a child responds to scientifically-based intervention as part of the comprehensive evaluation required for identification of any disability (CEC, 2007). The RTI procedure was designed as a multilevel approach to identify students who are experiencing academic problems before they fall too far behind (Taylor, Smiley, & Richards, 2009).

Turnbull, Turnbull, and Wehmeyer (2010) identified four key components of RTI. They are:

- The implementation of high-quality, research-based instruction and behavioral supports in general education settings
- Universal (schoolwide or districtwide) screening of academics and behavior to determine which students need closer monitoring or additional interventions
- Multiple tiers of increasingly intense, research-based interventions matched to student needs
- Continuous monitoring of student progress to determine if students are meeting their goals

Each of the typical three tiers within the RTI model involves increasing degrees of systematic instruction so that a student who does not respond to customary instruction in general education classes has the opportunity to receive more explicit, intensive, and/or supportive instruction. Turnbull, Turnbull, and Wehmeyer (2010) explain the meaning of these concepts as follows:

- More explicit instruction involves the systematic teaching of critical skills that enable the student to be more successful in mastering a subject
- More intensive instruction involves a higher frequency of instructional opportunities than is typically provided in general education classrooms
- More supportive instruction involves more precise scaffolding in order to (1) sequence skills and (2) provide more precise prompts to use necessary learning strategies

### **Legal Provisions and Financial Support**

The RTI process has been endorsed by the federal government through the 2004 reauthorization of the IDEA, which allows schools to use up to 15 percent of federal special education dollars on early-intervention programs for students who are not identified as needing special education, but who need extra support in the classroom. The special education law also allows RTI to be used as part of the process for determining if students have a learning disability. Widespread practice for identifying students with learning disabilities involves testing students' intelligence and comparing it with their classroom achievement. Students who have a severe discrepancy between IQ and achievement are often considered learning-disabled, but that process has been criticized as a "wait to fail" model that identifies students as learning disabled who could be helped just by getting better teaching (Samuels, 2008).

The 2004 reauthorization of the Individuals with Disabilities Education Act allows schools to use methods for examining if a student responds to a research-based intervention when determining eligibility for classification as learning disabled. This process, referred to as RTI, involves ongoing evaluation of children's responsiveness to



evidence-based interventions of differing intensity and individualization as a basis for making instructional intervention and eligibility decisions. Through RTI, educators are expected to systematically rule out questions about basic instruction as an alternative explanation for low performance, find and apply an optimal amount of intervention strength to bring about desired changes in children's behavior, and then use information from a child's cumulative intervention history to make eligibility decisions (Daly & et al., 2007).

As a result of provisions in the 2004 reauthorization of the IDEA, response to intervention (RTI) has garnered significant attention as a means of guiding decisions about school-based service delivery. Well aligned with the No Child Left Behind Act's (2001) requirements for the use of periodic standardized assessments to inform curriculum implementation and school improvement, RTI is a potential method for ensuring students are provided with instruction that is responsive to their educational progress (or lack thereof). RTI is used to evaluate the effectiveness of basic instruction in meeting all students' needs. Within an RTI framework, children with limited progress are assigned to specific evidence-based interventions designed to improve their behavior or rate of learning. On-going instructional or behavioral supports are provided and modified, if necessary, over time based on needs identified through regular assessment. As outlined in the IDEA of 2004, those who fail to respond to repeated intervention may also be considered to have a learning disability and eligible for special education (Glover & DiPerna, 2007).

The RTI approach recommended in IDEA of 2004 specifically designated RTI as a means to help in determining the presence of a learning disability. However, the

philosophy and suggested models imply that RTI can also be used as a schoolwide model of screening and decision making (Taylor, Smiley, & Richards, 2009).

Some observers are unsure whether RTI can do what federal law suggests – offer a way to diagnose accurately whether a student has a learning disability. But federal education law requires that before any student is placed in special education, the school must ensure that his or her learning problem is not linked to inadequate instruction. According to law, before ever thinking about special education, a very close look at general education is required (Samuels, 2008). The RTI process should ensure that sufficient resources are available to cover a substantial percentage of the costs that state, provincial, and local jurisdictions will incur to implement and institutionalize this initiative without reducing expenditures for other education programs (CEC, 2007).

### **Methods and Procedures**

Information and data for this research are derived from a systematic review of current literature on RTI. Efforts are made to establish evidence-based justification for its use with various populations, to ascertain its impact by subject areas and grade levels, and to observe the sustainability and multiplier effects of the process.

The RTI process represents an inclusive partnership between all school personnel and families to identify and address the academic and behavioral needs of learners beginning as early as the preschool years. Children with identified disabilities may not be required to go through an RTI process in order to receive special education and related services (CEC, 2007).

Table 1 depicts the specific procedures for the RTI process. The interventions consist of a multi-tiered problem-solving process with at least three tiers. The first tier

provides instruction through a universal core program in general education until students show evidence of failing to respond as expected to the instruction provided. The second

**Table 1**

**Specific procedures in the RTI process**

---

**Tier 1:**

Students receive effective instruction in the general education setting, using validated practices. Student progress is monitored on a weekly basis

---

**Tier 2:**

Students whose progress is less than desired receive different or additional support from the classroom teacher or another educational professional. Student progress continues to be monitored

---

**Tier 3:**

Students whose progress is still insufficient in Tier 2 may receive even more intensive instruction, which can be provided in a variety of ways. Then depending on state/district's policies, students may qualify for special education services or receive evaluation for identification of learning disability

---

tier provides intervention that is more intensive than general education, but less individualized than special education. The third or highest tier provides specially designed instruction and related services which is special education and is delivered by special educators and related service personnel. This tier may also include intense individualized intervention services to a small number of children not identified as having a disability but requiring these services which are delivered by specialized general educators and/or other professionals. Special education and related services in tier three is based on an IEP and uses the most intensive intervention programs that are designed and implemented to address individual student needs (CEC, 2007). The RTI process should include universal screening, high quality research-based instruction, and progress

monitoring to determine the quality of student responses to intervention as well as inform decisions about the movement between tiers. It should include provisions for referral for a comprehensive evaluation in any tier, which includes measures of cognitive ability, to determine if a child has a disability and is eligible for special education and related services and due process protections. The RTI process should recognize general educators as the primary interveners and special educators as members of the problem-solving teams in tiers one and two, and conversely, special educators as the primary interveners in tier three or the highest tier to ensure that the needs of struggling learners are met (CEC, 2007; Taylor, Smiley, & Richards, 2009; Samuels, 2008).

In conjunction with the multi-tiered structure, Taylor, Smiley, and Richards (2009) delineated steps in the RTI process. They are as follows:

- Students are provided with “generally effective” instruction by their classroom teacher
- Their progress is monitored
- Those who do not respond get something else, or something more, from their teacher or someone else
- Again, their progress is monitored
- Those who still do not respond either qualify for special education or for special education evaluation

Turnbull, Turnbull, and Wehmeyer (2010) address the use of RTI as an evaluation method to determine the presence of a learning disability. They state that schools must make sound decisions addressing the following six components or foci:

- Specification of the number of prevention tiers

- Identification of students for prevention
- Provision of intervention
- Classification of response
- Conducting multidisciplinary evaluation
- Providing special education

### **Accomplishments and Results**

The RTI approach has many advantages in identifying students with learning disabilities including the supplemental provision of instruction to a large number of at-risk students and ongoing progress monitoring. This approach also allows identification of a learning disability before the student begins to have significant problems. Other advantages are the potential reduction of bias during the identification process, and the emphasis on a risk model rather than a deficit model. The use of RTI could improve schoolwide achievement because all students would be monitored to determine who needs additional help (Taylor, Smiley, & Richards, 2009), as it improves the identification of students with disabilities (Barnes & Harlacher, 2008).

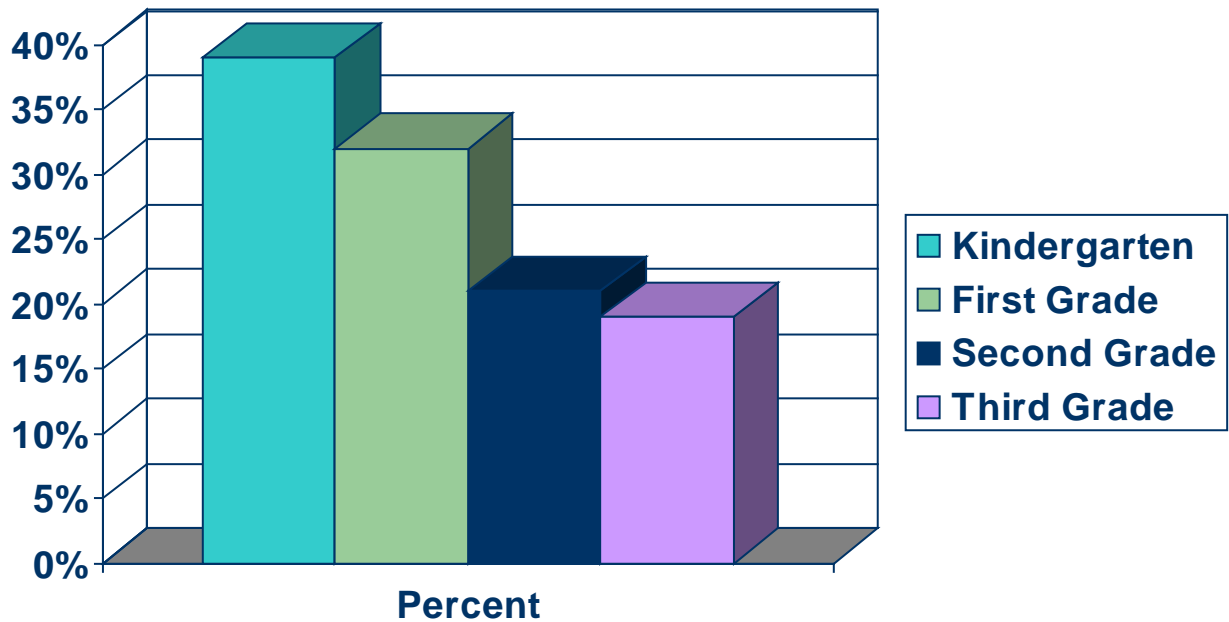
RTI has shown success with children just learning how to read, but skeptics note that the research base is less solid for older students and students in other academic subjects (Samuels, 2008). It also may reduce the number of student referred for special education, promote effective early intervention, provide diagnostic information to consider in the identification of a disability, and/or may reduce the impact of a disability on a child's academic progress (CEC, 2007).

One study reported substantial growth in early reading performance (e.g., oral reading fluency) and reductions in special education referrals. Figure 1 illustrates that

reductions in referrals were 39% in kindergarten, 32% in first grade, 21 % in second grade, and 19% in third grade over a 4-year period (Glover & DiPerna, 2007). Another

**Figure 1**

**Reductions in special education referrals from use of RTI**



study reported neither an increase in disability referral rates nor a reduction in performance growth rates for students participating in multi-tier services compared to those traditionally identified with a learning disability. Researchers found that the multi-tier services produced a positive impact on disproportionate placement of students from ethnic minority backgrounds. Another study indicated a reduction in grade retentions and special education referrals or placements and an increase in task completion, comprehension, and time on task for participating students (Glover & DiPerna, 2007).

Just as RTI is effective for students with disabilities, so it seems to be effective at preventing diversity-based discrimination and unjustified placement into special education. Using RTI, educators ask whether the student is receiving adequate instruction; they do not presume that the student's educational needs arise from disabilities or other limitations that lie within the student (Turnbull, Turnbull, & Wehmeyer, 2010).

Encouragingly, an RTI program in kindergarten helped students who were learning English to perform significantly better than their counterparts who were not part of the RTI program; further, the RTI program was just as effective for students who were learning English as it was for those already proficient in English (Turnbull, Turnbull, & Wehmeyer, 2010). As many see it, RTI offers the best method for getting research-based instruction to students, and helping students with disabilities is just one of many benefits (Samuels, 2008).

### **Implications for Johnny**

A free and effective education that prepares children to become productive members of society is most essential to a democracy. To accomplish this goal, schools must meet the challenge of effectively educating all children. African American students are overrepresented in special education and underrepresented in gifted education. This is in large part due to students' poor performance in core academic areas such as reading, math, and writing. A primary reason children fall further and further behind in school is poor literacy skills, such as vocabulary development (Geisler & et al., 2009).

Four main reasons have been identified for implementation of RTI: to address disproportionality - overidentification or underidentification of students from minority

subgroups of special education; to promote overall student achievement; to better integrate general and special education; and to inform, or possibly determine, special education eligibility for students with learning disabilities. Many states have RTI initiatives that focus on reading, as well as on mathematics and behavior. Challenges arise for planners working across special and general education and include blending funding, developing staff training, and staging rollouts so as not to overwhelm schools with new and complex practices. More work is needed to share and empirically compare states' experiences with such concerns as funding options, state planning practices, fidelity in implementation, identification of effective academic and behavior interventions, and secondary school implementation (Sawyer, Holland, & Detgen, 2008).

“See Johnny run!” It may be made analogous to the legendary “See Spot run.” The *Dick and Jane Basic Readers* were published from 1931 through 1965. They featured the dog Spot, with the expression, see Spot run (Gross, 1986). The books were effective pieces of literature. So many people's first memories of reading were “See Spot run” (Bunce, 1996). Zerna Addis Sharp's decision in creating the text was to make it short, simple, to the point, and clear; and that the pictures should enable the student to catch the point right away. The rest was history until over three decades later when Spot ran into a brick wall. The material was then judged as not reflecting inclusive American values. But now there is a reappearance of the timeless tots in *Growing up with Dick and Jane*. The stories are interspersed with a text putting the stories in their social and historical context. Thus the stories are again effective in helping children learn to read (Bunce, 1996).



Take Sharp's criteria for effective reading material (short, simple, to the point, clear), and add "relevant" to the list, and there is high probability that when it comes to reading, Johnny will run; he will learn to read and succeed in school.

Figure 2 illustrates how RTI might make the difference in Johnny's schooling. If the RTI is properly planned and implemented, Johnny will have behind him, or supporting him, research-based instruction, the experience of early intervention, and the likelihood of not being referred for special education. As Johnny looks to the future, or ahead, he is likely to experience improved performance academic performance, enhanced positive self-esteem, and substantial societal rewards.

**Figure 2**

**See Johnny Run !!!  
RTI Made the Difference**

---



**Behind him:**

- ++ Research-based instruction
- ++ Intervention at younger age
- ++ No longer candidate for special education

**Ahead:**

- >> Improved academic performance
- >> Enhanced positive self-esteem
- >> Substantial societal rewards

---

(Clipart: Retrieved February 2, 2010, from [http://www.best-of-web.com/search\\_term\\_pages/person\\_running.html](http://www.best-of-web.com/search_term_pages/person_running.html).)

Seeing Johnny run can become a reality for many children with learning disabilities and behavioral problems. RTI may ultimately change the face of education for individuals experiencing learning and behavioral challenges in school.

### **Summary and Recommendations**

The literature is replete with information about the potential benefits of RTI and how it might best be implemented. But only a few studies provide empirical data on the effectiveness of RTI in facilitating success for individual students in the general curriculum. Among the limited evidence-based studies the success of RTI appears very beneficial. Reading is the area that seems most positively impacted. Other reported gains from implementation of RTI include reductions in special education referrals, positive impact on disproportionate placement of students from ethnic minority backgrounds, reduction in grade retentions, and an increase in task completion, comprehension, and time on task for participating students (Glover & DiPerna, 2007). The overall prospect is promising that this time RTI will ensure that Johnny is able to read and succeed in school.

To ensure that RTI proves a success, in the form of recommendations, explicit effort must be made to answer such questions raised by Taylor, Smiley, and Richards (2009). They include:

- How long should the intervention be in place?
- How intense should the instruction be?
- What criteria will be used to determine responsiveness and unresponsiveness?
- What actually constitutes scientific, research-based instruction?
- How is RTI different from prereferral intervention?

- Who should receive the additional intervention and by whom the intervention should be applied?
- Is the lack of response to intervention in and of itself sufficient to be considered a learning disability?
- Should additional diagnostic information such as IQ be used to distinguish between a learning disability and an intellectual disability?

Another recommendation is to try and appease the worries of RTI critics. Some special education researchers worry that many aspects of RTI are best viewed as experimental because their technical adequacy has not yet been established (Turnbull, Turnbull, & Wehmeyer, 2010). Leadership in the field must seek research-based evidence to alleviate such worries. If the above questions can be answered in the affirmative and the worries can be abated, RTI may prove to be worth its weight in gold. If this does not happen, RTI may soon be history.

## References

- Barnes, A.C. & Harlacher, J.E. (2008). Clearing the confusion: Response-to-intervention as a set of principles. *Education and Treatment of Children*, 31(3), 471-431.
- Bender, W.N. (2008). *Differentiating instruction for students with learning disabilities*. 2<sup>nd</sup> Edition. Thousand Oaks, CA: Corwin Press.
- Bunce, A. (1996). See Spot. See Spot run. See Spot make a comeback. *Christian Science Monitor*, 89(2), 15.
- Council for Exceptional Children. (2007). Position on response to intervention (RTI): The unique role of special education and special educators, (Author).
- Daly III, E.J., Martens, B.K., Barnett, D., Witt, J.C. & Olson, S.C. (2007). Varying

- intervention delivery in response to intervention: Confronting and resolving challenges with measurement, instruction, and intensity. *School Psychology Review*, 36(4), 562-581.
- Duffy, H. (2007). Meeting the needs of significantly struggling learners in high school. National High School Center: American Institute for Research. Retrieved from [http://betterhighschools.org/docs/NHSC\\_RTIBrief\\_08-02-07.pdf](http://betterhighschools.org/docs/NHSC_RTIBrief_08-02-07.pdf).
- Faison, H. (1982). Why Johnny still can't read (Book). *Educational Leadership*, 39(7), 556.
- Geisler, J.L., Hessler, T., Gardner, III, R., & Lovelace, T.S. (2009). Differentiated writing interventions for high-achieving urban African American elementary students. *Journal of Advanced Academics*, 20(2), 214-247.
- Glover, T.A. (2007). Service delivery for response to intervention: Core components and directions for future research. *School Psychology Review*, 36(4), 526-540.
- Gross, M. (April 14, 1986). Dick, Jane and Spot – Sort of. *New York Times*, p20.
- Hopkinson, S.L. (1981). Why Johnny still can't read (Book). *Library Journal*, 106(7), 779.
- Samuels, C.A. (2008). "Response to intervention" sparks interest, questions. *Education Week*, 27(20), 1-4.
- Sawyer, R., Holland, D. & Detgen, A. (2008). *State policies and procedures and selected local implementation practices in response to intervention in the six Southeast Region states (Issues & Answers Report, REL 2008-No. 063)*. Washington, DC: U.S. Department of Education, Institute of Education Sciences,

- National Center for Education Evaluation and Regional Assistance, Regional Educational Laboratory Southeast. Retrieved from <http://ies.ed.gov/ncee/edlabs>.
- Taylor, R.L., Smiley, L.R. & Richards, S.B. (2009). *Exceptional students; Preparing teachers for the 21<sup>st</sup> century*. New York, NY: McGraw-Hill.
- Turnbull, A., Turnbull, R., & Wehmeyer, M.L. (2010). *Exceptional lives: Special education in today's schools*. 6<sup>th</sup> Edition. Upper Saddle River, NJ: Merrill.
- Vigilante, R. (1981). Why Johnny still can't read (Book). *National Review*, 33(12), 737-738.