South Carolina Dyslexia Taskforce Report

January 28, 2013

Act 103 from the 2011 session of the South Carolina General Assembly:

"Whereas, many students with dyslexia are never properly diagnosed and do not receive the necessary specialized educational programs; and

Whereas, it is in the public interest for the State to establish a South Carolina Dyslexia Task Force to study instructional practices and strategies that benefit students with dyslexia and examine the ways in which current state policies affect this population."
Dyslexia is a specific learning disability that interferes with acquiring the accurate and fluent word recognition skills necessary for proficient reading. The impact of dyslexia is different for each person and depends on the severity of the condition and the effectiveness of instruction or remediation. The core difficulty is with word recognition and reading fluency, spelling, and writing. Some individuals with dyslexia are able to learn early reading and spelling tasks, especially with appropriate instruction, but later experience their most debilitating problems when more complex language skills are required, such as grammar, understanding textbook material, and writing essays.

People with dyslexia can also have difficulty with spoken language, even after they have been exposed to good language models in their homes and good language instruction in school. They may find it difficult to express themselves clearly, or to fully comprehend what others are saying. These challenges are often difficult to recognize, but they can lead to major problems in school, in the workplace, and in relating to other people.

Students who struggle with dyslexia have brains wired to process information in unique and different ways and have the potential to be our future entrepreneurs, inventors, artists, musicians, engineers, and writers. South Carolina cannot afford to lose them! With effective instruction most students with dyslexia will learn to read and write at levels proficient enough to pursue their areas of interest and talent. Failure to learn to read in the early grades begins a downward academic slide that has far-reaching negative consequences.

Some statistics to consider:

- 15-20% of our population, or about one in every five students, struggles to acquire basic reading skills. Dyslexia is the most common cause of reading, writing, and spelling difficulties.\(^i\)
- 41% of all students receiving special education are identified as having learning disabilities, mostly in reading.\(^ii\)
- 74% of the children who are poor readers in 3rd grade remain poor readers in the 9th grade.\(^iii\)
- 45% of secondary students with learning disabilities perform more than three grade levels below their peers in reading.\(^iv\)
- In South Carolina, 39% of 4\(^{th}\) graders and 28% of 8\(^{th}\) graders scored below basic reading levels on recent national testing.\(^v\) SC has consistently scored below the national average on this 4\(^{th}\) grade reading test.\(^vi\)

The effects of dyslexia reach well beyond the classroom:
• Children who are not reading on grade level in the early years are at risk of failure to graduate and will face negative long term consequences on their earning potential, employability, and general productivity.\textsuperscript{vii}
• 48\% of juvenile prisoners function academically below grade level.\textsuperscript{viii}
• Large numbers of incarcerated individuals are marginally literate or illiterate and have experienced school failure and retention.\textsuperscript{ix}

Based on the above statistics, there could be tens of thousands of students struggling with a language-based learning difficulty with only a small percentage of them receiving appropriate instruction. Many of these students end up dropping out of school and/or end up in our justice system due to their difficulties and frustrations in the traditional classroom environment.

Currently, South Carolina does not specifically recognize dyslexia or provide any recommendations on appropriate treatment to parents or educators. The South Carolina Dyslexia Task Force would welcome and support legislation concerning the unique needs of children with dyslexia, especially regarding early intervention and teacher training. Recent legislation from other states is reported at \url{http://www.dyslegia.com/state-dyslexia-laws/}.

In addition, the South Carolina Dyslexia Task Force would like to submit the following recommendations to the South Carolina Legislature and Governor.

\textsuperscript{1} International Dyslexia Association (www.interdys.org)  
\textsuperscript{2} IDEA Part B Child Count, 2010  
\textsuperscript{3} International Dyslexia Association (www.interdys.org)  
\textsuperscript{4} National Longitudinal Transition Study-2  
\textsuperscript{5} NAEP Results, 2011  
\textsuperscript{6} Joint Citizens and Legislative Committee on Children, Annual Report, February 1, 2012  
\textsuperscript{7} Anne E. Casey Foundation, 2010 Special Report: Why Reading by the End of Third Grade Matters, \url{http://www.aecf.org/KnowledgeCenter/Publications}  
\textsuperscript{8} U.S. Office of Juvenile Justice and Delinquency Prevention  
\textsuperscript{9} Center on Crime, Communities, and Culture, 1997
Recommendations
Recommendation #1: Clearly acknowledge the definition of dyslexia in South Carolina State Law.

1. Adopt a definition of dyslexia as defined by either the International Dyslexia Association or the National Institute of Health that specifies:
   a. Classification
   b. Characteristics

2. Place definition on the SCDE website to show clearly that the state of South Carolina does recognize the existence of this specific learning disability in reading.

Recommendation #2: Identify language delays and risk factors for dyslexia as soon as a child enters the education system.

1. Universally screen all children entering the education system for phonological awareness and decoding difficulties and provide appropriate, research-based intervention immediately for those “at risk”.

Recommendation #3: Provide information and materials for parents and teachers to find out how best to address learning difficulties associated with dyslexia.

1. Create a webpage hosted by the SCDE website about dyslexia. Include:
   a. Quick facts about dyslexia section
      • Strengths and weaknesses of dyslexic minds
      • Common myths associated with dyslexia
   b. List of “symptoms”: characteristics a child might exhibit if they have dyslexia.
      • Organize by age/grade level through adulthood.
      • Include common weaknesses in areas such as reading, writing, spelling, receptive/expressive language (listening and speaking), math, foreign languages.
• Include common strengths often seen, with examples to help parents and teachers better understand. Such as the example of a child with excellent visualization abilities who can build elaborate Lego models without directions, but cannot remember sight words.

1. Profiles of successful people with dyslexia

c. What to do if you suspect your child has dyslexia.

• Explain clearly the rights and responsibilities for parents in everyday language and in a logical order.

• Testing through the school district, support at the state and national level

• Private testing/evaluation

d. Strategies for addressing dyslexia.

• Sections for:

  1. Preschool and kindergarten teachers: Include early warning signs, phonemic awareness information, and how to teach at-risk readers.

  2. Regular education teachers (classroom accommodations/modifications at each grade level through high school)

  3. Special Education teachers

  4. Reading intervention teachers/coaches

  5. Parents: Discussing remediation, family dynamics, homework, and social issues.

  6. Assistive Technology at each grade level (through high school): The ultimate goal should be that each student leave high school knowing how to use the technology to accomplish their future educational and/or career plans.

  7. Links to other state handbooks on dyslexia

e. Link to industry resources

• Links to all the types of professional organizations that provide information and resources about dyslexia to both parents and teachers.
2. Create an electronic toolkit for teachers looking for ways to address dyslexia/learning difficulties in reading (similar resources are already available).

Recommendation #4: Recommend that Response to Intervention (RTI) be consistently implemented, with fidelity, in all school districts in South Carolina.

1. Response to Intervention is a regular education initiative that is designed to offer research-based intervention to struggling students in a tiered system of instruction. When optimally implemented, RTI programs should help dyslexic students (and other struggling readers) to receive effective help early in their school careers. The essential elements of an RTI approach are: the provision of scientific, research-based instruction and interventions in general education; monitoring and measurement of student progress in response to the instruction and interventions; and use of these measures of student progress to shape instruction and make educational decisions. (2006, National Association of School Psychologists, http://www.nasponline.org/)

2. Currently in SC, there are vast differences in RTI type programs with some school districts not offering any services, and others having a formal tiered system of intervention in place for students. The state of SC does not issue guidelines for effective implementation or mandate how RTI services should be organized, resulting in inconsistency throughout the state.

Recommendation #5: Teachers and administrators must receive training in order to recognize the signs of dyslexia and to fully understand effective remediation for dyslexic students.

1. Include sessions on dyslexia in the Best Practices seminars sponsored by the State Department of Education each summer.

2. Offer comprehensive teacher trainings on the structure of language.

Recommendation #6: Draft legislation that requires the South Carolina University system (Departments of Education, Literacy, Reading, Speech/Language Pathology, and Special Education) to provide teachers with training in recognizing and providing effective instruction for students with dyslexia.
1. Universities in SC should offer pre-service teachers training and understanding of dyslexic type reading disabilities and how to effectively teach all children who struggle with reading.

2. Recommend teachers applying for new certification (or re-certification) in any subject area and grade level have basic understanding to detect and instruct students with dyslexia.
Appendices

Member Roster

Personal Statements

Meeting Agendas

Presentations made to the Dyslexia Taskforce
<table>
<thead>
<tr>
<th>Name</th>
<th>City</th>
<th>Organization</th>
</tr>
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<tbody>
<tr>
<td>Ms. Susan Burkett</td>
<td>Leesville</td>
<td>South Carolina Department of Education</td>
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<tr>
<td>Ms. Ann Whitten</td>
<td>Aiken</td>
<td>South Carolina Chapter of the Learning Disabilities Association of America</td>
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<td>Ms. Heidi Bishop</td>
<td>Greenville</td>
<td>South Carolina Branch of the International Dyslexia Association</td>
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<tr>
<td>Dr. Angela McLeod</td>
<td>State Park</td>
<td>South Carolina Speech-Language-Hearing Association</td>
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<tr>
<td>Ms. Judi Ramsey</td>
<td>Rock Hill</td>
<td>South Carolina Education Association</td>
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<td>Mrs. Kennedy Norungolo</td>
<td>Spartanburg</td>
<td>Palmetto State Teachers Association</td>
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<tr>
<td>Mr. Chris Winkler</td>
<td>West Columbia</td>
<td>Chair, At-large (State Superintendent)</td>
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<td>Hon. Shane R. Martin</td>
<td>Spartanburg</td>
<td>South Carolina Senate</td>
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<td>Hon. Phil P. Leventis</td>
<td>Columbia</td>
<td>South Carolina Senate</td>
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<td>Hon. Andrew S. Patrick</td>
<td>Columbia</td>
<td>South Carolina House of Representatives</td>
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<td>Hon. Robert L. Brown</td>
<td>Hollywood</td>
<td>South Carolina House of Representatives</td>
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<td>Mrs. Jane Dreher Emerson</td>
<td>Columbia</td>
<td>At-large (Senate)</td>
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<tr>
<td>Hon. Anne Thayer</td>
<td>Belton</td>
<td>At-large (House)</td>
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Personal Statements
To Whom It May Concern,

In the next ten years our education in the United States will look much different, you know this. In looking back over the many decades of education there were three simple things that have remained the same. Change, Principles of Education, and Choice. This task force was created to give you insight to the forthcoming movement in schools concerning reading instruction, current disability issues facing those with Dyslexia, and real people with real stories of all ages struggling to read due to this disability.

The task force has done an admirable job of informing the State of simple changes for very low costs, as well as offering long term costly suggestions that could be built into a long term solution. The disease of Dyslexia for now does not have a cure. However, the methods provided to a person incorporating minor instructional adjustments will ensure their success and ours’ as a State. Families, teachers, and students alike deserve to have a reasonable amount of resources to ensure their awareness of choice based on principle-centered leadership and classroom instruction.

Do not look away from these simple solutions! As a representative of the State of SC I implore you to engage either a person, a body of knowledgeable leaders, or even you yourself to care for these relationships. Dyslexia is not about rules and state codes, it is about people. Albert Einstein said it best in 6 words, “Imagination is more important than knowledge.” This was a man surrounded by caring people who ensured his success regardless of his disability. Did you know that about him?

Will you please review, and respond to these suggestions and empower the State Dept. of Education to address the simple, low cost ways provided. I personally am available to continue to serve and speak with whoever is interested. Solutions are about people, and for little to no additional funds the state of South Carolina can encourage a population of voters to be better informed by enacting the enclosed suggestions.

If you need to know more my cell phone is 803-318-9670; if you need to speak with anyone that will help please allow me to serve further by just asking of me what further information you need. We are grateful to you for your work and will continue to pray for your role here in the great state of South Carolina as a leader for the people.

Respectfully,

Chris Winkler

Head of School
It has been an honor and a privilege to serve on the South Carolina Dyslexia Task Force with a varied group of individuals from both the public and private academic sectors.

As President of the SCBIDA, a Fellow of the AOGPE, and Director of Camperdown Academy’s Outreach and Teacher Training Program, as well as having devoted my entire educational career to working with dyslexic students for the last 27 years, I feel we are at an opportune time to globally address the specific needs of the dyslexic student.

Over the last 12 years, I have trained over 150 public and private teachers in the Orton-Gillingham Approach to reading, writing, and spelling, which is a systematic, structured, sequential, cumulative, cognitive, flexible approach to teaching the structure of our language. Without exception, every teacher walks away from this 60+-hour training wondering why they were never taught this way to teach reading in their undergraduate or graduate classes when they were pursuing their degrees. Even more concerning to them is that there is no opportunity for professional development to pursue this kind of information to teach reading unless they pay for it out of their own pocket.

Research on the dyslexic brain and the ways to improve their reading deficits is vast. I encourage the state’s leaders in education to look at the state of Hawaii and the improvements in classroom scores based on the professional training that the special ed. and general ed. teachers are receiving. This training and the student achievements reflect the current brain research.

We have a social and economic responsibility to all children, but particularly to the dyslexic child. These children have the unique ability to problem-solve using “out of the box” approaches and are the architects, inventors, artists, and innovators that will continue to propel humankind forward.

Heidi High Bishop, Fellow/AOGPE and President, SCBIDA
December 29, 2012

To: Members of the SC Legislature and Governor

Regarding: The SC Dyslexia Task Force--Final Comments

To Whom It May Concern:

Thank you for the opportunity to serve on the SC Dyslexia Task Force this past year. I am passionate about helping children who struggle with reading and will be happy to help if needed as you discuss the recommendations of the task force. Here are my final comments for your consideration.

School is a child's job, and children faithfully go to “work” each day wanting to succeed. No one wants to do poorly in his or her job, but for many children, each day at their job of school confirms their incompetence. About one in every five students struggles to learn to read, most because of dyslexia. Dyslexia crosses all socioeconomic levels and occurs in all cultural groups.

The emotional consequences of dyslexia often begin as early as kindergarten. By second grade many children are desperately trying to hide their difficulty with reading, are terribly afraid that something is wrong, and feel that they are dumb. Some students exhibit negative behaviors; others become anxious, discouraged or sad.

Difficulty in reading causes a chain reaction in other subjects. Struggling readers cannot master the many unfamiliar words and language concepts that dominate upper level textbooks. Middle and high school students who read significantly below their potential will often drop out, get into trouble, or just barely get by in school.

Dyslexia can limit dreams and close doors in areas where a student might otherwise excel, but it can be overcome. Students with dyslexia must be taught to read with explicit methods; by extremely well trained teachers, using programs with a demonstrated success rate for dyslexic students. These students have unlimited potential if intervention is provided early enough, for a long enough time, and with sufficient intensity to bring the student to grade level literacy. Our state should accept nothing less!

Sincerely,
Ann Whitten
Vice-President, Learning Disability Association of SC
Reading Specialist, Aiken Learning Lab, Aiken, SC
803-507-5079
ann.whitten@gmail.com
AGENDA

South Carolina Dyslexia Task Force

LOCATION & TIME
February 9, 2012
Rutledge Conference Center, Rutledge Building
1429 Senate Street, Columbia, SC 29201
1:00PM

I. Welcome
II. Introduction of Panel Members
III. Approval of Agenda
IV. Public Comment Period
V. Presentations and Discussion
VI. Other Business
VII. Adjournment
AGENDA

South Carolina Dyslexia Task Force

LOCATION & TIME
Thursday, April 19, 2012
Rutledge Conference Center, Rutledge Building
1429 Senate Street, Columbia, SC 29201
1:00PM

I. Welcome
II. Introduction of Panel Members
III. Approval of Agenda
IV. Public Comment Period
V. Presentations and Discussion
VI. Other Business
VII. Adjournment
AGENDA

South Carolina Dyslexia Task Force

LOCATION & TIME
Tuesday, May 15, 2012
Rutledge Conference Center, Rutledge Building
1429 Senate Street, Columbia, SC 29201
9:30AM

I. Welcome
II. Introduction of Panel Members
III. Approval of Agenda
IV. Public Comment Period
V. Presentations and Discussion
VI. Other Business
VII. Adjournment
STATE OF SOUTH CAROLINA
DEPARTMENT OF EDUCATION

Mick Zais
Superintendent
1429 Senate Street
Columbia, South Carolina 29201

AGENDA

South Carolina Dyslexia Task Force

LOCATION & TIME
Thursday, June 14, 2012
Rutledge Conference Center, Rutledge Building
1429 Senate Street, Columbia, SC 29201
1:00PM

I. Welcome
II. Introduction of Panel Members
III. Approval of Agenda
IV. Public Comment Period
V. Presentations and Discussion
VI. Other Business
VII. Adjournment
AGENDA

South Carolina Dyslexia Task Force

LOCATION & TIME
Thursday, August 9, 2012
Rutledge Conference Center, Rutledge Building
1429 Senate Street, Columbia, SC 29201
2:00PM

I. Welcome
II. Introduction of Panel Members
III. Approval of Agenda
IV. Public Comment Period
V. Presentations and Discussion
VI. Other Business
VII. Adjournment
AGENDA

South Carolina Dyslexia Task Force

LOCATION & TIME
Thursday, September 13, 2012
Rutledge Conference Center, Rutledge Building
1429 Senate Street, Columbia, SC 29201
1:00PM

I. Welcome
II. Introduction of Panel Members
III. Approval of Agenda
IV. Public Comment Period
V. Presentations and Discussion
VI. Other Business
VII. Adjournment
AGENDA
South Carolina Dyslexia Task Force

LOCATION & TIME
Thursday, October 11, 2012
Rutledge Conference Center, Rutledge Building
1429 Senate Street, Columbia, SC 29201
1:00PM

I. Welcome
II. Approval of Agenda
III. Public Comment Period
IV. Discussion and Revision of Dyslexia Taskforce Recommendations
V. Other Business
VI. Adjournment
AGENDA

South Carolina Dyslexia Task Force

LOCATION & TIME
Thursday, November 15, 2012
Rutledge Conference Center, Rutledge Building
1429 Senate Street, Columbia, SC 29201
1:00PM

I. Welcome
II. Approval of Agenda
III. Public Comment Period
IV. Discussion and Revision of Dyslexia Taskforce Recommendations
V. Other Business
VI. Adjournment
AGENDA

South Carolina Dyslexia Task Force

LOCATION & TIME
Thursday, December 13, 2012
Rutledge Conference Center, Rutledge Building
1429 Senate Street, Columbia, SC 29201
1:00PM

I. Welcome
II. Approval of Agenda
III. Public Comment Period
IV. Discussion and Approval of Dyslexia Taskforce Recommendations
V. Other Business
VI. Adjournment
Special Education Services
In South Carolina
February, 2012

IDEA

IDEA is an amended version of the Education for All Handicapped Children Act (P.L. 94-142), passed in 1975

1997 reauthorized (P.L. 105-17), further defining children’s rights to educational services and strengthening the role of parents in the educational planning process for their children.

Last amended in 2004

Individuals with Disabilities Education Act (IDEA)

- Federal law
- Guarantees a free and appropriate public education (FAPR) for every child with a disability
- This means that for all children in public school, his/her education should be at no cost to and should be appropriate for his/her age, ability and developmental level.

10 Basic Steps in Special Education
Step 1: Identification

- Child Find and Evaluation
  - There are two ways in which a child can be evaluated under the regulations of IDEA:
    - The parent can request an evaluation by calling or writing the director of special education or the principal of the child's school.
    - The school system may also determine an evaluation is necessary. If so, they must receive written permission from the parent before the evaluation can be conducted.

Evaluation

- An evaluation should be conducted by a multidisciplinary team or group of persons, which must include at least one teacher or other specialist with specific knowledge in the area of suspected disability.
- The child must be assessed in all areas related to the suspected disability, including but not limited to, health, vision, hearing, communication abilities, motor skills, and social and/or emotional status.

2. Evaluation

- The evaluation can be done when the child is first suspected of having a disability (pre-placement evaluation)
- or when the child's level of functioning changes in one or more areas (re-evaluation).

Evaluation

- If the parents disagree with the results of the evaluation, they may choose to obtain an independent evaluation at public or private expense.
- A list of professionals that meet state requirements may be requested from the school, or the parent may request one. If the professional chosen meets appropriate criteria set up by the state, then the school must consider the evaluation in developing an IEP.
Evaluation

› A re-evaluation must take place at least every three years.
  - It may, however, be conducted more often if the parent or teacher makes a written request.
  - An evaluation may also be done in specific areas of concern.
› A re-evaluation of all areas of suspected need or one for particular areas may occur if a parent feels their child is not meeting the short-term objectives of the current IEP.

3. Eligibility

› IDEA requires that no single procedure be used as the sole criterion for determining an appropriate education program for a child.

Evaluation

› The evaluation (school or independent) should become the basis for writing the child's IEP. The IEP must be prepared and agreed upon before placement decisions are made. The placement may not be chosen first, then the IEP written to fit the placement decision.
› Evaluation must be completed within 60 days.

Eligibility

› Children between the ages of 3 and 21, who meet the eligibility criteria in one of thirteen qualifying disabilities and who require special education services because of the disability can qualify for services under IDEA.
› Dyslexia falls under specific learning disability.
4. Meeting

- The IEP team gathers to talk about the child's needs and write the student's IEP. Parents and the student (when appropriate) are full participating members of the team.

Placement

- Determining the most appropriate placement is a two-step process:
  1. Determine level of functioning and associated needs by requesting an evaluation or re-evaluation through the school or an independent professional(s).
  2. In collaboration with school staff, service providers and school administrator, develop a well-defined and thorough IEP.

Placement

- The range of available placement options allows for the creation of unique educational placements for each child.

- Placement options range from:
  - Total inclusive settings (children with disabilities) receive their education alongside non-disabled peers
  - Pull-out programs for various parts of the day
  - Classes consisting only of students with disabilities
  - Special schools
  - Private placement in residential programs for children with disabilities.

Least Restrictive Environment (LRE)

- To the maximum extent possible, children with disabilities should be educated with their non-disabled peers.
- Placement options should begin with the regular or inclusive classroom.
- Children with disabilities do not have to start in a more restrictive or separate class and then "earn" the right to move to a less restrictive placement.
- If it is found that a regular education classroom would not meet the child's needs, even with support services, then another option may be pursued.
- The child with a disability must benefit from the placement.
LRE

- Educational placement should be determined individually for each child, based on that child's specific needs, not solely on the diagnosis or category.
- No one program or amount of services is appropriate for all children with disabilities.

6. IEP Written

- The IEP team gathers to talk about the child's needs and write the student's IEP. Parents and the student (when appropriate) are full participating members of the team.
- Before the school system may provide special education and related services to the child for the first time, the parents must give consent.
- The child begins to receive services as soon as possible after the IEP is written and this consent is given.

5. IEP is written

- The IEP includes:
  - Present levels of academic achievement and functional performance
  - Accommodations, modifications
  - Special education and related services

7. IEP Implemented

- The school makes sure that the child's IEP is carried out as it was written.
- Parents are given a copy of the IEP.
- Each of the child's teachers and service providers has access to the IEP and knows his or her specific responsibilities for carrying out the IEP.
- This includes the accommodations, modifications, and supports that must be provided to the child, in keeping with the IEP.
Provision of Services

› Varied and related to the needs of the student as a result of the disability.
› Adaptations, accommodations, and modifications need to be individualized for students, based upon their needs and their personal learning styles and interests.

Adapting Instruction

› Sometimes a student may need to have changes made in class work or routines because of his or her disability. Modifications can be made to:
  - what a child is taught, and
  - how a child works at school.

Special Education

› Definition: (§300.39)
› (3) Specially designed instruction means adapting, as appropriate to the needs of an eligible child under this part, the content, methodology, or delivery of instruction—

  › (i) To address the unique needs of the child that result from the child's disability; and

  › (ii) To ensure access of the child to the general curriculum, so that the child can meet the educational standards within the jurisdiction of the public agency that apply to all children. [§300.39(b)(3)]

Example:

Jack is an 8th grade student who has learning disabilities in reading and writing. He is in a regular 8th grade class that is team-taught by a general education teacher and a special education teacher. Modifications and accommodations provided for Jack's daily school routine (and when he takes state or district-wide tests) include the following:

› Jack will have shorter reading and writing assignments.
› Jack's textbooks will be based upon the 8th grade curriculum but at his independent reading level (4th grade).
› Jack will have test questions read/explained to him, when he asks.
› Jack will give his answers to essay-type questions by speaking, rather than writing them down.
Services

• Related Services
  • Such as:
    • Psychological services
    • Physical therapy
    • Occupational therapy

• Supplementary Services
  • Such as:
    • Adaptive equipment/materials
    • Assistive technology
    • Training for staff, student and/or parents

9. IEP Reviewed

• The child's IEP is reviewed by the IEP team at least once a year, or more often if the parents or school ask for a review. If necessary, the IEP is revised.

• If parents do not agree with the IEP and placement, they may discuss their concerns with other members of the IEP team and try to work out an agreement.
  • There are several options, including additional testing, an independent evaluation, or asking for mediation, or a due process hearing.
  • They may also file a complaint with the state education agency.

8. Progress is Monitored and Reported

• The child’s progress toward the annual goals is measured, as stated in the IEP.

• His or her parents are regularly informed of their child’s progress at least as often as parents are informed of their nondisabled children’s progress.

10. Reevaluation

• At least every three years the child must be reevaluated.
  • This evaluation is sometimes called a “triennial.”
  • Its purpose is to find out if the child continues to be a child with a disability, as defined by IDEA, and what the child’s educational needs are.
  • However, the child must be reevaluated more often if conditions warrant or if the child’s parent or teacher asks for a new evaluation.
Effective Practices

- A critical part of improving educational results for children with disabilities is using effective practices in the classroom and across the school.
- Special educators have built an impressive knowledge base across 30 years of experience individualizing instruction for children and administering special education and related services in our schools.

Areas to Include

- Understanding Universal Design
- Using what works
- Addressing general education curriculum
- Instructional options such as co-teaching and other inclusive practices
- Investigating the peer-reviewed research
DO STUDENTS WITH DYSLEXIA AUTOMATICALLY QUALIFY FOR SERVICES UNDER THE IDEA?

No, but some students with dyslexia may need instruction provided in a specialized manner and more than the support, interventions, services, and accommodations provided through the general education program.

HOW IS IT DETERMINED IF A STUDENT WITH DYSLEXIA QUALIFIES UNDER THE IDEA?

A parent or school district may refer a student with dyslexia for an evaluation to determine if the student’s dyslexia may be so severe or may be accompanied by other disorders or disabling conditions that cause the student to need special education and related services to benefit from his or her educational program.

SPECIFIC LEARNING DISABILITY

... means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia.

[34 C.F.R. § 300.8(b)(10)]
Although the IDEA indicates that dyslexia is an example of a learning disability, the evaluation requirements for eligibility in 34 C.F.R. § 300.309(a)(1) specifically designate the following areas for a learning disability in reading:
- basic reading skill,
- reading fluency skills, and/or
- reading comprehension.

How does a parent challenge a determination that a student with dyslexia does not qualify for services under the IDEA?

- State Complaint Process
  - Procedural Violations
  - Filed with the South Carolina Department of Education (SCDE) and the School District
- Mediation
  - Voluntary
  - Both Parties Must Agree to Participate
  - Filed with the SCDE
- Due Process Hearing
  - Evaluation Process and Eligibility Determination
  - Filed with the School District and a Copy Provided to the SCDE

What are the other possible considerations?

- Americans with Disabilities Act Amendments of 2008 (ADAA)
- Section 504 of the Rehabilitation Act of 1973 (Section 504)
The definition of "disability" is broadened in the ADAA. While the amendments do not change the basic three-prong definition of disability, it institutes several provisions that broaden the term.

The three factors in the definition are:
1) the nature and severity of the impairment; 2) the duration or expected duration of the impairment; and 3) the permanent, long-term impact or expected impact of the impairment.

The amendments to the ADAA also affect Section 504 of the Rehabilitation Act of 1973 (Section 504).

Broadening the protected class of individuals under the ADAA also broadens the class of protected individuals under Section 504.

The ADAA adds an expanded, non-exhaustive list of major life activities to the definition of "disability" under Section 504.

- caring for oneself
- performing manual tasks
- seeing
- hearing
- eating
- sleeping
- walking
- standing
- lifting
- bending
- speaking
- breathing
- learning
- reading
- concentrating
- thinking
- communicating
- working
Because the definition of disability in the ADAA applies to Section 504, all the examples of major life activities listed in the amendments to the ADAA also constitute major life activities under Section 504.

The Section 504 regulation does not set out specific circumstances that trigger the obligation to conduct an evaluation; the decision to conduct an evaluation is governed by the individual circumstances in each case.

For example, consider a student with dyslexia who is achieving good grades in academically rigorous classes and has been determined not to need special education and related services. School districts should not assume that this student's academic success necessarily means that the student is not substantially limited in a major life activity and therefore is not a person with a disability.

Marilyn J. Bartlett, Plaintiff-Appellee, v. N.Y. State Board of Law Examiners
2001 U.S. Dist. LEXIS 11926

The U.S. Court of Appeals for the Second Circuit ruled that an individual with dyslexia who is seeking testing accommodations for the New York bar exam is not barred from being a person with a disability under the ADA, even if the coping techniques she has learned over the years are taken into account.
In an earlier decision the Second Circuit ruled that because of her dyslexia, the applicant’s ability to decode words in a timely fashion was significantly restricted as compared to the average person in the general population and therefore, she was a person with a disability under the ADA. The court did not take into account Bartlett’s history of self-adjustments, which allowed her to achieve roughly average reading skills on some measures, in determining whether her dyslexia substantially limited the major life activities of reading or learning.

The decision was appealed to the Supreme Court which returned the case to the Second Circuit for review in light of the Supreme Court’s 1999 rulings that mitigating measures should be taken into account in determining whether an individual is a person with a disability. The court agreed that Bartlett lacks automaticity and is a slow reader but returned the case to the district court for a determination as to whether, considering all the evidence, she was substantially limited in the major life activity of reading as compared to most people.

Judge Sotomayor, ruled in favor of Ms. Bartlett again. In a 99 page opinion, the Judge wrote, "Plaintiff's experts have convinced me that the extra time provided to learning disabled applicants merely levels the playing field and allows these individuals to be tested on their knowledge; it does not provide them with an unfair advantage."

In passing the ADAA in 2008, the managers of the Senate bill supported the ruling from the Second Circuit and rejected the assumption that an individual with a specific learning disability who performs well academically cannot be substantially limited in activities such as learning, reading, writing, thinking, or speaking.

The ADAA now requires the substantially limits determination to be made without regard to any ameliorative effects of mitigating measures.

School districts and agencies may not exclude a student from consideration of possibly having a disability simply because the student uses assistive devices, medication, or specific techniques to reduce the effects of a disabling condition.

Text to speech software
Talking calculators

Neither the ADAA nor Section 504 obligates a school district to provide aids or services that the student does not need. The school district must conduct an evaluation before making a determination. Further, even if the student does not qualify for additional services and accommodations, the student is still a person with a disability and protected by Section 504’s general nondiscrimination prohibitions and Title II’s statutory and regulatory requirements.

See 28 C.F.R. § 35.130(b); 34 C.F.R. §§ 104.4(b), 104.21-23, 104.37, 104.61 (incorporating 34 C.F.R. § 100.7(e)).
Dislecksia: The Movie

Location:
Zen Studio Greenville
924 South Main Street
Greenville, SC

Date:
Friday April 27
4pm
Admission: $10

Director Will Be In Attendance
Panel Discussion to Follow Screening
What is Dyslexia?

South Carolina Dyslexia Task Force
Bill 241
April 19, 2012

Heidi High Bishop
Fellow/AOGPE and President, SC2DQA
Director of Transitions, Orton-Gillingham Teacher Training, and Outreach
Campbelltown Academy
531 Russell Road
Greenville, South Carolina 29615
864-244-8899
Providing Excellence in the Education of Dyslexic Children
www.camperdown.org
hbishop@camperdown.org

What is Dyslexia?

dys  difficulty with  lexa  words (written or spoken)
approximately 15-29% of the population has a language-based learning difference

If there are approximately 720,000 students in South Carolina public schools, based on these
statistics, up to 140,000 students in our public schools could be struggling, to some degree, with a
language-based learning difficulty. “During the 2009-2010 school year, only 6.65% of all students
received special education services, and 42.92% of those receiving special education services had an
SLD diagnosis.

Heidi High Bishop Fellow/AOGPE and President, SC2DQA
Director of Transitions, Orton-Gillingham Teacher Training, and Outreach
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many of these students end up dropping out of school and/or end up in our justice system due to their
difficulties and frustrations in the traditional classroom environment.

Between 20-43% of incarcerated juveniles have special education needs (Fink, 1993; Morgan, 1979; Rutherford, Nelson, & Wolford, 1985). Many of them have language-based learning disabilities.

In adult correctional facilities between 30-50% of the inmates need special education (Fink, 1990; Dowling, 1991).

About The International Dyslexia Association (IDA)

The International Dyslexia Association (IDA) is a 501(c)(3)
non-profit, scientific, and educational organization dedicated to the
study and treatment of the learning disability dyslexia, as well as related language-based learning
differences.

We are the oldest such organization in the U.S. serving individuals with dyslexia, their families, and
professionals in the field. We have approximately 12,000 members - 60% in the field of education and 30%
are individuals with dyslexia or parents of children who are dyslexic.

We operate 44 Branches throughout the U.S. and Canada, and have 21 Global Partners in 18 countries.
The International Dyslexia Association is funded by private donations, membership dues, foundation
grants, sales of publications, our annual national conference, and other development efforts. IDA receives
no government funding. Our Board of Directors guide the Association by contributing their considerable
strengths to champion our Mission.
74% of the children who are poor readers in 3rd grade remain poor readers in the 9th grade. This means they can’t read as well as adults.

National Reading Crisis: Time for Action

This compelling video cites startling facts about declining U.S. literacy and urges you to join the movement to ensure that ALL young people receive a world-class education. Why? Because EVERY student deserves the chance to read, write and learn for a lifetime. The International Dyslexia Association encourages you to learn the facts and to help enact state literacy laws for a literate nation.

CRISIS: Learning to READ: EDUCATION FACTS from International Dyslexia Association

Which States Have Specific Dyslexia Laws

Did you hear?

Ohio just successfully passed an educational law that includes the actual word “dyslexia” as an accepted learning disability for its students. Ohio HB 96, which was passed on May 24, 2011 by a resounding vote of 94 to 1, includes dyslexia in its definition of learning disabilities, and will allow for students with dyslexia to be included in the list of students who are given special instruction at school.

What other states have passed or are working on passing legislation regarding dyslexia, in addition to general federal laws covering such learning differences like ADA, IDEA, NCLB?
States that have passed legislative Dyslexia Bills and Laws:

- Colorado has House Bill 1223, which passed May of 2008. (Annual Report)
- Kentucky 2010 HB199 Early Education Assessment and Intervention
- New Mexico - 2010 - HB 230 – Dyslexic Student Intervention
- Louisiana - 2010 - SCR 62 – Dyslexia Regulations
- Louisiana – 2010 – HR 185 – Dyslexia Study
- Louisiana – 2010 – SR 164 – Dyslexia Study
- New Mexico - 2010 – HB 182 – Dyslexia Study
- New Mexico – 2010 – HB 230 – Dyslexic Student Intervention
- Hawaii - 2010 - SCR 110 – HCR 129 – Students with Dyslexia, Working Group
- Kentucky 2010 HB109 Early Education Assessment and Intervention
- Louisiana – 2010 – SCR 387 Dyslexia Screening
- Texas – 2011 – SB 866 – Public School Students with Dyslexia
- Texas – 2011 – SB 867 – Adult Testing Accommodations

Legislation Pending Approval:

- New Jersey 2010-2011 AB 811 Dyslexia Awareness Instruction
- Oklahoma - 2010 – HB 1997 – Dyslexia Screening
- Kansas – 2011-2012 – SB 75 – Dyslexia Screening
- Illinois – 2011-2012 – HB 207 – Limits on Grade Retention
- Texas – 2011 – SB 866 – Public School Students with Dyslexia

Research legislative activities related to dyslexia across the United States visit [http://www.dyslegia.com](http://www.dyslegia.com) or contact Dyslexia and various IDA Branches and state searches.

**IDA Position Statement: Dyslexia Treatment Programs**

The IDA Board of Directors and IDA Branches are frequently asked to endorse or review treatment programs for the prevention and remediation of dyslexia and other reading-related problems. Although IDA does not publish formal reviews of programs, or endorse a specific approach, we do have an IDA Position Statement about treatment of dyslexia and direct you to the websites for additional information.

Importantly, IDA cautions parents who are looking for instructors, clinicians, schools, and programs to be very thorough in their review of programs and services that claim to treat dyslexia or “cure” dyslexia. In this era of Internet advertising, claims are frequently made about therapies and treatment programs that have little or no scientific merit. Claims about the effectiveness of some widely advertised programs and/or their components may be unsubstantiated by objective, independent research, and the practitioners of these programs and methods may not have met customary standards for training in the field.

**Difficulties Associated with Dyslexia**

**Visual and/or Auditory**
- Discrimination
- Sequencing
- Figure/ground (the ability to focus on one word on a blackboard filled with text [visual] or the ability to listen to the teacher’s voice above all distracting background noises [auditory])

**Spatial (Space)**
- Orientation (left/right)
- Sequencing (ordering of letters in spelling)

**Temporal (Time)**
- Orientation (today/yesterday)
- Sequencing (before/after)

**Listening to or Following Directions**

**Organization**

**Physical Coordination**
\textbf{Common Signs of Dyslexia}

\textbf{Pre-School Children}

\textit{The difficulties noted are often associated with dyslexia if they are unexpected for the individual's age, educational level, or cognitive abilities. Only a qualified diagnostician can test a person to determine if a person is truly dyslectic.}

- may talk later than most children
- may have difficulty pronouncing words, i.e., "augetti" for spaghetti, "mawn lower" for lawn mower
- may be unable to recall the right word
- may have difficulty with rhyming
- may have trouble learning the alphabet, numbers, days of the week, colors, shapes, how to spell and write his or her name
- may be unable to follow multi-step directions or routines
- fine-motor skills may develop more slowly than in other children
- often has difficulty separating sounds in words and blending sounds to make words

\textbf{Common Signs of Dyslexia}

\textbf{K – 4th Grade Students}

- may be slow to learn the connection between letters and sounds
- has difficulty decoding single words (reading single words in isolation)
- has difficulty spelling phonetically
- makes consistent reading and spelling errors, such as:
  - letter reversals – d for b, dog for bad
  - word reversals – tip for pit
  - transpositions – left for felt
- may confuse small words – at for to, said for and, show for gave
- relies on guessing and context
- may have difficulty learning new vocabulary
- may transpose number sequences and confuse arithmetic signs (+, –, ÷, =)
- may have trouble remembering facts
- may be slow to learn new skills, relies heavily on memorizing without understanding
- often uses an awkward pencil grip (flat, thumb hooked over fingers, etc.)
- may have poor "fine-motor" coordination
- may have difficulty planning, organizing, and managing time, materials, and tasks

\textbf{Common Signs of Dyslexia}

\textbf{5th – 8th Grade Students}

- may read slowly with many inaccuracies
- continues to spell incorrectly, frequently spells the same word differently in a single piece of writing
- may avoid reading and writing tasks
- may have trouble summarizing and outlining
- may have trouble with open-ended questions on a test
- may have difficulty learning a foreign language
- may have poor memory skills
- may work slowly
- may pay too little attention to details or focus too much on them
- may misread information
- may have an inadequate vocabulary
- may have an inadequate store of knowledge from previous reading
- may have difficulty planning, organizing, and managing time, materials, and tasks

\textbf{Common Signs of Dyslexia}

\textbf{High School and College Students}

- may read slowly with many inaccuracies
- continues to spell incorrectly, frequently spells the same word differently in a single piece of writing
- may avoid reading and writing tasks
- may have trouble summarizing and outlining
- may have trouble with open-ended questions on a test
- may have difficulty learning a foreign language
- may have poor memory skills
- may work slowly
- may pay too little attention to details or focus too much on them
- may misread information
- may have an inadequate vocabulary
- may have an inadequate store of knowledge from previous reading
- may have difficulty planning, organizing, and managing time, materials, and tasks
**Common Signs of Dyslexia**

*Adults*

- May hide reading problems
- May spell poorly; relies on others to correct spelling
- Needs writing; may not be able to write
- Uses very competent in oral language
- Relies on memory; may have excellent memory
- Often has good “people” skills
- Often is spatially talented; professions include, but are not limited to, engineers, architects, designers, artists, and craftspeople, mathematicians, physicists, physicians (especially surgeons and orthopedists), and dentists
- May have difficulty planning, organizing, and managing time, materials, and tasks

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**Frequently Asked Questions About Dyslexia**

**What causes dyslexia?**

The exact causes of dyslexia are still not completely clear, but anatomical and brain imagery studies show differences in the way the brain of a dyslexic person develops and functions. Moreover, most people with dyslexia have been found to have problems with identifying the separate speech sounds within a word and/or learning how letters represent those sounds, a key factor in their reading difficulties. Dyslexia is not due to either lack of intelligence or desire to learn; with appropriate teaching methods, dyslexics can learn successfully. Research shows that individuals inherit the genetic links for dyslexia. One of your immediate family members (parent, spouse, aunt, uncle, brother, sister, grandparent) is dyslexic. More than one of your children could also be dyslexic.

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**Frequently Asked Questions About Dyslexia**

**What is dyslexia?**

Dyslexia is a language-based learning disability. Dyslexia refers to a cluster of symptoms, which result in people having difficulties with specific language skills, particularly reading. Students with dyslexia usually experience difficulties with other language skills such as spelling, writing, and pronouncing words. Dyslexia affects individuals throughout their lives; however, its impact can change at different stages in a person’s life. It is referred to as a learning disability because dyslexia can make it very difficult for a student to succeed academically in the typical instructional environment, and in its more severe forms, will qualify a student for special education, special accommodations, or extra support services. Studies show that individuals with dyslexia process information in a different area of the brain than do non-dyslexics. Many people who are dyslexic are of average to above average intelligence.

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**Frequently Asked Questions About Dyslexia**

**Is there a cure for dyslexia?**

No, dyslexia is not a disease. There is no cure. With proper diagnosis, appropriate instruction, hard work and support from family, teachers, friend, and others, individuals who are dyslexic can succeed in school and later as working adults.

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**Are there other learning disabilities besides dyslexia?**

Dyslexia is one type of learning disability. Others include:

- **Dyscalculia** - a mathematical disability in which a person has unusual difficulty solving arithmetic problems and grasping math concepts.
- **Dysgraphia** - a neurological-based writing disability in which a person finds it hard to form letters or write within a defined space.
Are ADD and ADHD learning disabilities?

No, they are behavioral disorders. An individual can have more than one learning or behavioral disability. In various studies, as many as 50% of those diagnosed with a learning or reading difference have also been diagnosed with ADHD. Although disabilities may co-occur, one is not the cause of the other.

How common are language-based learning disabilities?

15-20% of the population have language-based learning disabilities. Of students with specific learning disabilities receiving special education services, 70-80% have deficits in reading. Dyslexia is the most common cause of reading, writing, and spelling difficulties. Dyslexia affects males and females nearly equally, and people from different ethnic and socio-economic backgrounds as well.

Can individuals who are dyslexic learn to read?

Yes, if children who are dyslexic get effective phonological training in kindergarten and 1st grade, they will have significantly fewer problems in learning to read at grade level than do children who are not identified or helped until 3rd grade.

74% of the children who are poor readers in 3rd grade remain poor readers in the 9th grade. This means they can't read well as adults.

It is never too late for individuals with dyslexia to learn to read, process and express information more efficiently. Research shows that programs utilizing multisensory structured language techniques can help children and adults learn to read.

Are there specific professions I should steer my child towards?

No, individuals can succeed in varied fields despite their dyslexia. Examples include:

Ann Bancroft - 1st woman in history to cross the ice to both the North and South Poles
David Boies - high-profile trial lawyer
Erin Brockovich - real-life heroine who exposed a cover-up by a major California utility that was contaminating the local water supply
Stephen J. Cannell - author and Emmy Award-winning TV producer and writer
Whoopi Goldberg - actress and comedian

What are the effects of dyslexia?

The impact that dyslexia has is different for each person and depends on the severity of the condition and the effectiveness of instruction or remediation. The core difficulty is with word recognition and reading fluency, spelling, and writing. Some dyslexics manage to learn early reading and spelling tasks, especially with excellent instruction, but later experience their most debilitating problems when more complex language skills are required, such as grammar, understanding textbook material, and writing essays.

People with dyslexia can also have problems with spoken language, even after they have been exposed to good language models in their homes and good language instruction in school. They may find it difficult to express themselves clearly, or to fully comprehend what others mean when they speak. Such language problems are often difficult to recognize, but they can lead to major problems in school, in the workplace, and in relating to other people. The effects of dyslexia reach well beyond the classroom.

Dyslexia can also affect a person’s self-image. Students with dyslexia often end up feeling “dumb” and less capable than they actually are. After experiencing a great deal of stress due to academic problems, a student may become discouraged about continuing in school.
**Frequently Asked Questions About Dyslexia**

*How do I know if my child is dyslexic?*

If your child exhibits several of the characteristics listed in "Common Signs of Dyslexia" and the difficulties are unexpected for the child’s age, educational level, or cognitive abilities, you’ll want to have your child tested by an educational diagnostician or a team of trained professionals.

It is important to note that the "Common Signs" are indicators, not proof, of dyslexia. The only way to verify that an individual is dyslexic is through testing by a qualified examiner.

According to Dr. Maryanne Wolf, Tufts literacy expert who has pioneered groundbreaking research that has led to advances in dyslexia testing and treatment, the brain never evolved to read. Rather, reading reveals how the brain "rearranges older structures devoted to linguistic, perceptual and cognitive regions to make something new." Children with dyslexia have a range of difficulties that prevent this, but are often gifted in other areas, including all forms of pattern-finding, art, and architecture. She points out that many successful artists, sculptors, radiologists, and entrepreneurs have a history of dyslexia, and children and adults with dyslexia often think "outside the box."

"Dyslexia is not a sickness, but a different arrangement of the brain's circuits. In pre-literate times, people with dyslexia were the heroes, the builders. In contemporary times, the child who cannot read feels like they are totally different than the rest of the world," Wolf says. "Our job is to rescue the original child," she adds, noting that identifying dyslexia early can help ward off childhood depression. The most important goal, she explains, is to "preserve children's belief in themselves, so they can go on to contribute their many gifts to society."

*Tufts literacy expert Maryanne Wolf has pioneered groundbreaking research that has led to advances in dyslexia testing and treatment.*

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**Sources**


Research studies sponsored by the National Institute of Child Health and Human Development, National Institutes of Health, Bethesda, MD.

Camperdown Academy; Greenville, SC. [www.camperdown.org](http://www.camperdown.org)

Academy of Orton-Gillingham Practitioners and Educators; Amenia, NY [www.ortonacademy.org](http://www.ortonacademy.org)

The International Dyslexia Association, Baltimore, MD [www.interdys.org](http://www.interdys.org)
What is dyslexia?
The student who struggles with reading and spelling often puzzles teachers and parents. This student receives the same classroom instruction that benefits most children, but continues to struggle with some or all of the many facets of reading and spelling. This student may have dyslexia.

The International Dyslexia Association [IDA] and the National Institutes of Health adopted the following definition in 2003:

Dyslexia is a specific learning disability that is neurobiological in origin. It is characterized by poor spelling and decoding abilities. These difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede the growth of vocabulary and background knowledge. (Lyon, Shaywitz, and Shaywitz, 2003)

What are the National Statistics on dyslexia?
• Fifteen to twenty percent of the population is affected by dyslexia. Dyslexia exists on a continuum of severity, from poor spelling to a total inability to read. (The National Institutes of Health)
• Individuals may inherit the genetic links for dyslexia, and at least half of the identified cases of dyslexia have a genetic predisposition for this disorder of learning. (Pennington, Shaywitz, Olsen)
• Research supports the essential role of early identification and appropriate instruction in preventing and alleviating the symptoms of dyslexia. (Torgesen, Foorman, Wise)
• Unremediated dyslexia is associated with documented functional brain differences visible in imaging studies. These differences may be “normalized” if instruction is effective. (IDA, NIH)
• Children with a family history and/or early history of speech and language delays are at high risk.

What are the common characteristics of dyslexia?
• Difficulty acquiring and using oral and written language
• Difficulty in phonological awareness, including segmenting, blending and manipulating sounds in words
• Difficulty mastering the alphabetic principle and basic decoding skills (mapping sounds to letters)
• Slow, inaccurate, or labored oral reading (lack of reading fluency)
• Difficulty acquiring age appropriate sight word recognition skills
• Difficulty learning to spell accurately
• Oral language skills often stronger than written language skills
• Difficulty learning and retaining multi-syllabic vocabulary required for mastery of academic content
• Limited reading comprehension due to weak decoding, word recognition and fluency skills

What instruction is appropriate for dyslexia?
• Individuals with dyslexia require direct, explicit and systematic instruction in both oral and written language
• Even if a student’s problem is not so severe as to require special education, classroom supports and accommodations are often necessary for the student to benefit fully from classroom and supplemental instruction
• Explicit instruction in the code of written language (the letter-sound system) is critical
• Structured, multi-sensory delivery of language content is characteristic of effective programs
• Individuals with dyslexia may require instruction of greater intensity and duration than typically developing readers and writers
• Individuals with dyslexia require research-based instruction in all five components of reading (phonemic awareness, phonics, fluency, vocabulary and comprehension) as well as writing and spelling
• Because instruction is a complex undertaking, teachers who provide instruction and remediation should be trained and supervised in the use of the program or approach selected.
How does dyslexia fit in an RTI model?

According to the Colorado Department of Education’s Practitioner’s Guide to Implementation: “RTI is a comprehensive system of tiered interventions for addressing the full range of student needs” (p.1). [http://www.cde.state.co.us/cdegen/downloads/RtIGuide.pdf](http://www.cde.state.co.us/cdegen/downloads/RtIGuide.pdf) Inherent in this model is the idea that research based instruction will be used, students’ progress will be continually monitored, and individual strengths and needs will be addressed. Since dyslexia exists on a continuum of severity, each student’s needs will be served by a varying degree of intensity required to produce increased academic outcomes.

The RTI model is predicated on:

- High quality standards-based instruction
- Evidenced based materials
- Universal screening of all students
- Continuous progress monitoring
- Problem solving and instructional decision making

The intent of this model is that each student has access to instruction of sufficient intensity to ensure adequate progress.

What are the implications for long term management of dyslexia?

Dyslexia is a life-long characteristic. Students respond to instruction in varying degrees. But, most students continue to need support and/or accommodations with writing, study skills, reading lengthy assignments, foreign language learning, and mathematical computation skills even if remediation of basic reading skills is successful. Parents, students, and teachers should have access to current, research-based information about dyslexia and related learning problems to aid in decision making and the management of students’ academic careers.

Where can I find more resources on this subject?

**Websites:**
- Florida Center for Reading Research: [http://www.fcrf.org/](http://www.fcrf.org/)
- Great Schools: [http://www.greatschools.net/](http://www.greatschools.net/)

**Books:**
Information from US States about Dyslexia
Compiled by Ann Whitten, SC Dyslexia Task Force

(Aiken television program called “Education Matters: Understanding Dyslexia” with guest Ann Whitten can be seen at www.edmatt.com. In the menu along the top, click on “videos” to see the archived programs.)

Two prominent members of the U.S. Congress have formed the Congressional Dyslexia Caucus to raise awareness of dyslexia and help foster policy change for people with dyslexia. The caucus was formed just weeks ago by Rep. Bill Cassidy (LA-06) and Rep. Pete Stark (CA-13). As parents of children working to triumph over dyslexia, they are acutely aware of the many hurdles they must overcome to reach their full potential.

As of 2011, 12 states have specific statewide dyslexia laws: California, Colorado, Hawaii, Kentucky, Louisiana, Mississippi, New Jersey, New Mexico, Ohio, Texas, Virginia, and Washington.

Four more states have dyslexia laws working through the legislative process: Arkansas, Kansas, Oklahoma, and Wisconsin. South Dakota does not have a state law, but does have a statewide dyslexia handbook.


Dyslegia: http://www.dyslegia.com/, New US and State Laws about Dyslexia and Reading Education. Look along the menu at the top of the page for listing of State Dyslexia Laws.

State Dyslexia Handbooks:


Mississippi: http://www.mde.k12.ms.us/acad/id/curriculum/laer/dyslexia.html


Laws or Other Information from States with Laws:

Colorado: House Bill 08-1223 requires that teachers be trained to effectively support children with literacy challenges including dyslexia.
Many school districts in Texas have their own manuals. Here are two samples:

**Victoria Independent School District (Texas):**

**Mabank Independent School District (Texas):**

**Washington State Law Passed:**

**Colorado State Policy**

**Fast Facts on Dyslexia—Colorado Dept. of Education**
http://www.cde.state.co.us/cdesped/download/pdf/FF-Dyslexia.pdf

Other organizations and resources to learn about Dyslexia:

**International Dyslexia Association:**  www.interdys.org

**Learning Disabilities Association:**  www.ldamerica.org

**LD Online:**  www.ldonline.org

**Reading Rockets:**  www.readingrockets.org

**Get Ready to Read:**  www.getreadytoread.org

**Florida Center for Reading Research:**  www.fcrr.org

**National Center for Learning Disabilities:**  www.nclld.org

**Recent Information about a Task Force like ours:**

*New Jersey Reading Disabilities Task Force to Hold Public Hearing Seeking Ideas, Experiences on Students Who Struggle with Reading*

**Trenton, NJ** – The New Jersey Reading Disabilities Task Force will conduct a public hearing on April 30, 2012, at 100 Riverview Plaza, Trenton, NJ. The purpose is to provide the general public with an opportunity to present their ideas and personal experiences so that they may be considered by the task force as it compiles information for its report to the Governor in July.

The meeting, scheduled for 6:00 – 8:00 p.m., will be held in the conference room on the first floor of the building. Parking is available. Members of the public will be granted three minutes each to present testimony so that all participants can be heard. In addition, the task force will accept written statements during the hearing or via mail addressed to: Reading Disabilities Task Force, Office of Literacy, NJDOE, P.O. Box 500, Trenton, NJ 08625-0500. The task force is an 11-member group appointed by the governor to research current services available to New Jersey’s students who struggle with learning to read. The task force members have been meeting monthly to conduct the research, share ideas, form recommendations and reach out for information.
Reading Strategies For All

Gina Maya
South Carolina Reading Council of the
International Reading Association

Reading...a REAL workout for your brain!
1. Understand the way speech sounds make up words.
2. Focus on printed marks (letters and words).
3. Connect speech sounds to letters.
4. Blend letter sounds smoothly into words.

Workout...
5. Control eye movements across the page.
6. Build images and ideas.
7. Compare new ideas with what is already known.
8. Store the ideas in memory.

I'M TIRED!
**BIG Five**  
National Reading Panel Report - 2000  
- Phonemic Awareness  
- Phonics  
- Comprehension  
- Vocabulary  
- Fluency

**Must Be...**  
- Systematic - skills taught in a planned, logically progressive sequence  
- Explicit - the teacher states clearly what is being taught and models effectively how it is used by a skilled reader

**Phonemic Awareness**  
The ability to hear and remember the order of the sounds that the letters make in words.
**Phonics**

The ability to match the sounds the letters make to the written symbols on a page, and to decode them as words, quickly and accurately.

**Vocabulary**

The words we need to know to communicate with others.

Four types: listening, speaking, reading, and writing

**Comprehension**

The ability to understand and remember the concepts read.
Fluency

The quick, efficient and accurate decoding of words, read rapidly and with expression with little conscious attention to the task, and high automaticity.

Balanced Literacy Approach

- Shared Reading - Big Book
- Reader's Workshop
  - Mini-lessons, Independent Reading, Conferences
- Writer's Workshop
  - Mini-lessons, Independent Writing, Conferences
- Guided Reading
- Assessment, Assessment, Assessment

Questions???
What is dyslexia?
The student who struggles with reading and spelling often puzzles teachers and parents. This student receives the same classroom instruction that benefits most children, but continues to struggle with some or all of the many facets of reading and spelling. This student may have dyslexia.

The International Dyslexia Association [IDA] and the National Institutes of Health adopted the following definition in 2003:

Dyslexia is a specific learning disability that is neurobiological in origin. It is characterized by poor spelling and decoding abilities. These difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede the growth of vocabulary and background knowledge. (Lyon, Shaywitz, and Shaywitz, 2003)

What are the common characteristics of dyslexia?
• Difficulty acquiring and using oral and written language
• Difficulty in phonological awareness, including segmenting, blending and manipulating sounds in words
• Difficulty mastering the alphabetic principle and basic decoding skills (mapping sounds to letters)
• Slow, inaccurate, or labored oral reading (lack of reading fluency)
• Difficulty acquiring age appropriate sight word recognition skills
• Difficulty learning to spell accurately
• Oral language skills often stronger than written language skills
• Difficulty learning and retaining multi-syllabic vocabulary required for mastery of academic content
• Limited reading comprehension due to weak decoding, word recognition and fluency skills

What are the National Statistics on dyslexia?
• Fifteen to twenty percent of the population is affected by dyslexia. Dyslexia exists on a continuum of severity, from poor spelling to a total inability to read. (The National Institutes of Health)
• Individuals may inherit the genetic links for dyslexia, and at least half of the identified cases of dyslexia have a genetic predisposition for this disorder of learning. (Pennington, Shaywitz, Olsen)
• Research supports the essential role of early identification and appropriate instruction in preventing and alleviating the symptoms of dyslexia. (Torgesen, Foorman, Wise)
• Unremediated dyslexia is associated with documented functional brain differences visible in imaging studies. These differences may be “normalized” if instruction is effective. (IDA, NIH)
• Children with a family history and/or early history of speech and language delays are at high risk.

What instruction is appropriate for dyslexia?
• Individuals with dyslexia require direct, explicit and systematic instruction in both oral and written language
• Even if a student’s problem is not so severe as to require special education, classroom supports and accommodations are often necessary for the student to benefit fully from classroom and supplemental instruction
• Explicit instruction in the code of written language (the letter-sound system) is critical
• Structured, multi-sensory delivery of language content is characteristic of effective programs
• Individuals with dyslexia may require instruction of greater intensity and duration than typically developing readers and writers
• Individuals with dyslexia require research-based instruction in all five components of reading (phonemic awareness, phonics, fluency, vocabulary and comprehension) as well as writing and spelling
• Because instruction is a complex undertaking, teachers who provide instruction and remediation should be trained and supervised in the use of the program or approach selected.
How does dyslexia fit in an RTI model?

According to the Colorado Department of Education’s Practitioner’s Guide to Implementation: “RTI is a comprehensive system of tiered interventions for addressing the full range of student needs” (p.1). http://www.cde.state.co.us/cdegen/downloads/rtiguide.pdf Inherent in this model is the idea that research based instruction will be used, students’ progress will be continually monitored, and individual strengths and needs will be addressed. Since dyslexia exists on a continuum of severity, each student’s needs will be served by a varying degree of intensity required to produce increased academic outcomes.

The RTI model is predicated on:

- High quality standards-based instruction
- Evidenced based materials
- Universal screening of all students
- Continuous progress monitoring
- Problem solving and instructional decision making

The intent of this model is that each student has access to instruction of sufficient intensity to ensure adequate progress.

What are the implications for long term management of dyslexia?

Dyslexia is a life-long characteristic. Students respond to instruction in varying degrees. But, most students continue to need support and/or accommodations with writing, study skills, reading lengthy assignments, foreign language learning, and mathematical computation skills even if remediation of basic reading skills is successful. Parents, students, and teachers should have access to current, research-based information about dyslexia and related learning problems to aid in decision making and the management of students’ academic careers.

Where can I find more resources on this subject?

Websites:
- The International Dyslexia Association-Rocky Mountain branch: http://www.dyslexia-rmbida.org/
- The International Dyslexia Association: http://www.interdys.org/
- Florida Center for Reading Research: http://www.fcrr.org/
- Great Schools: http://www.greatschools.net/
- National Center for Learning Disabilities: http://www.ncld.org/
- National Research Center for Learning Disabilities: http://www.nrcld.org/

Books:
Information from US States about Dyslexia
Compiled by Ann Whitten, SC Dyslexia Task Force

(Aiken television program called “Education Matters: Understanding Dyslexia” with guest Ann Whitten can be seen at www.edmatt.com. In the menu along the top, click on “videos” to see the archived programs.)

Two prominent members of the U.S. Congress have formed the Congressional Dyslexia Caucus to raise awareness of dyslexia and help foster policy change for people with dyslexia. The caucus was formed just weeks ago by Rep. Bill Cassidy (LA-06) and Rep. Pete Stark (CA-13). As parents of children working to triumph over dyslexia, they are acutely aware of the many hurdles they must overcome to reach their full potential.

As of 2011, 12 states have specific statewide dyslexia laws: California, Colorado, Hawaii, Kentucky, Louisiana, Mississippi, New Jersey, New Mexico, Ohio, Texas, Virginia, and Washington.

Four more states have dyslexia laws working through the legislative process: Arkansas, Kansas, Oklahoma, and Wisconsin. South Dakota does not have a state law, but does have a statewide dyslexia handbook.


Dyslegia: http://www.dyslegia.com/, New US and State Laws about Dyslexia and Reading Education. Look along the menu at the top of the page for listing of State Dyslexia Laws.

State Dyslexia Handbooks:

Texas:

Mississippi:
http://www.mde.k12.ms.us/acad/id/curriculum/lar/dyslexia.html

Washington:

South Dakota

Laws or Other Information from States with Laws:

Colorado: House Bill 08-1223 requires that teachers be trained to effectively support children with literacy challenges including dyslexia.
Many school districts in Texas have their own manuals. Here are two samples:

**Victoria Independent School District (Texas):**

**Mabank Independent School District (Texas):**

**Washington State Law Passed:**

**Colorado State Policy**

**Fast Facts on Dyslexia—Colorado Dept. of Education**
http://www.cde.state.co.us/cdesped/download/pdf/FF-Dyslexia.pdf

**Other organizations and resources to learn about Dyslexia:**

**International Dyslexia Association:**  www.interdys.org

**Learning Disabilities Association:**  www.ldamerica.org

**LD Online:**  www.ldonline.org

**Reading Rockets:**  www.readingrockets.org

**Get Ready to Read:**  www.getreadytoread.org

**Florida Center for Reading Research:**  www.fcrr.org

**National Center for Learning Disabilities:**  www.ncld.org

**Information about a Task Force like ours:**

*New Jersey Reading Disabilities Task Force to Hold Public Hearing Seeking Ideas, Experiences on Students Who Struggle with Reading*

**Trenton, NJ —** The New Jersey Reading Disabilities Task Force will conduct a public hearing on April 30, 2012, at 100 Riverview Plaza, Trenton, NJ. The purpose is to provide the general public with an opportunity to present their ideas and personal experiences so that they may be considered by the task force as it compiles information for its report to the Governor in July.

The meeting, scheduled for 6:00 – 8:00 p.m., will be held in the conference room on the first floor of the building. Parking is available. Members of the public will be granted three minutes each to present testimony so that all participants can be heard. In addition, the task force will accept written statements during the hearing or via mail addressed to: Reading Disabilities Task Force, Office of Literacy, NJDOE, P.O. Box 500, Trenton, NJ 08625-0500. The task force is an 11-member group appointed by the governor to research current services available to New Jersey’s students who struggle with learning to read. The task force members have been meeting monthly to conduct the research, share ideas, form recommendations and reach out for information.
Video recordings of all SC Dyslexia Taskforce meetings are available at
http://ed.sc.gov/events/.
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