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GRADES K–12

The Complete Learning Disabilities Handbook

Ready-to-Use Strategies & Activities *for* Teaching Students with Learning Disabilities

THIRD EDITION

Joan M. Harwell • Rebecca Williams Jackson

Jossey-Bass Teacher

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—RWJ

This is dedicated to my daughter Jakki, who encourages me.

—JH

I dedicate this book to my family, my rock.

—RWJ

About the Authors

Joan Harwell has more than 40 years of experience as a regular classroom teacher and a special education teacher for students with learning disabilities in San Bernardino, Calif. She was also a special education mentor teacher. After retirement from full-time teaching, she served as a field work supervisor for student teachers and intem.

Rebecca Williams Jackson is an educational specialist who received her master's degree in education from Harvard University. She has guided parents and students for over ten years, in the classroom and in private practice. She currently works as an educational consultant and advocate.

About This Book

The Complete Learning Disabilities Handbook, Third Edition, covers the field of learning disabilities from research to practice, including summaries of important laws, recent research in the field, and dozens of reproducible worksheets. This book is a collaboration of two experts in the field of education: a master teacher with over forty years of experience and an educational specialist who graduated from the Harvard Graduate School of Education. The book covers many aspects of working with children with learning disabilities, from causes and assessment to classroom management and lesson planning.

Equally useful for special educators or general education teachers, the book includes practical information that all teachers need in order to address the increasingly diverse needs of the students in their classroom.

Topics covered include the following:

- An overview of learning disabilities
- Tips for teaching at-risk students
- Classroom management strategies
- Solutions to specific problems (including attention deficits, dyslexia, poor social skills, low self-esteem, and other common classroom problems related to learning disabilities)
- Guidelines for interventions in specific academic areas
- Advice for working with learning disabled adolescents and adults
- Tips for successful collaboration with parents

Chapter 1

An Overview of the Field of Learning Disabilities

Leonardo da Vinci (1452–1519)

Italian sculptor, painter, architect, engineer
Was believed to be learning disabled; used "mirror writing"

Contributions:

Painting: *Last Supper*
Mona Lisa
The Adoration of the Magi

Drawing: Illustrated his anatomical observations; designed helicopters, bicycles, pumps, and military weaponry

Learning disability (LD) is a term currently used to describe a group of neurological conditions that interfere with a person's learning. Under the umbrella called LD, there are disorders related to listening, speaking, reading, reasoning, and mathematical calculation. Individuals with LD have intelligence in the near average, average, or above-average range. Because these individuals do not appear to be different, difficulties are not expected. The impact of the conditions may range from mild to severe. As we expand our knowledge of learning disabilities, we have come to realize that learning disabilities may also include an attention-deficit component, a socioemotional component, and perhaps emotional issues.

Unlike physical disabilities, learning disabilities are not so obvious and have been referred to as the "hidden handicap." Sometimes these disabilities go unrecognized by parents, teachers, and physicians. As a result, individuals with learning disabilities may be thought of as "underachievers," "lazy," or "weird."

Learning disabled individuals have to work harder to succeed. They receive more negative feedback regarding their work. They may experience feelings of frustration, anger, depression, anxiety, and worthlessness.

Individuals with LD need early identification, sound remedial teaching appropriate to their needs, personal and family counseling, continuous training in social skills, vocational guidance, and on-the-job coaching.

History of Learning Disabilities

The field of learning disabilities is relatively young. Historically, the learning disabled person may not have been singled out in school; perhaps those with learning difficulties dropped out of school or went to work. With the technological revolution of the 1950s came a demand for an educated workforce that is adept at working with technology, machinery, and scientific study. Geographic mobility, an increase in international exposure, and the sudden spurt in technology are among many factors that have changed the scope of the education and work prospects for people with learning disabilities.

Dynamic social changes in society are putting pressure on schools to do a better job educating all students, especially as different tracking systems and measurement agents have demonstrated the numbers of students graduating from high school and other schools. Numerous studies point to the fact that almost a quarter of students who enter high school don't graduate.

Prior to 1937, there was no recognition of learning disabilities. In 1937, Samuel Orton, a neuropathologist, used the term "strephosymbolia" to describe a problem he had observed in children with reading difficulties, namely, the reversals of symbols, such as *b* and *d*, or words, such as *saw* and *was.* He thought that this might be caused by the failure of one hemisphere of the brain to establish dominance over the other, which he assumed resulted in mirror images of words and symbols. He noted that there seemed to be a continuum of reading disability ranging from mild cases to severe cases. The Orton Dyslexia Society was named for him.

The look-say method of learning to read in the early 1940s resulted in a high degree of failure to acquire reading skills. Samuel Orton, Anna Gillingham, Bessie Stillman, Romalda Spalding, and Grace Fernald responded to the need by developing alternative methods to teach students who couldn't learn to read by memorizing sight words. Despite their pioneering efforts from 1940 to 1960, most students with learning disabilities were thought to be slow learners. It was rare that they received any special help. If they did, they were usually put into classes for the educably retarded.

Research findings in the 1960s were disturbing. Many children who had been classified as retarded were found to have normal intelligence when tested in a nonverbal format. William Cruickshank suggested that their progress was being hindered by deficits in perception and deficits in attention.

A group of concerned parents of children who had difficulty reading met in Chicago in 1963 to discuss the needs of their children. At that time, doctors referred to these children as being "minimally brain damaged" (MBD). These parents objected to the use of that label. Samuel Kirk, who was at this meeting, suggested a new term, "learning disabled." The parents adopted the new term and established the parent organization Association of Children with Learning Disabilities (ACLD) and began to demand services for their children.

Shortly thereafter, the International Council for Exceptional Children created a division of the organization to address the needs of children with learning disabilities. By the late 1960s, education responded. Special education resource rooms were opened. Students were grouped for instruction according to their needs. Special educators tried to work on children's perceptual deficits and to help them reduce their distractibility. Research in animal and human behavior by B. F. Skinner and others led to a very different approach, behavior modification, which became very popular in education during the 1960s.

Attempts to classify learning disabilities into LD subtypes began in the 1970s with the works of Elena Boder, Byron Rourke, and Linda Siegel, and have continued since. The most significant event of the 1970s was the passage of Public Law 94-142 (the Education of All Handicapped Children Act) by Congress in 1975. It guaranteed that each handicapped child, age three to twenty-one, would receive a "free and appropriate" education in the "least restrictive environment" possible. This law became known as the "mainstreaming" law. Children with LD were to be educated in regular classrooms unless the nature and severity of their disability was so great that it could be demonstrated that they could not make progress in regular classes. Each school was given the services of a resource specialist.

Public Law 94-142 had one enormous shortcoming: it did not provide school districts with adequate monies to provide the services it mandated. At the time of its passage, it was presumed that approximately 2 percent of schoolchildren would require services. By 1987, almost 5 percent of schoolchildren qualified for services under the LD category.

Early in the 1980s, educational endeavors changed focus. Less effort was devoted to remediating perceptual deficits, and the focus shifted to skills

development. About the same time, there was resurgence in research interest in learning disabilities. New technologies, such as magnetic resonance imaging (MRI) and positron emission tomography (PET), were making it possible, for the first time, to map electrical activity and blood flow in the brains of living subjects as they performed various educational tasks.

In the late 1980s, the Regular Education Initiative (REI) encouraged special education and regular education to join resources. The initiative said that students who had been served in pullout programs would be better served by their general education teachers in regular classrooms, if their teachers had help from special education personnel. "Inclusion" was the buzzword. In classes where inclusion was a success, it attests to the flexibility and cooperation of the two teachers involved, because this is truly team teaching. Resource specialists were encouraged to spend more time with regular teachers consulting and collaborating about students' special needs.

Late in the 1980s, researchers suggested that the true causes of reading disability were deficits in phonological awareness, phonological encoding, and phonological retrieval abilities. (See the work of J. K. Torgesen and Paula Tallal.) This research states that training in phonemic awareness and systematic phonics instruction are necessary for at-risk and reading disabled students.

In 1990, Public Law 94-142 was retitled and expanded. It is now called the Individuals with Disabilities Education Act (IDEA), Public Law 101-476. IDEA further refined the definition of a learning disability:

> *"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, which may manifest itself in an imperfect ability to listen, think, speak, read, write, spell or to do mathematical calculations. This term includes such conditions as perceptual handicaps, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. The term does not include children who have learning problems which are primarily the result of visual, hearing, or motor handicaps, of mental retardation, of emotional disturbance, or of environmental, cultural, or economic disadvantage.*
>
> *(U.S. Office of Education, Federal Register)*

This definition reflects the historical development of the field. The definition also states who is included and who will be excluded from special education services under the label "learning disabled."

Many educators argue that the excluded child is being unfairly deprived of essential services. For example, there are children whose IQs fall between 75 and 85 who desperately need and would benefit from more

help, but do not get it because they do not fall into any category of special education. Likewise, the child whose parents move every few months is in desperate need of remedial help, but many schools have no programs available to address such needs.

Although IDEA requires that a child fit a standard profile in order to receive additional services, Section 504, a civil rights act, was designed to help students who might not qualify under IDEA regulations. (See Chapter Three for a more in-depth discussion of legislation.)

Nationwide, school performance statistics are mixed. Arguing for continued funding, the September 2007 NCLB Report Card to Congress indicated "continued growth and gains by America's schoolchildren, particularly among younger and minority students." The report lists increased reading scores for fourth graders and higher math scores for both fourth and eighth grades. However, the report does not detail, or even address, students with special needs. In fact, the researcher must be clever and diligent to find government data for the learning disabled child. For instance, in 2005 the Department of Education's testing arm (the National Assessment of Educational Progress) published the *NAEP 2004 Trends in Academic Progress: Three Decades of Student Performance in Reading and Mathematics.* This report follows reading and math scores since the early 1970s. Their findings, again not breaking out learning disabilities, show a relatively flat line of scores: "the average reading score at age 9 was higher in 2004 than in any previous assessment year [9 points higher on a 500-point scale]. The average reading score at age 13 was not significantly different in 2004 from the average score in 1999 (the most recent previous assessment year), although it was higher than the average score in 1971. At age 17, there was no statistically significant difference between the average score in 2004 and the average score in 1971 or 1999." (National Assessment of Educational Progress, 2005, data added.)

Other key points indicate the need for serious attention:

- Only 70 percent of students in the United States graduate from high school in four years.
- One in ten schools fail to graduate 60 percent of their entering freshmen.
- 50 percent of adults who had below-basic reading skills were unemployed in 2003.

The status of education in the United States was the subject of a government report titled *A Nation at Risk,* published in 1983. Following this report, parents blamed teachers, and teachers blamed parents. The length of the school day and school year were slightly increased, but achievement scores continued to be poor through the 1990s.

At the turn of the century, a number of distinct trends have emerged:

- Reexamination of our educational theories and practices. One example of this is the movement toward combining the Whole Language reading approach with phonemic awareness training and phonetic skills development into a program called Balanced Literacy.
- A proposal for the development of a uniform, national achievement testing program.
- Stricter credentialing standards for teachers.
- An end to the practice of social promotion and tightening of the standards for promotion and graduation.
- Recognition by industry that it has a responsibility to provide parents with more family leave time, child care on work premises, and compensated time off for parents to help in their children's classrooms.
- The demand for reduction in class size has begun to be translated into action.
- Questions about the wisdom of the "severe discrepancy clause," which prevents earlier remediation for all students who need it.
- A growing awareness that we need to provide more vocational training services in high schools for students who do not wish to pursue academic goals or cannot meet the standards for promotion.

In the year 2000, the No Child Left Behind (NCLB) legislation was introduced to help hold schools accountable for their governance practices and levels of student performance. Schools now must submit yearly "progress reports" to government entities to demonstrate that they are performing at an acceptable level. NCLB legislation allowed the government to step in and take action if a school does not show adequate yearly performance. If a school continues to flounder, the NCLB legislation allows the government to remove funding for the school or take over its leadership and governance by appointed personnel.

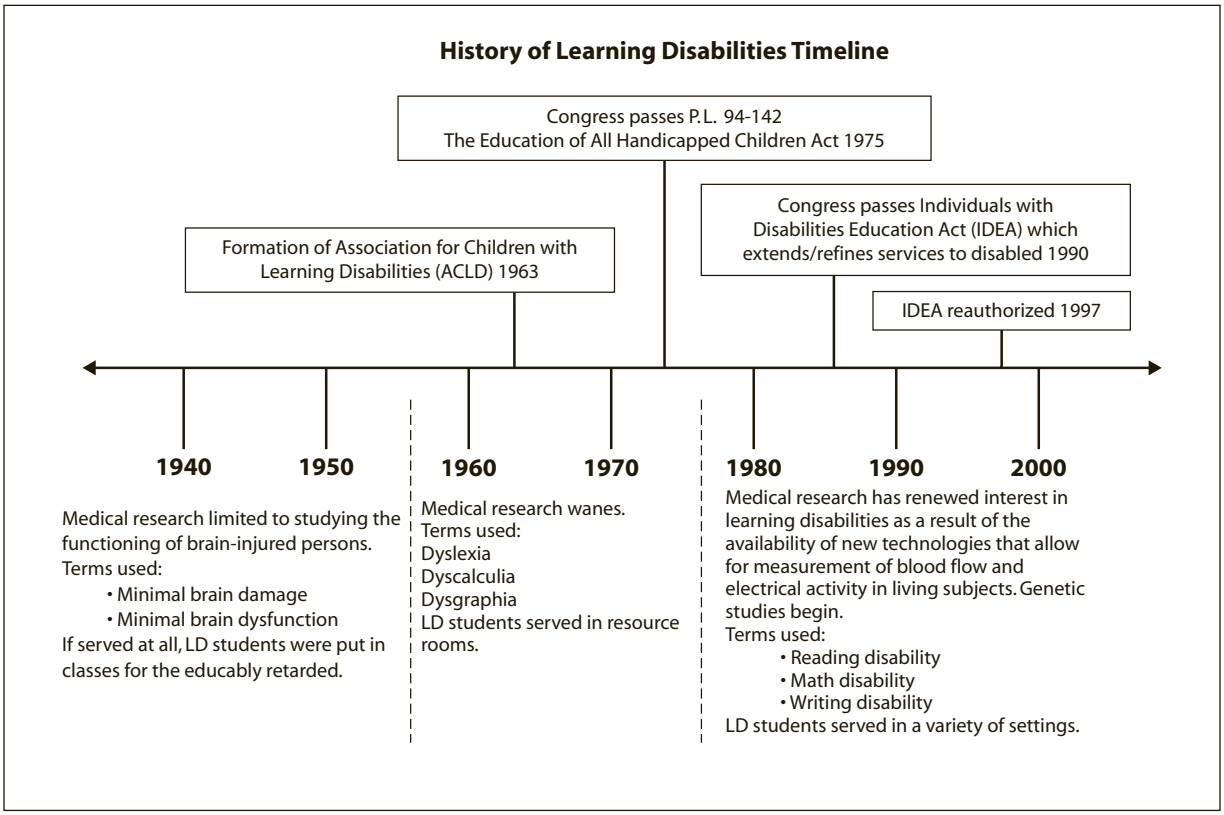
Causal Factors

Current literature and research reveal that a number of causes of learning disabilities are under study. Among them are the following:

1. There is a strong familial factor. It is not uncommon to find that several members of the same family have the condition. LD can be inherited.
2. The incidence of learning disabilities increases when there is a difficult pregnancy or delivery, or prematurity.

3. Certain prenatal conditions can harm the fetus, including any condition that interferes with the fetus receiving adequate oxygen or nutrition, and maternal use of cigarettes, drugs, or alcohol during pregnancy.
4. Postnatal or birth trauma, such as high and sustained fever, head trauma, or near-drowning, may cause learning problems.
5. Early childhood exposure to lead, aluminum, arsenic, mercury, and other neurotoxins have been linked to and, in some cases, shown to cause learning impairment. In fact, recent data show a definitive link between lead and a host of learning disorders. Exposure to even low levels of environmental lead and cigarette smoking during pregnancy can cause ADHD (Braun, Kahn, Froehlich, Auinger, and Lanphear, 2006).

Research shows that what happens during the years from birth to age four is critically important to later learning. The role of infant stimulation and cultural deprivation is being studied. We know that early in life, the brain starts to pare away brain cells that are not being used. We have learned that for language to develop properly, young children, birth to age three, need to be sung to, talked with, and read to. In many homes, there is little interactive conversation (soliciting and receiving both a verbal and physical response), which may contribute to phonological awareness deficits. This lack of interactive communication may in turn lead to reading failure.



Incidence

How many people have learning disabilities? We really don't know. Estimates range from 5 percent to more than 30 percent. It depends on whom you count. According to the U.S. Office of Education, 5 to 15 percent of the school population is identified as being LD, but data from twenty-six countries show that the incidence of dyslexia ranges from a low of 1 percent in Japan and China to a high of 33 percent in Venezuela. In the United States, 20 percent or more of students have trouble learning to read. Many children are evaluated and found to have a learning disability, but they do not qualify for special education services because they do not show a severe discrepancy between ability (intelligence) and performance. What constitutes a severe discrepancy varies from state to state—a child can qualify for service in one state but not qualify in another state. Even with such variation across states, national incidence rates break down as follows:

Between 3 and 8 percent of children in the United States have ADHD.

Approximately 1 in 150 children have autism, and 1 in 94 boys is diagnosed with autism.

Currently, more boys than girls are identified as being LD. The ratio is about 3 to 1. Many explanations have been offered for this, including that males seem to be more susceptible to brain damage, both prenatally and postnatally, and that males may be more disruptive in the classroom and therefore garner more attention from the teacher than females.

Primary Characteristics of Learning Disabilities

One indication of a learning disability is a perceptual deficit, and they are very common. Perceptual deficits are not caused by deficits in visual or hearing acuity. While glasses and hearing aids will help with acuity problems, they do not help persons who have perceptual problems. Perceptual deficits occur because the brain misinterprets sensory information. (Symptoms of perceptual deficits are discussed in Chapter Ten, and suggestions are given for helping students to cope with these deficits.)

Eighty percent of students identified as being LD have problems in the area of reading. It appears that deficits in phonological processing underlie difficulties learning to read. Research has shown that children who do not develop phonemic awareness will have reading difficulty later. (See the works of Stanovich, 1988, and Mann, 1991.) It has also been found that intervention programs that provide instruction in phonemic awareness and supply ample opportunities for decoding practice have been successful with at-risk and reading disabled children.