

Testing and Interventions for Dyslexia in Young Adolescent Students: What Every Middle School Counselor Should Know

Jack Cramer
T.C. Oshima

ABSTRACT

Young adolescent students with dyslexia present a perplexing challenge to middle school counselors because the disorder is so frequently misunderstood and undiagnosed. Once dyslexia is recognized and evaluated, interventions can improve the outlook for young adolescents. Middle school counselors are in a unique position to advocate for these students and to provide education to school personnel and the community.

TESTING AND INTERVENTIONS FOR DYSLEXIA IN YOUNG ADOLESCENT STUDENTS: WHAT EVERY MIDDLE SCHOOL COUNSELOR SHOULD KNOW

"It takes my thirteen-year old too long to do his homework – he just doesn't concentrate enough!" "She would be making better grades if she tried harder – she's fourteen now and should be more responsible. I think she's just lazy!" "He gives up easily and doesn't even try to do his schoolwork. I know he's smart, he's just trying to push my button!"

Counselors in middle schools are all too familiar with these observations and

complaints in relation to underachieving students. Although many factors could be involved with untimely work completion, poor schoolwork, poor academic motivation, and apparent "laziness" in young adolescent learners, middle school counselors need to be increasingly aware that undiagnosed dyslexia could quite possibly be a hidden factor.

Dyslexia Defined

What is dyslexia? Dyslexia is a term frequently misunderstood by middle school educators, the general public, and even school counselors. According to Shaywitz (2003), dyslexia is a reading disability that is characterized by poor decoding of written words, poor spelling, and problems with accurate and fluent word recognition. Dyslexia is a genetically-based disorder that primarily affects the language system in the brain. This deficit specifically affects phonology, i.e., understanding letter-sound correspondence. Dyslexia is unexpected in the sense that dyslexics have difficulties acquiring fluent reading skills despite their normal (and often superior) intelligence, having had exposure to adequate educational opportunities, and absence of visual and hearing impairment (Aaron & Joshi, 1992; Feifer & DeFina, 2000). Researchers such as Shaywitz and Shaywitz (2003) further emphasize that dyslexia, like

Jack Cramer, Ph.D., is a Licensed Psychologist in private practice in Roswell
T.C. Oshima, Ph.D., is an Associate Professor at Georgia State University in Atlanta.
Telephone 770-754-6101

other reading disabilities, exists on a continuum with varying degrees of impairment.

It is important for school counselors to note that public schools do not use the term "dyslexia" to determine special education eligibility. Instead, "learning disability in reading" is the designation used to indicate special education placement, with specific criteria used for this designation (e.g., discrepancies between IQ and achievement test scores with rigid cutoff scores to determine significant discrepancies). Researchers, such as Feifer and DeFina (2000), have pointed out that the public school definition of learning disability in reading has significantly underestimated the true prevalence of reading disabilities, with the majority of reading disabled youngsters not being identified. The limitations of this public school definition of learning disability in reading have serious implications for middle school students who are dyslexic.

Manifestations of Dyslexia in Middle School Students

Deficits in phonological skills continue to characterize middle school students who are dyslexic. Specifically, dyslexic students may learn to decode words accurately, but they are dysfluent in their reading, exhibit a slow reading rate, and display poor spelling skills. These deficits represent the lingering effects of a phonological deficit (Shaywitz, 2003). It is important to note that dyslexic students in middle school often are similar to normal readers their age on untimed tests of word recognition. However, due to their continuing phonological deficit which makes reading less automatic, more laborious, and slow, dyslexic young adolescents typically score much lower on reading tests that are timed (Shaywitz, 2003). On a daily, practical level, the increased amount of reading that is required in middle school and the increased demands to read extensively and efficiently, can be overwhelming to middle school dyslexic students, particularly in subjects that

require substantial reading. These increased reading demands frequently lead to academic decline. This decline can be mystifying to parents, middle school educators, and school counselors as young adolescent dyslexics may have performed adequately in elementary school, perhaps partly due to their average to above-average intellect.

Why Dyslexia is Frequently Underdiagnosed and Undetected

Dyslexia is commonly undetected and misdiagnosed in middle school students. This is due to prevailing myths surrounding the manifestation of dyslexia, and to the historical use of the intelligence-achievement test score discrepancy formula to determine learning disabilities in reading in the public schools.

Perhaps the most persistent myth regarding dyslexia is that these youngsters invariably reverse letters or words, see letters or words backwards, and exhibit underlying visual-perceptual deficits. According to numerous researchers (e.g., Aaron & Joshi, 1992; Shaywitz, 2003), reversals in writing and reading are not diagnostic indicators of dyslexia, and are irrelevant in making the diagnosis. Shaywitz (2003) points out that dyslexic readers oftentimes confuse the appropriate names or labels to letters and words, but that they do not actually see the letters and names backwards. Because the reversal myth is so prevalent, many dyslexic middle school students who do not make reversals are often dismissed as not dyslexic by parents and educators, oftentimes "diagnosing": "I know he's not dyslexic. He doesn't reverse letters." In a similar vein, numerous researchers have emphasized that dyslexia is not due to an underlying visual-perceptual or visual-motor deficit (e.g., Aaron & Joshi, 1992; Ingersoll & Goldstein, 1993), but is instead the result of underlying language-based, or phonological, deficits.

Other myths regarding dyslexia in middle school students include the belief that dyslexia affects mostly males, and that

dyslexia is usually outgrown by middle school (perhaps reflecting the mistaken idea that because middle school students seldom reverse letters when reading or writing, they must not be dyslexic). However, numerous researchers (e.g., Flynn & Rahbar, 1994; Lyon, 1994; Shaywitz, 2003) have shown that both males and females exhibit dyslexia at about the same rate. Also, one does not "grow out" of dyslexia. Indeed, over time good readers and poor readers maintain their relative positions along the continuum of reading ability (Shaywitz & Shaywitz, 2003).

School counselors need to be aware that the historical use of the IQ-achievement discrepancy formula in public schools to define learning disabilities in reading, and to identify students who are eligible for special education services, also has been instrumental in under diagnosing dyslexia in middle school students. This approach has been criticized by numerous researchers (e.g., Feifer & DeFina, 2000; Fletcher, Morris & Lyon, 2003), because it often results in poor readers who do not have an IQ-achievement discrepancy being ineligible for special education services. This means that young adolescent dyslexic/poor readers, if not exhibiting an IQ-achievement discrepancy, could also be misdiagnosed as not having dyslexia. Additionally, the tests used to determine the discrepancy in reading achievement may measure general reading abilities and not reading skills under timed conditions or reading rate/fluency skills.

Role of Middle School Counselors in Identifying Dyslexics

Middle school counselors can ask parents and teachers a series of questions as an informal screening assessment. Issues to be highlighted include:

1. Does the child read slowly, laboriously, and with great effort?
2. Is the child a poor speller?
3. Does the young adolescent have frequent problems with mispronunciation, naming objects, people or actions, and/or

- with word retrieval skills?
4. Is there a family history of reading difficulties?
5. Does the child read on his or her own for pleasure?
6. Did the young adolescent have delays in learning to read?
7. Did the child have delays in speech or language?
8. Has the young adolescent ever indicated that he or she is fearful or embarrassed about reading aloud in front of others?
9. Does the child do poorly in subject areas that require extensive reading?
10. Has the young adolescent ever been referred for learning disabilities evaluation in the past?

As indicated earlier, many students who are dysfluent readers (i.e., dyslexic) are not identified as needing special education because they do not meet the IQ-achievement discrepancy formulas. If parents or teachers indicate that several of these issues are significant, middle school counselors are advised to encourage parents to pursue further evaluation with professionals who specialize in dyslexia assessment such as reading specialists, psychologists, and learning disabilities teachers.

Just as important, middle school counselors need to be aware of what a quality dyslexia evaluation for middle school students entails. A comprehensive dyslexia evaluation for middle school students should include a measure of decoding skill; a test of reading comprehension, both timed and untimed; and a spelling test. A young adolescent should be tested for his or her sight word repertoire, as well as for the ability to read connected text aloud to measure fluency, reading rate, accuracy and comprehension. The ability to read a list of sight words and nonsense words quickly, automatically, efficiently, and under timed conditions, as well as the ability to name objects and use word retrieval skills, would also be important assessment domains. Administration of an intelligence test could

also provide useful information regarding a young adolescent's overall cognitive abilities. Individually administered intelligence tests involve tasks that are directly related to reading skills, e.g., working memory, vocabulary development, processing speed and general knowledge. Tests of phonological processing, which include tasks of the rapid naming of objects, letters, or numerals (rapid naming tasks have been shown to be correlated to reading rate and fluency), should also be included in the dyslexia evaluation for middle school students..

Implications for Middle School Counselors and Future Directions

Middle school counselors will need to advocate for school reform in the understanding and identification process of dyslexia in young adolescent learners as many of these students may not be receiving support. School counselors are in a powerful position to be effective change agents by taking an active role in disseminating information to school personnel, parents, and the community about middle school students with dyslexia. School counselors can provide education regarding the manifestations of dyslexia in middle school students and dispel myths that still surround the disorder via inservice training, workshops, and student support team meetings.

Middle school counselors must be familiar with community resource personnel and keep a referral list of reading specialists who specialize in the evaluation and treatment of dyslexia in middle school students. These professionals could also be invited to present workshops or inservice training to school staff.

Middle school counselors need to be advocates for these students by making teachers more sensitive to their handicapping conditions, e.g., slow reading rate and poor reading fluency. Counselors also must push for accommodations for these students, such as extra time to

complete assignments and tests, or modified assignments. For parents who are resistant or unable to seek assistance from a reading specialist, school counselors can also suggest a wide array of computer programs and web sites that are designed particularly for dyslexic middle school students (Shaywitz, 2003). The advantages of computer programs are that they are easily accessible and provide feedback. School counselors should emphasize to school personnel that dyslexic middle school pupils should not be forced to read aloud in the presence of their peers, or, at the very least, be allowed to preview and practice alone materials to be read aloud ahead of time. Counselors can assist teachers in arranging for dyslexic middle school students to tutor younger or less-skilled readers as a means of practicing reading skills, and enhancing self-confidence by the act of helping another individual

CONCLUSION

Middle school counselors are in a powerful position to make parents and educators aware that underlying dyslexia could be a prominent factor in academic underachievement. School counselors can communicate optimism regarding dyslexic middle school students' ability to improve their reading fluency. Research supports such optimism. For example, Mercer, Campbell, Miller, Mercer, & Lane (2000), using the Great Leaps Reading Program (Campbell, 1996), found that middle school students with severe reading difficulties were able to improve significantly their reading rate, fluency, and accuracy by use of this program. Above all, middle school counselors must educate school personnel and parents to avoid labeling underachieving young adolescent learners as "lazy" without examining the possibility of undiagnosed dyslexia.

REFERENCES

- Aaron, P.G., & Joshi, R.M. (1992). *Reading problems: Consultation and remediation*. New York: Guilford Press.
- Campbell, K.U. (1996). *Great Leaps reading program*. Micanopy, FL: Diarmuid.
- Feifer, S.G., & DeFina, P.A. (2000). *The neuropsychology of reading disorders: Diagnosis and intervention workbook*. Middletown, MD: School Neuropsych Press, LLC.
- Fletcher, J.M., Morris, R.D., & Lyon, G.R. (2003). Classification and definition of learning disabilities: An integrative perspective. In H.L. Swanson, K.R. Harris, & S. Graham (Eds.), *Handbook of learning disabilities* (pp. 30-56). New York: Guilford Press.
- Flynn, J., & Rahbar, M. (1994). Prevalence of reading failure in boys compared with girls. *Psychology in the Schools*, 31, 66-71.
- Ingersoll, B.D., & Goldsein, S. (1993). *Attention deficit disorder and learning disabilities: Realities, myths and controversial treatments*. New York: Doubleday.
- Lyon, G. R.. (1994). Critical issues in the measurement of learning disabilities. In G.R. Lyon (Ed.), *Frames of reference for the assessment of learning disabilities: New views on measurement issues* (pp. 3-13). Baltimore: Brookes.
- Mercer, C.D., Campbell, K.U., Miller, M.D., Mercer, K.D., & Lane, H.B. (2000). Effects of a reading fluency intervention for middle schoolers with specific learning disabilities. *Learning Disabilities Research & Practice*, 15, 179-189.
- Shaywitz, S. (2003). *Overcoming dyslexia: A new and complete science-based program for reading problems at any level*. New York: Alfred A. Knopf.
- Shaywitz, S.E., & Shaywitz, B.A. (2003). Neurobiological indices of dyslexia. In H.L. Swanson, K.R. Harris, & S. Graham (Eds.), *Handbook of learning disabilities* (pp. 514-531). New York: Guilford Press.