

# HOW WE APPROACH DYSLEXIA AT BIG HORN ELEMENTARY

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Big Horn, Wyoming



## WYOMING LAW

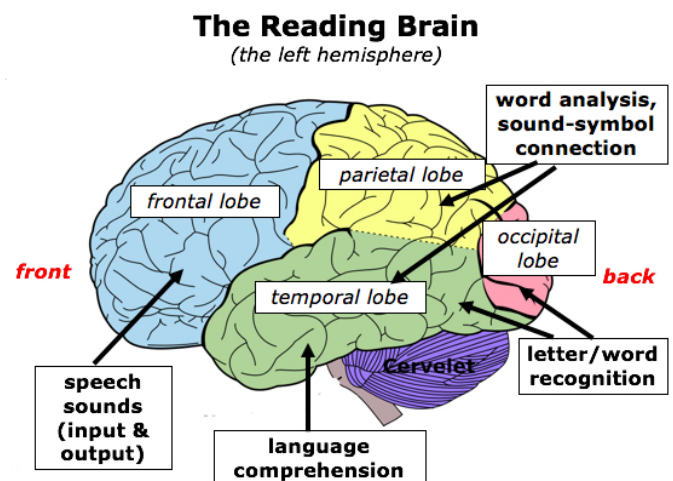
Forty states now mandate dyslexia screening in early elementary and Wyoming is one of them. Wyoming law regarding dyslexia screening is found in W.S. § 21-3-401 Reading Assessment and Interventions (HB297) and the Wyoming Department of Education Rules Chapter 6, Section 5(i)&(ii). It requires Wyoming schools to screen every student in grades K-3 for signs of dyslexia.

## A LITTLE BRAIN SCIENCE

Reading is not a natural process the way that speech is. Instruction is required to stimulate brain regions and build the neurological pathways that make reading possible. The ease in which these pathways are built in the brain varies largely between people. Individuals with dyslexia have neurological differences that make it more difficult to build the pathways needed for reading. It takes more time and repetition for these students to build those pathways. Some children seem to learn to read effortlessly because they have 'brain wiring' that easily connects. Again, this is completely unrelated to intelligence. Many very smart people have had to work hard to acquire the skills for reading and writing because their brains process language differently. It is great news that the brain is very malleable and it is entirely possible to stimulate the brain regions needed for reading and create connections between those regions in nearly all students.

## WHAT IS DYSLEXIA?

Dyslexia is a neurological difference in the brain of up to 20% of people. It creates an unexpected difficulty in reading and spelling for individuals with this difference. We say 'unexpected' because typically bright kids who would not be expected to have difficulty with reading, do find reading more difficult than one would expect based on their overall with-it-ness. Dyslexia occurs on a spectrum, meaning you may have slight effects of dyslexia or profound effects of dyslexia and anything in between. It's important to understand that dyslexia is not connected to intelligence. A person with low cognitive abilities can have dyslexia and a highly intelligent person can have dyslexia. Dyslexia is inherited and runs in families.



## ASSESSMENTS WE USE

- Shaywitz Dyslexia Screener
- Heggerty Phonological Awareness
- Aimsweb screeners: Letter Naming Fluency, Sound/Word Fluency, Nonsense Word Fluency, Oral Reading Fluency
- Diagnostic Assessments of Phonics and Spelling
- Family History Questionnaire

## WILL BHE DIAGNOSE DYSLEXIA?

No. The state mandated screening measures will identify students who are at risk for dyslexia but will not diagnose dyslexia. A single measure for dyslexia does not exist. However, the multiple assessments that we use to measure the various components of dyslexia may lead us to identify a student with a high probability of having dyslexia and that student will be prescribed interventions as such. If a child progresses through our RTI (Response to Intervention) process and is referred for a Special Education evaluation, it is possible that the student may be identified as having a Specific Learning Disability in Reading which includes dyslexia under IDEA (Individuals with Disabilities Education Act). However, in order to obtain a formal dyslexia diagnosis, an evaluation by a qualified educational psychologist or speech language pathologist who offers this service must be obtained.



## WHAT WE LOOK FOR

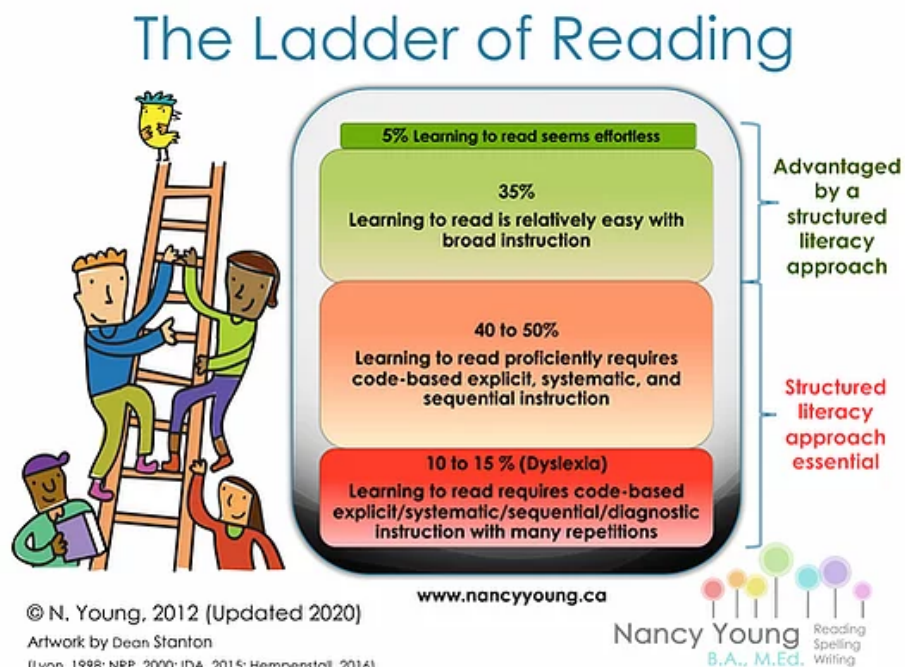
- Difficulty with language (not only articulation difficulties but also processing, retrieving, and storing auditory information)
- Interest and ability with phonological (rhyming, syllabication) and phonemic (individual speech sounds) awareness
- Difficulty with letter/sound correspondence
- Persistent confusion of visually similar letters
- Poor decoding and spelling with errors such as reversals (pats/past), omissions, (trip/tip) additions (sip/slip), substitutions (rip/rib) and transpositions (stop/pots)
- Leaving off word endings such as -s, -ed, -ing
- Frequent misreading of common sight words
- Poor automaticity of real word decoding
- Poor response to instruction and intervention
- Listening comprehension that is better than reading comprehension
- Secondary consequences: poor fluency and comprehension, lower volume of reading
- Emotional, behavioral, and social impacts including comments such as “School is hard,” “I don’t like reading,” “I don’t like school.”

# OUR RESPONSE TO DYSLEXIA

**Prevention** - Reading failure is preventable in almost every child. To prevent future reading failure, we will emphasize strengthening the areas of the brain required for reading in our early grades. This means lots of phonological and phonemic awareness training in preschool and K/1. Kids must become consciously aware that the words they can speak are made up of individual speech sounds that they will later map to the symbols we call letters. At BHE, our speech language pathologist visits Kinderboost and Kindergarten classrooms to help instruct our kids in this important sub-skill of reading. Classrooms K-2 include phonemic awareness training until kids become proficient at advanced skills. We will prepare our youngest students for reading by teaching them the alphabetic principle of connecting those speech sounds to symbols/letters and providing enough practice for them to obtain automatic recall of letter sounds and we will emphasize learning the phonetic code in grades K-2.

**Early Intervention** - If a child is having difficulty with the foundational skills of reading, we will not wait and see if they catch up in a later grade. Early identification of at-risk students is crucial and effective interventions early-on will allow our students with dyslexia\* to become skilled readers along with the rest of their peers.

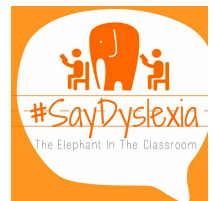
**Structured Literacy** - As recommended by the International Dyslexia Association (IDA), we deliver reading instruction with a structured literacy approach at BHE. This approach to reading emphasizes highly explicit and systematic teaching of all the important components of reading. This means that teachers will clearly explain and model the skills in a well-organized sequence rather than having students discover skills from exposure. Our structured lessons will include multi-modality or sensory activities as is recommended by the IDA. This structured approach is absolutely essential for our dyslexic kids but also benefits every student and allows skilled readers to access complex text earlier. The following graphic demonstrates how structured literacy benefits all children.



**Tiered Instruction** - We have a framework in place that allows us to provide high-quality interventions that vary in focus and intensity based on student needs. We provide high-quality structured literacy instruction at Tier 1 - the general classroom. We differentiate instruction in small groups at Tier 2 and at Tier 3 (our students facing the greatest challenges), interventions are intensified and vary in time, size of group, and the instructional plan, enabling dyslexic students to receive interventions tailored to their specific needs and rate of progress.

**Progress Monitoring** - It's important for our students at risk for dyslexia to be monitored bi-weekly or weekly if they are in Tier 3. We will use the results of these frequent checks to make decisions on whether or not their instruction is effective or should be modified,

**Culture Shift** - We are committed to changing our school culture surrounding dyslexia. This begins with educating parents, students and teachers alike about the brain difference we call dyslexia. Having honest conversations about dyslexia helps students understand how they learn as well as enables them to advocate for themselves as they progress through school and life. We want our dyslexic students to find success and feel confident about their futures. We want to equip them with the ability to read so that they can achieve any goal they have in mind. We want them to understand that just because reading is hard for them, it doesn't mean they can't achieve their dreams. At Big Horn Elementary, we work intentionally to give our students with dyslexia the life-changing ability to become successful readers.



\*While BHE does not diagnose dyslexia, we acknowledge the research that tells us that up to 20% of our students are likely have varying degrees of dyslexia, thus, the acceptance and use of the term 'our dyslexic students.'