

WEBINAR MATERIALS

"Specific Learning Disabilities Identification: Where We Are and What We Know"

December 3, 2009



presented by

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About the Presenter: Dr. Mather specializes in the areas of assessment, reading, writing, and learning disabilities. She has served as a learning disabilities teacher, a diagnostician, a university professor, and an educational consultant. She has published numerous articles and conducts workshops on assessment and instruction nationwide. Dr. Mather is a co-author of the Woodcock-Johnson III and has co-authored two books on interpretation and application of the WJ III: Woodcock-Johnson III: Reports, Recommendations, and Strategies (Mather & Jaffe, 2002) and Essentials of WJ III Tests of Achievement Assessment (Mather, Wendling, & Woodcock, 2001). In addition, she has recently co-authored the books: Learning Disabilities and Challenging Behaviors: A Guide to Intervention and Classroom Management (2nd ed.) (Mather & Goldstein, 2008), Evidence-based Interventions for Students with Learning and Behavioral Challenges (Morris & Mather, 2008), Essentials of Assessment Report Writing (Lichtenberger, Mather, Kaufman, & Kaufman, 2004), and Essentials of Evidence-based Academic Interventions (Wendling & Mather, 2009).

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SLD Identification: Where We Are and What We Know



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December 3, 2009

The Basic SLD Concepts from History

1. Processing deficits
2. Neurological dysfunction
3. Unexpected learning failure

Source:
Kavale, K. A., & Spaulding, L. S. (2008). Is response to intervention good policy for specific learning disability? *Learning Disabilities Research & Practice, 23*, 169-179.

“I like to define a learning disability as a psychological or neurological impediment to development of adequate perceptual or communicative behavior, which first is manifested in discrepancies among specific behaviors or between overall performance and academic achievement...” (p. 617).

Source: Arena, J. (1978). *An interview with Samuel Kirk. Academic Therapy, 13*, 617-620.

Two Basic Concepts attempting to Quantify “Unexpected Underachievement”

- Discrepancies among abilities (intra-individual differences)
- Discrepancy between overall ability and specific academic performance

Ability-Achievement Intra-Ability

A discrepancy between ability-achievement	A discrepancy among varying abilities
Does not clarify the reasons for failure	Helps clarify the reasons for failure
Unexpected underachievement relative to overall ability	Unexpected underachievement relative to other abilities
Focuses on full-scale scores	Focuses on factor, cluster, and subtest scores

General. The term 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 an 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.

Operational Criteria

- Definition of SLD:
A disorder in basic psychological processing
- How we operationalize it:
Ability-achievement discrepancy
Response-to-Intervention (RTI)

Operational Definitions of SLD

“Currently, operational definitions of SLD have either not worked well or have worked too well. The basic difficulty is found in the fact the operational definitions of SLD have been, in essence, developed ‘out of thin air.’” (p. 46).

Source: Kavale, K. A., Spaulding, L. S., & Beam, A. P. (2009). A time to define: Making the specific learning disability definition prescribe specific learning disability. *Learning Disability Quarterly*, 32, 39-48.

The biggest discrepancy that exists is between the LD definition and how we operationalize it.

Sources:

Hale, J. B., Naglieri, J. A., Kaufman, A. S., & Kavale, K. A. (2004). Specific learning disability classification in the new Individuals with Disabilities Education Act: The Danger of Good Ideas. *The School Psychologist*, 58 (1), 6-13, 29.

Kavale, K. A., Kaufman, A. S., Naglieri, J. A., & Hale, J. B. (2005). Changing procedures for identifying learning disabilities: The danger of poorly supported ideas. *The School Psychologist*, 59 (1), 16-25.

An ability- achievement discrepancy is no longer required but it is permitted

“(6) SPECIFIC LEARNING DISABILITIES.—
“(A) IN GENERAL.—Notwithstanding section 607(b), when determining whether a child has a specific learning disability as defined in section 607(b), a local educational agency shall not be required to take into consideration whether a child has a severe discrepancy between achievement and intellectual ability in oral expression, listening comprehension, written expression, basic reading skill, reading comprehension, mathematical calculation, or mathematical reasoning.
“(B) ADDITIONAL AUTHORITY.—In determining whether a child has a specific learning disability, a local educational agency may use a process that determines if the child responds to scientific, research-based intervention as a part of the evaluation procedures described in paragraphs (2) and (3).

The Major Pitfalls of Ability-Achievement Discrepancy

1. the disability is often measured by the ability measure
2. the focus is on the full-scale score rather than on well established factors
3. ability scores decline over time because of the SLD, as well as limited reading and reduced educational opportunities
4. prevents early intervention (a “wait-to-fail” model)

“Moreover, it seems probably that psychometric tests as ordinarily employed give an entirely erroneous and unfair estimate of the intellectual capacity of these children” (p. 582).

Source: Orton, S. T. (1925). Word-blindness in school children. *Archives of Neurology and Psychiatry*, 14, 581-615.

Performance on Specific Intellectual Abilities

"Sometimes children of good general intelligence show retardation in some of the specific skills which compose an intelligence test" (p. 22)

Source:

Monroe, M., & Backus, B. (1937). *Remedial reading*. Boston: Houghton Mifflin.

...the criterion set for the size of discrepancy that counts as a reading or writing disability is always arbitrary and varies widely among states and among schools within states. (pp.158-159)
Whether a child is or is not diagnosed as learning disabled depends on the state and the local criteria where a child lives or on the personal philosophy of an independent evaluator who assesses the child. (p. 164)

Source: Berninger, V. W. (1996). *Reading and writing acquisition: A developmental neuropsychological perspective*. Boulder, CO: Westview Press.

Though the formula method may have some appeal because it requires less clinical competence and judgment, the fact remains that reducing an important diagnostic decision to a mathematical equation gives a false sense of objectivity to a contrived procedure that is still essentially subjective (p. 274).

Source: Simpson, R. G., & Buckhalt, J. A. (1990). *School Psychology International*, 11, 273-279.

Why Would Students with SLD have an Ability-Achievement Discrepancy?

- Their abilities are better than their academic performance in specific domains (e.g., verbal abilities higher than reading, writing, or math).
- They have not received adequate help and intensive early intervention.
- They have strengths in specific areas that are measured by the ability test and weaknesses in areas measured by the achievement tests.

Verbal Ability as the Measure of Potential

“Children should be able to comprehend, or construct, the meaning of what is being read at a level consistent with their general verbal ability” (p.55).

Source: Torgesen, J. K. (2000). Individual differences in response to early interventions in reading: The lingering problem of treatment resisters. *Learning Disabilities Research & Practice, 15*, 55-64.

Specific learning disabilities are not ability-achievement discrepancies but some students with SLD will have discrepancies...

What Ability-Achievement Discrepancies Can Do

- Represent the concept of “unexpected underachievement.”
- Can be useful in cases of gifted students with SLD who obtain scores within the average range.
- Can provide insight into quickness of response to intervention.
- Can help provide justifications for accommodations (e.g., oral exams, books on CD).

“(6) SPECIFIC LEARNING DISABILITIES.—

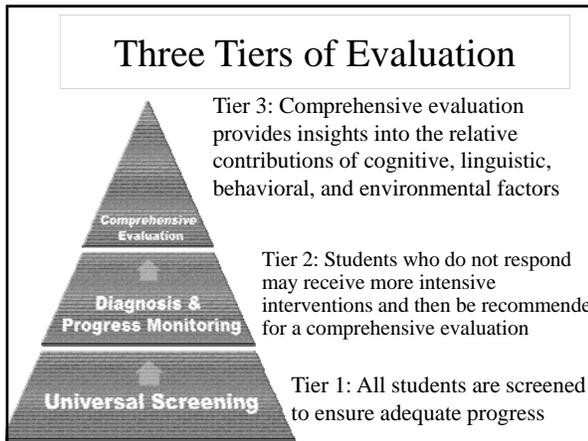
“(A) IN GENERAL.—Notwithstanding section 607(b), when determining whether a child has a specific learning disability, a local educational agency must take into consideration a discrepancy between achievement and ability in oral expression, listening comprehension, written expression, basic reading skill, reading comprehension, or mathematical calculation, or mathematical reasoning.

“(B) ADDITIONAL AUTHORITY.—In determining whether a child has a specific learning disability, a local educational agency may use a process that determines if the child responds to scientific, research-based intervention as a part of the evaluation procedures described in paragraphs (2) and (3).

Response to research-based intervention can be used as PART of the evaluation procedures.

Response to Intervention (RTI)

- Provides early intervention.
- May reduce the number of referrals.
- Attempts to monitor the progress of all students in the school and provide adequate, timely interventions.



Concern: Lack of flexibility in the system

Parents and teachers should be able to make a referral for a comprehensive evaluation any time during the RTI process.

- Many Possible Reasons for Limited Response besides SLD
- English language learners
 - Attention problems
 - Behavior problems
 - Limited prerequisite skills
 - Low language and reasoning abilities
 - Limited or ineffective instruction
 - Ineffective method for student

If applied in isolation, RTI methods will not increase diagnostic sensitivity and specificity, but will result in a generic “learning problems” category, comprising a considerable portion of the population.

Source:
Hale, J.B., Naglieri, J.A., Kaufman, A.S., & Kavale, K.A. (2004). Specific learning disability classifications in the new Individuals with Disabilities Education Act: The danger of good ideas. *The School Psychologist*, 58(1), 6–29.

As a field of study matures, its language gets more specific, not less. Less specific language or more general terms without an increase in more specific subterms is a pretty reliable indication of regression, not advances, in any field of work.

Source: Excerpted from e-mail sent to: spedpro-bounces@list.mail.virginia.edu, James Kauffman, Thursday, October 19, 2006, Title: Tiresome.

The Role of RTI

“RTI is best viewed as an instructional model, not an identification model” (p. 142)...“Ecological validity only serves to support RTI as a prereferral activity” (p. 143).

Source: Kavale, K. A., Kauffman, J. M., Bachmeier, R. J., & Lefever, G.B. (2008). Response-to-intervention: Separating the rhetoric of self-congratulation from the reality of specific learning disability identification. *Learning Disability Quarterly*, 31, 135-150.

What does RTI mean for...

Reading comprehension
Math problem solving
Written expression
Content area learning
Upper elementary and secondary students



Hasn't special education always been based upon the principles of RTI?

- Identify children who are struggling
- Determine why they are struggling
- Select interventions
- Monitor their progress
- Revise the interventions as needed
- Monitor progress

“When I was working as a school psychologist some 50 years ago and received a referral from a teacher about a child who was having trouble learning, the very first thing I did was to visit the teacher to inquire about the problem. I wanted to know what the child was having trouble with. I wanted to know what the teacher had tried that did not work and most importantly, I wanted to know what had been done that had worked.

At that time I had never heard of Response to Intervention (RTI) and I certainly would not have predicted that there were going to be initials to describe what has always been good practice, as a ‘new’ procedure” (p. 151).

Source: Zach, L. J. (2005). Déjà vu all over again: The current controversy over the identification of learning disability. *The School Psychologist*, 59, 151-155.

What RTI Can Do

- Be an effective component of the prereferral process.
- Raise awareness and application of the most effective interventions.
- Ensure that ineffective instruction is not the reason for a student’s difficulties.
- Encourage accountability for the progress of all students.
- Encourage problem solving when progress is limited.

**RTI does not tell us
WHY a student
does not RTI. RTI
doesn’t classify,
individualize, or
diagnose.**

Ability-Achievement	RTI
Requires a discrepancy between ability-achievement	Requires a discrepancy between classroom and actual performance
Doesn't clarify the reasons for failure	Doesn't clarify the reasons for failure
Unexpected underachievement relative to ability	Unexpected underachievement relative to evidence-based instruction
Within the child	The child within the environment

Identification Models that Only Use RTI

- Will produce numerous sources of measurement error
- Will threaten the validity of the SLD concept
- Will result in inaccuracy in identification
- May result in potential legal challenges

Source: McKenzie, R. G. (2009), Obscuring vital distinctions: The oversimplification of learning disabilities within RTI. *Learning Disability Quarterly*, 32, 203-215.

The Dangers of Sole Reliance on RTI for Identification of SLD

- The cause(s) of the limited response to treatment will not be well understood by teachers, parents, and the student.
- Implementation has only been widely explored for early reading
- SLD will be confused with all forms of poor learning and underachievement.
- The category of SLD will be eliminated.
- Individuals with SLD will be misunderstood and denied the accommodations and interventions they need to be successful.
- Students with above average abilities and SLD will not be identified.

People can have scores in the average range, and still have a specific learning disability

One has to consider:

Educational history

Educational opportunities

How the person functions on a daily basis

Labels

“...without a label we have no way of talking about a problem.”

Source: Johns, B. H., & Kauffman, J. M. (in press). Caution: Response to Intervention. *LDA Multidisciplinary Journal*.

“Some people may persist in claims that RtI does not result in labels for children, that only the instruction they receive is labeled. That may be a defensible claim if the person make it also claims that words mean nothing or do not actually refer to the child. But, if people make this argument, then we wonder why anyone would listen to them, simply because they have just argued that words are meaningless; or we wonder whether they really believe in the long run “child who receives Tier (choose your number or letter or other description) instruction” is a substantial improvement over “child who receives special education for a learning disability.”

Source: Johns, B. H., & Kauffman, J. M. (in press). Caution: Response to Intervention. *LDA Multidisciplinary Journal*.

Reducing the Number of Referrals

It is easy to reduce special education numbers-just delay or eliminate evaluations for special education placement, but that does not delay or eliminate disability.

Source: Kavale, K. A., Kauffman, J. M., Bachmeier, R. J., & Lefever, G.B. (2008). Response-to-intervention: Separating the rhetoric of self-congratulation from the reality of specific learning disability identification. *Learning Disability Quarterly*, 31, 135-150.

“The disconnect between the RTI model and the SLD construct creates the potential for diagnostic chaos” (p. 14).

Source: Kavale, K. A., Holdnack, J. A., & Mostert, M. P. (2005). Responsiveness to intervention and the identification of specific learning disability: A critique and alternative proposal. *Learning Disability Quarterly*, 28, 2-16.

“...we feel the real problem with RTI lies not in the procedures offered but rather the substantial leap of faith necessary to identify children with SLD because they did not respond” (p.756)

Source: Hale, J.B., Kaufman, A.S., Naglieri, J.A., & Kavale, K.A. (2006). Implementation of IDEA: Response to intervention and cognitive assessment methods. *Psychology in the Schools*, 43, 753-770.

“Thus, RTI cannot stand alone as a self-contained diagnostic process; RTI is best viewed as a screening procedure that identifies generalized learning problems with SLD determination requiring more in-depth evaluation” (p. 176).

Source:

Kavale, K. A., & Spaulding, L. S. (2008). Is response to intervention good policy for specific learning disability? *Learning Disabilities Research & Practice, 23*, 169-179.

RTI

- Response to Intervention
- Responsiveness to Intervention

Inadequate Response to Intervention

Limited Response to Intervention

When provided with good instruction aimed at their needs, children with SLD do learn...

“...RTI can only identify achievement differences when, in fact, valid SLD classification requires both achievement and cognitive ability information” (p. 145).

Kavale, K. A., Kauffman, J. M., Bachmeier, R. J., & Lefever, G. B. (2008). Response-to-intervention: Separating the rhetoric of self-congratulation from the reality of specific learning disability identification. *Learning Disability Quarterly, 31*, 135-150.

Students with SLD still need comprehensive evaluations that address cognitive and linguistic processes...

RTI and Comprehensive Evaluations

"If RTI is viewed as a prereferral activity, then the means to SLD identification becomes evident: comprehensive psychometric assessment...A student cannot simply be declared to be SLD at the end of RTI, but requires in-depth appraisal to determine whether or not SLD status can be documented and what might be the best means to proceed instructionally" (p. 175).

Source:
Kavale, K. A., & Spaulding, L. S. (2008). Is response to intervention good policy for specific learning disability? *Learning Disabilities Research & Practice, 23*, 169-179.

Individualized Assessment

The lack of individualization in assessment means that the essence of special education is lost and "...the SLD category becomes the convenient home for those who otherwise might be left behind (something that perverts the category and is consistent only with the fantasy world of NCLB)."

Kavale, K. A., Kauffman, J. M., Bachmeier, R. J., & Lefever, G.B. (2008). Response-to-intervention: Separating the rhetoric of self-congratulation from the reality of specific learning disability identification. *Learning Disability Quarterly, 31*, 135-150.

“To be effective, remedial instruction in reading must be preceded by careful diagnosis.”

Source:
 Monroe, M., & Backus, B. (1937).
Remedial reading. Boston: Houghton Mifflin.

	RTI	Comprehensive Assessment
Place in the evaluation process	Prereferral	Referral
Focus	Group	Individual
Type of evaluation	Screening and progress monitoring	Comprehensive
Nature of assessment	Simple and narrow	Complex and broad
Implementation	School-wide support	Specialists

	RTI	Comprehensive Assessment
Purposes	Identify low achievement	Identify and diagnose SLD
	Intervene early	Identify strengths and weaknesses
	Help children	Help children

Regulations IDEA 2004, August 14, 2006

§300.309(a)(2)(ii) permits consideration of:

The child exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to intellectual development, that is determined by the team to be relevant to the identification of a specific learning disability.

Special Disabilities

"A child may fail to learn to read or spell or achieve satisfactorily in music and yet be of adequate intelligence. In some children there is a close relation between ability in one direction and ability in another direction. Also in some children there is a close association between ability in some given direction and general intelligence. However, in other children this is striking disparity between ability in one subject and that in another or between achievement in some subject and general intelligence. Such discrepancies may appear between rather closely related abilities, such as reading and intelligence. We find, for instance, such combinations as a child who cannot read although he can comprehend material read to him and another child who presents just the reverse condition" (p. 43).

Source: Travis, L. E. (1935). Intellectual factors. In G. M. Whipple (Ed.), *The thirty-fourth yearbook of the National Society for the Study of Education: Educational Diagnosis* (pp. 37-47). Bloomington, IL: Public School Publishing Company.

"The child who does not achieve so well as would be expected in a certain direction may be regarded as having a special defect or disability. Such a defect, if persistent, usually prevents the child from making progress at school and may ultimately interfere with his adjustments and successes outside the school" (p. 43).

“The clearest expression of a special disability is consistently low scores on a series of tests in a given subject conjoined with average or superior scores on tests in other subjects. Such scores can be arranged in an ‘educational profile.’ For example, in case of a reading disability, a child might obtain scores placing him in the ninth grade in arithmetic, in the eighth grade in spelling, and in the third grade in reading. Here we would have evidence of a striking reading disability. An unevenness of achievement for another child might indicate just as striking a disability in arithmetic” (p. 43).

Forms of Disabilities

- Disorders of attention
- Perceptual disabilities (quickness of perception in number of stimuli that can be perceived within a limited time period)
- Deficiencies in visual and auditory memory spans
- Alexia or word-blindness (reading and writing)
- Aphasia (speech, writing)
- Agraphia (express thoughts in writing)
- Amusia (inability to sing in tune or distinguish musical sounds)

Source: Travis, L. E. (1935). Intellectual factors. In G. M. Whipple (Ed.), *The thirty-fourth yearbook of the National Society for the Study of Education: Educational Diagnosis* (pp. 37-47). Bloomington, IL: Public School Publishing Company.

“The single most important factor in planning for a child with a learning disability is an intensive diagnostic study. Without a comprehensive evaluation of his deficits and assets, the educational program may be too general, or even inappropriate. The diagnostic study should include an evaluation of sensory acuity, intelligence, language (spoken, read, written), motor function, educational achievement, emotional status, and social maturity” (p. 50).

“The implication is that it is necessary to have immediate access to all diagnostic findings because it is from these that the educational approach must be evolved. Sometimes teachers are required to begin remediation without adequate knowledge of the deficits and integrities. Although information can be obtained from personal contact with the child, precise planning is possible only when these observations are supplemented by detailed diagnostic information” (p. 51).

Source: Johnson, D. J. & Myklebust, H. R. (1967). *Learning disabilities: Educational principles and practices*. New York: Grune & Stratton.

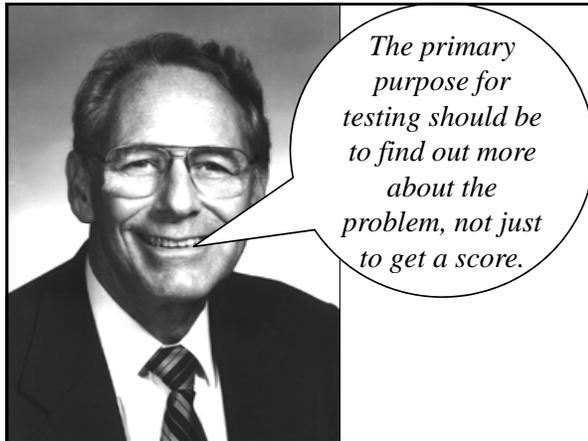
“Children with Developmental Imbalances are those who reveal a developmental disparity in psychological processes related to education ...” (p. 28).

“The key characteristic that identifies this child to the observer is the substantial *difference* between the worst and the best of his developing intelligences, or the substantial intraindividual differences noted within the child. The children with large developmental imbalances can be counted on to cause considerable difficulties in any educational program which is based on the assumption that a child’s developmental processes will be within narrow limits” (p. 29).

Source: Gallagher, J. J. (1966). Children with developmental imbalances: A psychoeducational definition. In W. M. Cruickshank (Ed.) *The Teacher of Brain-Injured Children* (pp. 23-43). New York: Syracuse University Press.

“The information provided by this patterning of abilities is much more important than his single mental age score or language scores. While his Binet mental level is listed as between five and six years, his internal variation from three to eight years is the more important educationally diagnostic information. It not only establishes the fact of developmental imbalance, but it locates the areas of specific disability..

Source: Gallagher, J. J. (1966). Children with developmental imbalances: A psychoeducational definition. In W. M. Cruickshank (Ed.) *The Teacher of Brain-Injured Children* (pp. 23-43). New York: Syracuse University Press.

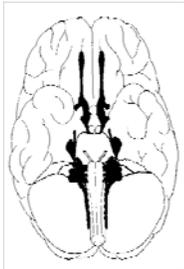


And to find more about the factors that will facilitate performance...

We shouldn't ask:
How smart you are...

but instead:
How are you smart?

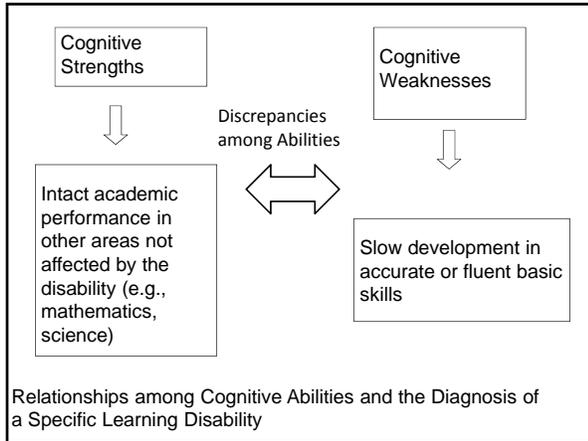
- H. Gardner



Cognitive Processing Assessment

"Cognitive processing assessment aligns diagnostic procedures with a clearly articulated SLD definitional component: a disorder in one or more of the basic psychological processes" (p. 144).

Source:
Kavale, K. A., Kauffman, J. M., Bachmeier, R. J., & Lefever, G.B. (2008). Response-to-intervention: Separating the rhetoric of self-congratulation from the reality of specific learning disability identification. *Learning Disability Quarterly*, 31, 135-150.



Specificity

“The addition of the adjective *specific* in describing LD was meant to imply that the poor academic performance experienced by students with LD emanated from a limited number of underlying deficits” (p. 245).

Source: Kavale, K. A., & Forness, S. R. (2000). What definitions of learning disability say and don't say. *Journal of LD*, 33, 239-256.

“Diagnosis is one thing; treatment is another. No one diagnosis applies to all cases; no one treatment will eradicate all trouble” (p. 117).

Stanger, M. A., & Donohue, E. K. (1937). *Prediction and prevention of reading difficulties*. New York: Oxford University Press.

Lessons from History

- A specific problem exists in cognitive, linguistic, or perceptual processes that affects academic development and achievement.
- Oral language and reasoning abilities are often more advanced than basic academic skills.
- Early identification and intervention are critical.
- SLD can occur in individuals of any level of intelligence.
- Both assessments and treatments must be individualized.

“If these tests will give us a basis from which we can start to understand a child’s difficulties, they will have justified the time spent on them. Anything which helps educators or parents to *understand* any phase of development or lack of development is of immeasurable value”
(p. 189).

Source:

Stanger, M. A., & Donohue, E. K. (1937). *Prediction and prevention of reading difficulties*. New York: Oxford University Press.

“Given the findings from the neuroimaging and neuropsychological fields of deficient performance on measures of working memory, processing speed, auditory processing ability, and executive functions, evaluation of these skills is necessary to determine the most appropriate program to fit the individual child’s needs. The danger with not paying attention to individual differences is that we will repeat the current practice of simple assessments in curricular materials to evaluate a complex learning process and to plan for interventions with children and adolescents with markedly different needs and learning profiles.”

Source: Semrud-Clikeman, M. (2005). Neuropsychological aspects for evaluating learning disabilities. *Journal of Learning Disabilities*, 38, 563-568.



Dr. Alan Kaufman

... there is a demand for the comprehensive assessment to drive intervention. This is the way it has always been, and this is the way it will always be because the referral questions for children with SLD have always asked, What is wrong? And how can we help? These questions demand differential diagnosis, a large part of which is determined by the cognitive abilities present in the individual child (p. 211).

Source: Kaufman, A. S., Lichtenberger, E. O., Fletcher-Janzen, E., & Kaufman, N. L. (2005). *Essentials of the K-ABC-II Assessment*. New York: John Wiley & Sons.

SLD Identification

- Consider pre-referral intervention data.
- Consider ability-achievement discrepancies.
- Consider extrinsic factors that affect learning.
- Examine the pattern of strengths and weaknesses.
- Link the areas of weakness to specific academic skill problems.
- Specify appropriate accommodations and interventions based on the problems.

Conclusions

- Specific learning disabilities are real.
- RTI can provide important prereferral data but should not be used as the sole method for identification.
- Ability-achievement discrepancies do not mean the student has a SLD, but they do reflect the concept of "unexpected underachievement."
- Comprehensive evaluations with cognitive and achievement testing are needed to fully understand the nature and severity of the learning problems and select appropriate accommodations and interventions.
