Byram Hills Literacy Academy
Session # 5 – April 17

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Our Time Tonight

• Dyslexia (MN)
• MTSS (KS)
Subtypes of Reading Disability*

- Language Comprehension Deficit (10% - 15%)
- Phonological Deficit (70% - 80%)
- Fluency / Naming Speed Deficit (10% - 15%)

*Adapted from Moats & Tolman, 2009
Common Misconceptions about Dyslexia

- Reversing letters; inversions, backwards
- More common in boys than girls
- Linked to intelligence
- Is outgrown
- Linked to vision

A dyslexic walks into a bra. He gets slapped in the cafe.
Dyslexia is characterized by difficulties with:

- Accurate/fluent word recognition
- Poor spelling
- Poor decoding abilities

These difficulties usually are a result of deficiency in the phonological component of language.
“Dyslexia is a specific learning disability that is neurobiological in origin. It is characterized by difficulties with accurate and/or fluent word recognition and 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 growth of vocabulary and background knowledge.”
Frequency of Dyslexia

- 14% of total public school enrollment of children ages 3 to 21 receive services for SLD

- Dyslexia comprises 80% of all learning disabilities

- Therefore 2 million children (4% of total school population) receive special ed services for dyslexia

USDOE, 2018
Shaywitz, 2020
• Strongly heritable (Up to 50% of individuals with first degree relative with dyslexia)
• More likely to suffer from generalized anxiety; higher rates of depression
• Significant comorbidities
  • Speech and language problems; ½ of children with dyslexia have language disorders & 1/2 of children with language disorders have dyslexia
  • 20-40% of children with ADHD have dyslexia
• Children show stronger emotional responses
Non-Impaired Reader

- Word analysis (more complex)
- Word form integrated
- Articulation / word analysis

Reader with Dyslexia

- Articulation / word analysis over-reliance
Why Early Screening Matters

Window for most effective intervention

Wait-to-fail assessment model

Critical Intervention Time
56%-92% achieve average+ reading
**Dyslexia red flags in preschool + kindergarten**

- difficulty learning and remembering the letter names in alphabet
- delayed speech or persistent "baby talk"
- difficulty learning nursery rhymes; recognizing rhyming patterns
- difficulty recognizing own name and reading simple words
- not yet associating letter sound to letter
- family history of dyslexia

- student may have strengths in vocabulary, comprehension, creativity, oral storytelling, and problem-solving skills, which makes their struggles seem unexpected
- reading avoidance behaviors

**Dyslexia red flags in elementary age children**

- difficulty learning and remembering the letter names in alphabet
- delayed speech or persistent "baby talk"
- difficulty learning nursery rhymes; recognizing rhyming patterns
- difficulty recognizing own name and reading simple words
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RTI - MTSS

A culturally and linguistically responsive multi-tiered system of supports (MTSS) is a comprehensive prevention framework designed to improve developmental, social, emotional, academic, and behavioral outcomes using a continuum of evidence-based strategies and supports. (USDOE, 2022)
Universal Screening

• Assessment procedure characterized by brief, efficient, repeatable testing of age-appropriate academic skills or behaviors.

• High quality assessments that are predictive of future reading outcomes

• Conducted with all students
  ✔ a minimum of 2 - 3x per year
  ✔ (fall, winter, spring)
PROGRESS MONITORING: Purposes

• Determine whether a student is responding to Tier 2 or Tier 3 intervention

• Estimate a student’s rate of growth

• Compare a student’s level of performance with same age peers

• Adjust/modify interventions if needed

• Common Tools:
  ✔ AIMSWeb
  ✔ FASTBRIDGE
  ✔ Easy CBM
Utilizing a Lean, Clean Assessment System *(Stahl & McKenna, 2013; Stahl et al., 2022)*

- Conduct a district-wide assessment audit
- Revisit current utilization of assessment practices, how they are used, by whom and why
- Determine voids, redundancies, and efficiency
- Revise as needed
- Set criteria/cut scores in screening tools for supplementary support
- Match criteria with tiered instructional supports in explicit ways
- Hold grade level data meetings
Data-Based Decision Making

• Data –Meetings- Efficient, Grade-level teams
  • Benchmark-low inference, data-driven
  • Progress-monitoring: change needed based on data
  • Less time on individual meetings (Social-emotional and Referral)

• Two key decisions
  • Who’s at-risk? (screening data)
  • Is student responding to the intervention? (PM data)

• Other key data-based decisions:
  • Adequacy of Tier I instruction
  • LD Determination
MTSS as a multi-leveled prevention model

TIER I: Core Instruction
- ALL STUDENTS
  - Content area Instruction that is differentiated & evidenced-base
  - Universal Screening

TIER II: Core Instruction + Supplemental Intervention
- SOME STUDENTS
  - Supplements Core Instruction
  - Progress Monitoring

TIER III: Core Instruction + Intensive, Customized Intervention
- FEW STUDENTS
  - Supplements Core Instruction
  - Progress Monitoring

Multi-tiered Prevention
Use an Evidence-Based Approach to Support and Respond to Student Needs (USDOE, 2022; American Institute for Research: Center on MTSS)

• Universal and supplementary academic and behavioral supports
• Targeted supports
• Invest in school and educator capacity
• Use federal funding and resources to address disparities in, and to reduce the use of, exclusionary disciplinary practices
System for Annual Review

• **Annual Status Check of MTSS Components** (Table 8.1, Stahl & McKenna, 2013)
• Are high risk levels reducing each year?
• Are ceilings increasing each year?

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