# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>FORWARD</td>
<td>4</td>
</tr>
<tr>
<td>ACKNOWLEDGMENTS</td>
<td>5</td>
</tr>
<tr>
<td>SECTION I: INTRODUCTION</td>
<td>7</td>
</tr>
<tr>
<td>PURPOSE</td>
<td>7</td>
</tr>
<tr>
<td>SECTION II: DYSLEXIA AND OTHER ASSOCIATED DISORDERS</td>
<td>8</td>
</tr>
<tr>
<td>WHAT IS DYSLEXIA?</td>
<td>8</td>
</tr>
<tr>
<td>COMMON CHARACTERISTICS OF DYSLEXIA</td>
<td>8</td>
</tr>
<tr>
<td>COMMON MISCONCEPTIONS OF DYSLEXIA</td>
<td>10</td>
</tr>
<tr>
<td>SECTION III: THE TEACHING OF READING</td>
<td>11</td>
</tr>
<tr>
<td>EFFECTIVE READING INSTRUCTION</td>
<td>11</td>
</tr>
<tr>
<td>SECTION IV: ADDRESSING READING DIFFICULTIES IN GENERAL EDUCATION</td>
<td>13</td>
</tr>
<tr>
<td>GEORGIA’S TIERED SYSTEM OF SUPPORTS FOR STUDENTS</td>
<td>13</td>
</tr>
<tr>
<td>IMPLEMENTING GEORGIA’S TIERED SYSTEM OF SUPPORTS FOR STUDENTS</td>
<td>14</td>
</tr>
<tr>
<td>SECTION V: UNIVERSAL SCREENING PROCESS</td>
<td>16</td>
</tr>
<tr>
<td>UNIVERSAL SCREENING</td>
<td>16</td>
</tr>
<tr>
<td>SAMPLE PERFORMANCE INDICATORS</td>
<td>17</td>
</tr>
<tr>
<td>ESSENTIAL COMPONENTS OF AN EFFECTIVE SCREENER FOR READING DIFFICULTIES</td>
<td>18</td>
</tr>
<tr>
<td>CONSIDERATIONS FOR INTERPRETATION OF UNIVERSAL SCREENING DATA</td>
<td>19</td>
</tr>
<tr>
<td>SECTION VI: PROCEDURES FOR IDENTIFICATION AND DYSLEXIA SERVICES</td>
<td>21</td>
</tr>
<tr>
<td>EVALUATION</td>
<td>21</td>
</tr>
<tr>
<td>CLINICAL DIAGNOSIS VS. SCHOOL IDENTIFICATION</td>
<td>22</td>
</tr>
<tr>
<td>SECTION VII: INSTRUCTIONAL SUPPORT FOR STUDENTS WITH DYSLEXIA</td>
<td>25</td>
</tr>
<tr>
<td>STRUCTURED LITERACY</td>
<td>25</td>
</tr>
<tr>
<td>MEANING-CENTERED READING AND WRITING STRATEGIES</td>
<td>28</td>
</tr>
<tr>
<td>SECTION VIII: SPECIAL EDUCATION SERVICES AND DYSLEXIA</td>
<td>29</td>
</tr>
<tr>
<td>SPECIFIC LEARNING DISABILITY</td>
<td>29</td>
</tr>
<tr>
<td>COMORBID DISORDERS AND SPECIFIC LEARNING DISABILITIES</td>
<td>29</td>
</tr>
<tr>
<td>SPECIALLY DESIGNED INSTRUCTION FOR STUDENTS ELIGIBLE FOR SPECIAL EDUCATION SERVICES</td>
<td>30</td>
</tr>
<tr>
<td>ACCOMMODATIONS</td>
<td>31</td>
</tr>
<tr>
<td>SECTION IX: SCHOOL AND DISTRICT PROFESSIONAL LEARNING</td>
<td>33</td>
</tr>
<tr>
<td>LITERACY CONVERSATIONS</td>
<td>33</td>
</tr>
<tr>
<td>GEORGIA STANDARDS OF EXCELLENCE</td>
<td>34</td>
</tr>
<tr>
<td>GET GEORGIA READING</td>
<td>34</td>
</tr>
<tr>
<td>LITERACY FOR LEARNING, LIVING AND LEADING PLAN(L4GA)</td>
<td>35</td>
</tr>
<tr>
<td>DYSLEXIA ENDORSEMENT PROGRAMS IN GEORGIA</td>
<td>35</td>
</tr>
<tr>
<td>PROFESSIONAL LEARNING OPPORTUNITIES</td>
<td>35</td>
</tr>
<tr>
<td>PROFESSIONAL LEARNING ORGANIZATIONS</td>
<td>36</td>
</tr>
</tbody>
</table>
“Dyslexia is a different brain organization that needs different teaching methods. It is never the fault of the child, but rather the responsibility of us who teach to find the methods that work for that child.” (Maryanne Wolfe, Education Researcher)

“I don’t ‘suffer’ from dyslexia, I live with it and work with it. I suffer from the ignorance of people who think they know what I can and cannot do.” (Erica Cook, Learning Ally member)

“Dyslexia has turned my daughter into the hardest working person I know.” (Amanda, parent of a child with dyslexia)

These are some of the quotes about children and adults who have dyslexia. As the research on dyslexia becomes clearer, educators are learning how to better support these learners. In Georgia, Senate Bill 48(2019) was written in response to the concerns of parents, medical professionals, and educators who want to ensure schools more systematically support students with dyslexia.

Educators can take individual action, but they will need system-wide supports in place as well.

This Handbook describes what dyslexia is and what it looks and sounds like when a child is experiencing difficulties in learning to read. It addresses how to screen for dyslexia and how to systematically improve reading-skills instruction, while ensuring each and every child has access to individualized supports if the system is not meeting their needs.

The Georgia Department of Education’s primary function is serving students; therefore, we are dedicated to providing the services and supports educators need to serve students. This Handbook is just one support. We will continue to modify the Handbook as we learn more, as schools improve processes for system-wide foundational literacy instruction, and as additional research emerges.

We express our gratitude to the many parents, educators, advocacy organizations, and researchers who contributed to the development of this Handbook and continue to work on behalf of Georgia’s students.

Sincerely,

Richard Woods
State School Superintendent
ACKNOWLEDGMENTS

STATEMENT OF COLLABORATION

The Georgia Department of Education (GaDOE) recognizes that collaboration is a commitment to work together as partners toward common goals. In an effort to ensure collaboration, GaDOE worked in partnership with states and organizations who have undertaken extensive measures in order to build professional capacity in the area of dyslexia. We will continue to partner with organizations and other states to reinforce the effective practice of constant collaboration to improve quality instruction in all classrooms.

Alabama State Department of Education – Dyslexia Resource Guide
Arkansas Department of Education – Dyslexia Resource Guide
Arizona Department of Education – Arizona Technical Assistance System Dyslexia Handbook
California Department of Education – California Dyslexia Guidelines
Texas Department of Education – The Dyslexia Handbook
Virginia Department of Education – Guidelines for Educating Students with Specific Learning Disabilities
International Dyslexia Association

THE GEORGIA DEPARTMENT OF EDUCATION ACKNOWLEDGES THOSE WHO PROVIDED ASSISTANCE IN THE DEVELOPMENT OR REVIEW OF THIS DOCUMENT.

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<table>
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</tr>
</thead>
<tbody>
<tr>
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<td>Matthew D. Carter, Valdosta State University</td>
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</tr>
<tr>
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<tr>
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</tr>
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</tr>
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</tr>
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</tr>
<tr>
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</tr>
<tr>
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</tr>
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<td>Decoding Dyslexia Georgia</td>
</tr>
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</tr>
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<td>Academic Interventionist</td>
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</tr>
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<td>Amy Yacobacci, Glynn County Schools</td>
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</tr>
</tbody>
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SECTION I: INTRODUCTION

PURPOSE

In 2019, Georgia’s Legislature signed Senate Bill 48(2019) (SB 48) into law. As a result of SB 48, the Georgia Department of Education, with assistance from experts in the fields of dyslexia, literacy, and language, created this informational handbook that includes information about dyslexia, reading, and language disorders and how they interconnect.

This informational handbook provides educators with information related to dyslexia, reading, and language disorders and how they interact, as well as professional development resources. The Dyslexia Informational Handbook was developed and will be updated by a committee of representatives who have experience in the area of dyslexia and will be revised periodically with input and feedback from key stakeholder groups.

WHAT IS DYSLEXIA?

Dyslexia is a specific learning disability that is **neurobiological** in origin. It is characterized by difficulties with accurate and 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.²

COMMON CHARACTERISTICS OF DYSLEXIA

Dyslexia is a neurobiological (located physically in the brain) condition that makes reading more difficult. Dyslexia is a language-based condition rather than a vision-based condition. It is a condition that does not go away, but individuals with dyslexia can learn to read well when provided multisensory, dyslexia-specific interventions. Dyslexia is not the effect of poor instruction or lack effort on the part of the student. Dyslexia has nothing to do with intelligence; instead, it has to do with an individual’s ability to process sound-symbol relationships and language.²

Students with dyslexia struggle with the relationship between letters and sounds. Because of this, they have a hard time decoding, or sounding out, unfamiliar words, and instead often misread them based on an overreliance on their sight-word memory. Deficits are unexpected relative to cognitive abilities in that the student’s skills are lower than their overall ability and are not due to a lack of intelligence. Screening for characteristics of dyslexia is a proactive way to address skill deficits through appropriate interventions. Screening results that reflect characteristics of dyslexia do not necessarily mean that a student has dyslexia nor can dyslexia be diagnosed through a screening alone.¹

Students with dyslexia share some common characteristics, but it is important to remember that dyslexia manifests differently depending on the individual, their age, and other factors affecting their foundational reading skill development. In addition, students may have co-occurring disabilities/disorders, including twice exceptionality (i.e., gifted and dyslexia). Comorbid symptoms may mask characteristics of dyslexia (e.g., inattention, behavioral and emotional issues are more apparent or gifted students may compensate well); on the other hand, a student’s disability may impair participation in grade-level instruction, creating deficits that may be misinterpreted as characteristics of dyslexia. See Section VIII for more information regarding dyslexia and comorbid disorders.

---

¹ International Dyslexia Association Definition of Dyslexia
² International Dyslexia Association Dyslexia Basics

---

A glossary of helpful terms can be found in Appendix A.
The table below, from The Schenck School, provides phonemic awareness and reading skills that typically present at certain ages/grades.

### Table 2.1: Phonemic Awareness & Reading Skills Red Flag Checklist³

<table>
<thead>
<tr>
<th>Preschool</th>
<th>6 Years Old</th>
<th>2nd – 5th Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>A child should be able to:</td>
<td>A child should be able to:</td>
<td>A child should be able to:</td>
</tr>
<tr>
<td>□ produce rhyming words</td>
<td>□ write words</td>
<td>□ spell well</td>
</tr>
<tr>
<td>□ divide words into syllables</td>
<td>□ write sentences</td>
<td>□ have appropriate handwriting</td>
</tr>
<tr>
<td>□ divide sentences into words</td>
<td>□ blend sounds together</td>
<td>□ enjoy reading and writing</td>
</tr>
<tr>
<td>□ discriminate rhyming words</td>
<td>□ decode nonsense words</td>
<td>□ have appropriate or strong written expression</td>
</tr>
<tr>
<td>□ divide words into phonemes</td>
<td>□ identify sounds and letters (sound/symbol relationships)</td>
<td>□ have appropriate or strong reading strategies</td>
</tr>
<tr>
<td>□ delete roots, syllables, and phonemes e.g. Say “cowboy.” “Now say it again, but don’t say boy.”</td>
<td>□ begin to decode (vc, vcv, words, words with blends, words with consonant digraphs, magic e words, etc.)</td>
<td>□ recall words quickly without much repetition</td>
</tr>
<tr>
<td>□ substitute a phoneme to a new word e.g. Say “f-u-n” What is that? Now say it again but change /f/ to /s/.”</td>
<td></td>
<td>□ comprehend reading material at or above grade level</td>
</tr>
<tr>
<td>□ identify a phoneme by its position in a word (beginning, middle, end)</td>
<td></td>
<td>□ read accurately</td>
</tr>
</tbody>
</table>

Individuals may present different characteristics at different ages. Table 2.2 shows common characteristics of dyslexia for various age levels.

### Table 2.2: Common Characteristics of Dyslexia⁴

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Potential Difficulties</th>
<th>Potential Strengths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grades K – 1</td>
<td>• Reading errors exhibit no connection to the sounds of the letters on the page (e.g., will say “puppy” instead of the written word “dog” on an illustrated page with a dog shown)</td>
<td>• The ability to figure things out</td>
</tr>
<tr>
<td></td>
<td>• Does not understand that words come apart</td>
<td>• Eager embrace of new ideas</td>
</tr>
<tr>
<td></td>
<td>• Complains about how hard reading is, or disengages when it is time to read</td>
<td>• Gets “the gist” of things</td>
</tr>
<tr>
<td></td>
<td>• A familial history of reading problems</td>
<td>• A good understanding of new concepts</td>
</tr>
<tr>
<td></td>
<td>• Cannot sound out simple words like cat, map, nap</td>
<td>• A large vocabulary for the age group</td>
</tr>
<tr>
<td></td>
<td>• Does not associate letters with sounds, such as the letter b with /b/.</td>
<td>• Excellent comprehension of stories read aloud (i.e., listening comprehension)</td>
</tr>
<tr>
<td>Grades 2+</td>
<td>• Very slow to acquire reading skills; reading is slow and awkward</td>
<td>• Excellent thinking skills: conceptualization, reasoning, imagination, abstraction</td>
</tr>
<tr>
<td></td>
<td>• Trouble reading unfamiliar words, often making wild guesses because the student cannot sound out the word</td>
<td>• Learning that is accomplished best through meaning rather than rote memorization</td>
</tr>
<tr>
<td></td>
<td>• Doesn’t seem to have a strategy for reading new words</td>
<td>• Ability to get the “big picture”</td>
</tr>
<tr>
<td></td>
<td>• Avoids reading out loud</td>
<td>• A high level of understanding of what is read aloud (listening comprehension)</td>
</tr>
<tr>
<td></td>
<td>• Confuses words that sound alike, such as saying “tornado” for “volcano,” substituting “location” for “ocean”</td>
<td>• The ability to read and to understand highly practiced words in a special area of interest</td>
</tr>
<tr>
<td></td>
<td>• Mispronunciation of long, unfamiliar, or complicated words</td>
<td>• Sophisticated listening vocabulary</td>
</tr>
<tr>
<td></td>
<td>• Avoidance of reading; gaps in vocabulary as a result</td>
<td>• Excellence in areas not dependent on reading</td>
</tr>
</tbody>
</table>

³ Adapted from The Schenck School, Red Flag Checklist
⁴ Taken from The Yale Center for Dyslexia and Creativity, Signs of Dyslexia
COMMON MISCONCEPTIONS OF DYSLEXIA

Every child is unique, and therefore the rate of development may vary. It is possible that a child may not reach a developmental milestone until the upper end of the expected range. Concerns are warranted, however, if the behaviors occur over an extended period of time and adversely affect the child’s ability to progress and meet expectations. Many young children reverse letters and numbers, misread words or misunderstand words as a normal, developmental part of learning to read. Children with dyslexia, however, continue to struggle with reading and language after their peers have become successful.\(^5\) This is one of many misconceptions that surround the term dyslexia. See Table 2.3 for some other common misconceptions associated with dyslexia.

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smart people cannot have dyslexia or have a learning disability.</td>
<td>Dyslexia and intelligence are NOT connected. Many individuals who have dyslexia are very bright and creative and have accomplished amazing things as adults.</td>
</tr>
<tr>
<td>Dyslexia is very uncommon.</td>
<td>The International Dyslexia Foundation states that between 15% and 20% of the population have a language-based learning disability, dyslexia being the most common of these. The United States Department of Health and Human Services estimates that 15% of the U.S. population has dyslexia.</td>
</tr>
<tr>
<td>Dyslexia can be outgrown.</td>
<td>Dyslexia is a lifelong issue; yearly monitoring of phonological skills from first through twelfth grade shows that the disability persists into adulthood. Although many people with dyslexia learn to read accurately, they may continue to read slowly and not automatically.</td>
</tr>
<tr>
<td>Dyslexia cannot be identified until third grade.</td>
<td>Professionals with extensive training can accurately identify the precursors to developing dyslexia as early as age 5. We can make an identification as soon as the child begins to struggle with learning to read, spell, and write. The sooner an identification is made, the quicker the child can get help, and the more likely we are to prevent secondary blows to their self-esteem. A combination of a family history of dyslexia and symptoms of difficulties in spoken language can help identify a vulnerable child even before he/she begins formal schooling.</td>
</tr>
<tr>
<td>Dyslexia is a medical diagnosis.</td>
<td>Dyslexia is not characterized as a medical problem and is typically identified by educators and specialists who have training in oral language, reading, writing, or spelling assessment and diagnosis.</td>
</tr>
<tr>
<td>Dyslexia is caused by a lack of phonics instruction.</td>
<td>Increased phonics instruction will not help a child with dyslexia. Children with dyslexia are able to learn phonics once they have the underlying phonemic awareness abilities; although they may continue having trouble applying it. This is why difficulty with phonics and word pronunciation is a good warning sign of dyslexia.</td>
</tr>
<tr>
<td>People with dyslexia cannot read.</td>
<td>Most children and adults with dyslexia are able to read, even if it is at a basic level. Spelling is one of the classic red flags alerting parents and teachers of a serious underlying problem. The child may be unable to understand the basic code of the English language and cannot break down or reconstruct (with spelling) words using codes (letters).</td>
</tr>
<tr>
<td>Dyslexia is a visual problem – dyslexics see letters and words backwards</td>
<td>Individuals with dyslexia do not see things backwards because dyslexia is not a problem with the eyes. While new research has demonstrated that letter reversals of kindergarten children predicted spelling at 2nd grade, typical learners can reverse letters when initially learning.</td>
</tr>
</tbody>
</table>

\(^5\)Harvard Health Publishing: Dyslexia A-Z
\(^6\)Adapted from the University of Michigan: Debunking Common Myths About Dyslexia
Effective reading instruction is essential for all students and is especially critical for students with dyslexia. High-quality classroom reading instruction can give students a foundation upon which intervention and instruction can have a greater impact. Instructional content of the core reading program should include instruction in the five essential components of reading: phonological awareness, phonics, vocabulary, fluency and comprehension. Instruction in oral language, writing, spelling, and handwriting is also essential. These components should be addressed in a comprehensive and effective manner.

Instructional design of high-quality programs should include explicit and systematic strategies for instruction, consistent instructional routines, and ample opportunity for practice with appropriate student support materials, cumulative review, and alignment to the Georgia Standards of Excellence for English Language Arts for each grade level. Instructional design should also effectively integrate the components of reading rather than isolate each skill.

In Figure 3.1, Dr. Hollis Scarborough (2001) compares skilled reading to a rope, which consists of many different strands. These strands all work together to enable skilled reading. The strands develop over time and with more teaching and experience. The Reading Rope consists of upper and lower strands. The language-comprehension strands (background knowledge, vocabulary, language structures, verbal reasoning, and literacy knowledge) reinforce one another and then weave together with the word-recognition strands to produce a skilled reader. Concurrently, the word-recognition strands (phonological awareness, decoding, and sight recognition of familiar words) work together as the reader becomes accurate, fluent, and increasingly automatic with repetition and practice. This does not happen overnight; it requires instruction and practice over time. Each strand is explained in the tables 3.1 and 3.2 below.

**Figure 3.1: Scarborough’s Reading Rope**

---

**THE MANY STRANDS THAT ARE WOVEN INTO SKILLED READING**

### LANGUAGE COMPREHENSION
- BACKGROUND KNOWLEDGE (facts, concepts, etc.)
- VOCABULARY (broad, precision, links, etc.)
- LANGUAGE STRUCTURES (syntax, semantics, etc.)
- VERBAL REASONING (inference, metaphor, etc.)
- LITERACY KNOWLEDGE (print concepts, genres, etc.)

### WORD RECOGNITION
- PHONOLOGICAL AWARENESS (syllables, phonemes, etc.)
- DECODING (alphabetic principle, spelling-sound correspondences)
- SIGHT RECOGNITION (of familiar words)
### Table 3.1: Language Comprehension Strand

<table>
<thead>
<tr>
<th>Background Knowledge</th>
<th>This refers to the knowledge a reader already has about the information being read which needs to be applied in order to make sense of this new information. The knowledge about the world which children possess is crucial to them reading effectively.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vocabulary</td>
<td>This refers to the breadth of a reader’s vocabulary. The more words a reader knows in a text, the more fluent his/her reading of that text is likely to be.</td>
</tr>
<tr>
<td>Language Structures</td>
<td>A reader needs at least an implicit understanding of how language is structured, that is, grammar. Most children (and adults) sense when a sentence is not grammatically correct without being able to explain what the problem is.</td>
</tr>
<tr>
<td>Verbal Reasoning</td>
<td>Readers need to be able to make inferences and construct meanings from the text: that is, they need to be able to think logically about what they read, understand it, and understand its implications.</td>
</tr>
<tr>
<td>Literacy Knowledge</td>
<td>It is important for readers to understand concepts of print such as reading from left to right and top to bottom, how to hold a book, and that full stops complete one sentence (unit of meaning) before the text moves on. These things do not work in the same way in other languages, so they probably need to be taught to English-speaking (and reading) children.</td>
</tr>
</tbody>
</table>

---

### Table 3.2: Word Recognition Strand

<table>
<thead>
<tr>
<th>Phonological Awareness</th>
<th>This refers to the awareness a reader has of the sound systems in language, including knowledge of syllables, and sentence intonation (a rise in voice when asking a question, for example). Knowledge and experience of rhymes is important in developing this awareness.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decoding</td>
<td>This includes an understanding of the alphabetic principle, that is that a letter of the alphabet represents a sound, and that these letters/sounds can be blended to make words. This is somewhat trickier in English than in some other languages. English has about 44 sounds (phonemes) but only 26 letters in the alphabet. Thus the relationship between letters and sounds cannot be one to one.</td>
</tr>
<tr>
<td>Sight Recognition</td>
<td>Some words are recognized when reading without the reader needing to decode them: you just know them. Children need to build up their repertoires of sight words and the more they can read by sight, the more efficient their reading becomes.</td>
</tr>
</tbody>
</table>

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For more information on the science of reading, visit [https://www.zaner-bloser.com/reading/superkids-reading-program/pdfs/Whitepaper_TheScienceofReading.pdf](https://www.zaner-bloser.com/reading/superkids-reading-program/pdfs/Whitepaper_TheScienceofReading.pdf)

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7 Scarborough’s Reading Rope: A Groundbreaking Infographic
8 Adapted from University of Nottingham: Understanding Comprehension
GEORGIA’S TIERED SYSTEM OF SUPPORTS FOR STUDENTS

In Georgia’s Tiered System of Supports for Students, district and school leadership provide the support systems and resources necessary to conduct screening and use screening results for data-informed decision making. Ultimately, the goal of a tiered system of supports is to ensure that the screening process will inform quality classroom instruction, necessary interventions, and intensive interventions for individual students.

A Multi-Tiered System of Supports (MTSS) is a framework designed to provide support that is matched to student need to maximize student achievement and reduce behavior problems. MTSS includes schoolwide implementation that focuses on the “what and how of instruction” and the provision of services and supports to students that meet their unique needs. Georgia’s MTSS consists of three levels of intensity or prevention that include high-quality core instruction and evidence-based interventions and supports. The levels are Tier I: Primary Level – Instruction/Core Curriculum; Tier II: Secondary Level – Intervention; and Tier III: Tertiary Level - Intensive Intervention.

TIER I: PRIMARY LEVEL OF PREVENTION – INSTRUCTION/CORE CURRICULUM

The focus of Tier I, the primary level of prevention, is robust instruction for all students using the core curriculum. The assessment administered within the primary level of prevention is screening for all students. Universal screeners are administered to all students two or three times per year at Tier I, the primary level of prevention. In addition, formative assessments should be frequently embedded within the primary level of prevention to monitor for progress. Instruction should be based on a core curriculum, include instructional practices that are research-based and align with state or district standards, and incorporate high leverage practices (HLPs) and differentiated instruction. Evidence-based, high-quality systematic, explicit instruction for reading, language, and writing should be delivered within the general education classroom. As part of the school infrastructure, job-embedded, school-based professional learning along with effective teaming structures are designed by school leaders so that all teachers continuously examine, reflect upon, and improve instructional practice(s).

TIER II: SECONDARY LEVEL OF PREVENTION – INTERVENTION

The focus of Tier II, the secondary level of prevention, is on students who are identified through screening and other indicators to be in need of interventions to support their learning. The instruction is targeted to the area of need and evidence-based interventions/practices (EBIs/EBPs) supplement or add to primary instruction. The interventions are also closely aligned with and complementary to the core curriculum to ensure transfer of learning. Instruction is typically
delivered within the general education classroom or other location within the school to small groups of students where the 
group size is optimal for the age and needs of the student. Procedures should be in place to monitor the fidelity of 
implementation and the effectiveness of the secondary level interventions. The assessments administered within the 
secondary level of prevention are progress monitoring and diagnostic measures. Diagnostic measures should be used to 
identify specific needs so that appropriate interventions can be identified.

**TIER III: TERTIARY LEVEL OF PREVENTION – INTENSIVE INTERVENTION**

The focus of Tier III, the tertiary level of prevention, is intensive interventions for students who have not responded to or 
demonstrated enough growth toward a set goal with interventions provided at Tier II. Intensive interventions are typically 
delivered to individual students or small groups of one to three in size. The instruction is evidence-based and is continuously 
adjusted and individualized to address the needs of each student. Decisions regarding student participation in both Tier II 
and Tier III are made on a case-by-case basis and according to student need. Tier III interventions supplement the general 
education curriculum and address identified areas of an individual student's need. Procedures should be in place to monitor 
the fidelity of implementation and effectiveness of Tier III intensive interventions. The assessments administered within Tier 
III are for progress monitoring and diagnostic measures.

**IMPLEMENTING GEORGIA’S TIERED SYSTEM OF SUPPORTS FOR STUDENTS**

Eight critical steps are needed to implement Georgia’s Tiered System of Supports for Students. These steps are listed in the 
flowchart below.

![Figure 4.2: The Eight Steps to Implementing Georgia’s Tiered System of Supports for Students](image)

As districts and schools are implementing a Multi-Tiered System of Supports framework, it is important to ensure that a 
solid infrastructure is in place to make certain that the framework can be implemented with fidelity. The essential component 
of infrastructure must be addressed in order for educators and students to achieve maximum benefits of implementation of 
the framework. As the steps are implemented, one or more of the nine sub-components of infrastructure must be addressed 
in order to effectively implement the steps and reduce possible barriers. For additional information on Georgia’s Tiered 
Table 4.1 outlines the eight critical steps in implementing a Multi-Tiered System of Supports.

<table>
<thead>
<tr>
<th>Step 1</th>
<th>Pre-Implementation Steps</th>
<th>Implementation Steps</th>
</tr>
</thead>
<tbody>
<tr>
<td>Select universal screener that includes components necessary to identify characteristics of reading difficulties and dyslexia.</td>
<td>Administer screener to ALL students.</td>
<td></td>
</tr>
<tr>
<td>Step 2</td>
<td>Enter screening data</td>
<td>Use data management system for storage and access</td>
</tr>
<tr>
<td>Step 3</td>
<td>Analyze screening results and provide user friendly outputs</td>
<td>Validate and interpret results of universal screener</td>
</tr>
<tr>
<td>Step 4</td>
<td>Identify acceptable sources to verify screening data</td>
<td>Use multiple data points to verify risk</td>
</tr>
<tr>
<td>Step 5</td>
<td>Create a ranking graph</td>
<td>Use data to group students and determine area of need</td>
</tr>
<tr>
<td>Step 6</td>
<td>Identify interventions</td>
<td>Determine the intervention to address the area of need and implement with fidelity</td>
</tr>
<tr>
<td>Step 7</td>
<td>Select progress monitoring tools</td>
<td>Progress monitor to determine of effectiveness of curriculum, the instruction and intervention</td>
</tr>
<tr>
<td>Step 8</td>
<td>• Enter progress monitoring data • Analyze and interpret progress monitoring data • Provide user friendly outputs</td>
<td>Use progress monitoring data to determine next steps</td>
</tr>
</tbody>
</table>
SECTION V: UNIVERSAL SCREENING PROCESS

UNIVERSAL SCREENING

Universal Screening is an essential component of Georgia’s Tiered System of Supports for Students and aligns with Georgia’s Systems of Continuous Improvement and is crucial to the school improvement process.

The purpose of screening is to identify students who need enrichment/acceleration or who are at risk for poor learning and/or poor behavior outcomes and provide an indicator of system effectiveness. Screening assessments typically are brief and usually are administered to all students at a grade level. Additionally, these assessments should be valid, reliable, and evidence-based. The data obtained from screening assessments should be used with other data sources to verify decisions made about whether a student is or is not at risk or in need of enrichment/acceleration. Screening is a critical and necessary step in making informed choices about how to meet the unique needs of students in Multi-Tiered System of Supports.

| Purpose | Identify students who are in need of enrichment/acceleration or who are at risk for poor learning and/or behavioral outcomes and provide an indicator of system effectiveness. |
| Focus | ALL Students |
| Tools | Brief assessments that are valid and reliable and that demonstrate diagnostic accuracy for predicting learning potential or behavioral problems. |
| Time Frame | Administered more than one time per year (e.g., fall, winter, and spring) |

Beginning in the 2024-2025 school year, local educational agencies must screen all students in kindergarten through grade 3 for characteristics of dyslexia and may screen students for other needs. The screening instrument(s) must be standardized and have validity and reliability. Parental consent is not necessary for administering an assessment that is administered to all students. However, parental consent must be obtained prior to individualized assessments and/or additional screenings for suspected risk for dyslexia (see Figure 6.1).

As part of this process, local educational agencies should provide parents with resources, information, and materials regarding dyslexia (e.g., Georgia Dyslexia Informational Handbook and the International Dyslexia Association (IDA) Dyslexia Handbook). When requested by a teacher or parent, the local educational agency will conduct a dyslexia-specific screening of any student at any grade level within 30 days.

If the screening data and additional information support that the student exhibits reading difficulties consistent with characteristics of dyslexia or other disorders, the local educational agency will begin or continue academic intervention and progress monitor to determine growth trajectory toward the student’s learning goal for 6 weeks. If the student does not demonstrate progress or expected growth during the required time frame, the intervention(s) should be intensified and the student will be referred to the Student Support Team (SST) for further consideration of strategies and interventions or upon consent of the parent, an educational evaluation. In the interim, the local educational agency should adjust and intensify the frequency, dosage, and strength of the intervention and continue to progress monitor.

Information on how to evaluate appropriate screening tools can be found here. https://charts.intensiveintervention.org/ascreening and https://psyarxiv.com/vukt2/

A list of example screeners can be found at the NCII Academic Screening Tools Chart and the Gaab Lab Early Literacy Screening Tools List.
Performance indicators that school leaders are providing appropriate screening include, but are not limited to:

- Uses screening tools that are brief, valid and reliable
- Screens all students to identify students who may be at risk, need additional assessments or in need of enrichment/acceleration
- Establishes written procedures to ensure universal screening occurs more than once a year and implementation accuracy
- Uses results to determine the level of risk and identify students who need further assessments
- Uses results to identify the needs of all students (i.e., tiered supports)
- Uses results to inform the data-based decision-making process
- Uses a data system to store and access student data in a timely fashion

Table 5.1 provides guidance for school leaders to self-assess how well they are implementing the screening process.

<table>
<thead>
<tr>
<th>Measures</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5 (Evident)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Screening Tools</td>
<td>Insufficient evidence that the screening tools are reliable, correlations between the instruments are strong, and predictions of risk are accurate.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Some evidence that the screening tools are reliable, correlations between the instruments are strong, and predictions of risk are accurate.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Evidence indicates that the screening tools are reliable, correlations between the instruments are strong, and predictions of risk are accurate, but staff cannot articulate supporting evidence.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Evidence indicates that the screening tools are reliable, correlations between the instruments are strong, and predictions of risk are accurate and some staff are beginning to articulate supporting evidence.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Evidence indicates that the screening tools are reliable, correlations between the instruments are strong, and predictions of risk are accurate and staff can articulate supporting evidence.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Universal Screening</td>
<td>One or none of the conditions is met: (1) screening is conducted for all students (i.e., is universal); (2) procedures are in place to ensure implementation accuracy (i.e., all students are tested, scores are accurate, cut points/decisions are accurate); and (3) a process to screen all students occurs more than</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>There is progress toward implementing two of the following conditions: (1) screening is conducted for all students (i.e., is universal); (2) procedures are in place to ensure implementation accuracy (i.e., all students are tested, scores are accurate, cut points/decisions are accurate); and (3) a process to screen all students occurs more than</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Two of the following conditions are met: (1) screening is conducted for all students (i.e., is universal); (2) procedures are in place to ensure implementation accuracy (i.e., all students are tested, scores are accurate, cut points/decisions are accurate); and (3) a process to screen all students occurs more than</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Two of the following conditions are met, and there is progress made toward implementing the third condition: (1) screening is conducted for all students (i.e., is universal); (2) procedures are in place to ensure implementation accuracy (i.e., all students are tested, scores are accurate, cut points/decisions are accurate); and (3) a process to screen all students occurs more than</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>All of the following conditions are met: (1) screening is conducted for all students (i.e., is universal); (2) procedures are in place to ensure implementation accuracy (i.e., all students are tested, scores are accurate, cut points/decisions are accurate); and (3) a process to screen all students occurs more than</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Data Points to Verify Risk</td>
<td>Screening data are not used or are used alone to verify decisions about whether a student is or is not at risk or in need of enrichment/acceleration.</td>
<td>Screening data are used and at least one other data source has been identified (e.g., classroom performance, curriculum-based assessment, performance on state assessment, diagnostic assessment data, short-term progress monitoring) to verify decisions about whether a student is or is not at risk or in need of enrichment and/or acceleration.</td>
<td>Screening data are used in concert with at least one other data source (e.g., classroom performance, curriculum-based assessment, performance on state assessment, diagnostic assessment data, short-term progress monitoring) to verify decisions about whether a student is or is not at risk or in need of enrichment and/or acceleration.</td>
<td>Screening data are used in concert with at least two other data sources (e.g., classroom performance, curriculum-based assessment, performance on state assessment, diagnostic assessment data, short-term progress monitoring) to verify decisions about whether a student is or is not at risk or in need of enrichment and/or acceleration.</td>
<td></td>
</tr>
</tbody>
</table>

For additional information, see Screening in Georgia’s Tiered System of Supports for Students Implementation Guide.

**ESSENTIAL COMPONENTS OF AN EFFECTIVE SCREENER FOR READING DIFFICULTIES**

When considering characteristics of dyslexia, screening in the areas of basic reading, reading fluency, and written expression help identify students who may need additional assessment to determine possible deficits related to the characteristics of dyslexia and the need for intervention.

According to **SB 48**, the components of a universal screener to address reading difficulties must include but are not limited to:

1. Phonological and phonemic awareness;
2. Sound symbol recognition;
3. Alphabet knowledge;
4. Decoding skills;
5. Rapid naming; and
6. Encoding skills.

Personnel administering the dyslexia screener should be trained to use the screening tools. Because the data will be used to help guide instruction, classroom teachers should participate in dyslexia screening, scoring, and progress monitoring.
Screening is step one of a process and does not provide a comprehensive assessment of a student's specific problems. Similarly, focusing on improving the skill targeted by a screening tool (e.g., WIF measures or reading rate) is not by itself an effective intervention. Once the pool of at-risk students is identified, more comprehensive assessments of their reading ability should be conducted to inform appropriate intervention placements. A student whose performance on a screening instrument is extremely low may require a different type and/or intensity of intervention than a student whose screening score is close to the cut-score.9

The RTI Network9 and IDA10 recommend that regardless of the process chosen to conduct screening, all should include the use of measures that are highly predictive of later reading ability.

### Table 5.2 provides key areas to assess students in different grades.

<table>
<thead>
<tr>
<th>Table 5.2: Screening Self-Assessment11</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Key Areas</strong></td>
<td>Kindergarten</td>
</tr>
<tr>
<td>Phonemic Awareness</td>
<td>Yes (Blending and substituting)</td>
</tr>
<tr>
<td>Rapid Automatized Naming (RAN)</td>
<td>Yes</td>
</tr>
<tr>
<td>Decoding (Word) Fluency- Real &amp; Nonsense Words</td>
<td>Yes</td>
</tr>
<tr>
<td>Spelling analysis and/or Inventory</td>
<td>Yes</td>
</tr>
<tr>
<td>Letter-sound Association</td>
<td>Yes</td>
</tr>
<tr>
<td>Letter Naming Fluency-Timed</td>
<td>Yes</td>
</tr>
<tr>
<td>Phonological Memory/Nonsense Word Repetition</td>
<td>Yes</td>
</tr>
<tr>
<td>Oral Reading Fluency (ORF) - Rate &amp; Accuracy</td>
<td>Not Necessary</td>
</tr>
<tr>
<td>Reading Comprehension</td>
<td>Not Necessary</td>
</tr>
</tbody>
</table>

**CONSIDERATIONS FOR INTERPRETATION OF UNIVERSAL SCREENING DATA**

After every universal screening, school-level data are analyzed to determine if the core curriculum has sufficiently met the needs of at least 80% of students.

- Data-Based Decision Making (DBDM) Teams use a well-defined cut score or decision point to identify students at risk or in need of acceleration/enrichment.
- If the school or a grade level has fewer than 80% of students achieving the desired performance level, then several questions should be considered:
  - Are core instruction and the core curriculum (including social and behavioral expectations) being implemented with fidelity? How do we know?
  - Is core instruction explicit, systematic, and scaffolded?
  - Are concepts being taught to mastery?
  - Are there sufficient examples, explanations, and opportunities for practice to support new learning?
  - How is core instruction differentiated to meet the needs of students in the classroom?
  - Are professional development or supports needed for teachers regarding the core curriculum or instruction?
  - Are all students getting access to the core curriculum?
When 20% or more of students in a particular grade level fail to reach the desired outcome for Tier I performance, possible problems with implementing or accessing the core instruction/curriculum may be indicated. Evidence-based secondary or tertiary interventions cannot adequately support students when there are issues with the core curriculum and/or instruction.

For additional information regarding dyslexia and the RTI process, visit https://www.mtsu.edu/dyslexia/documents/Dyslexia_within_RTI.pdf

9 The RTI Network: Screening for Reading Problems in Grades 1-3
10 Universal Screening: K–2 Reading
11 Adapted from California Dyslexia Guidelines
EVALUATION

When a student continues to have difficulty with reading and spelling as discovered in the universal screening process, and a robust Tier 1 reading program has been implemented, the local educational agency will begin or continue academic intervention and progress monitor to determine growth trajectory toward the student’s learning goal for six weeks. If the student does not demonstrate progress or expected growth during the required time frame, the student will be referred to the SST for further educational evaluation. In the interim, the local education agency should adjust the frequency, dosage, and strength of the intervention and continue to progress monitor.

An evaluation is the process of gathering information to identify the factors contributing to a student’s difficulty with learning to read and spell. First, information is gathered from parents and teachers to understand development and the educational opportunities that have been provided. Then, diagnostic assessments are given to identify strengths and weaknesses that lead to a conclusion and a tentative road map for intervention. Conclusions and recommendations are developed and reported.

An evaluation should contain three key components:

1. **Identification:** An effective evaluation identifies the likely source of the problem. It rules out other common causes of reading difficulties and determines if the student profile of strengths and weaknesses fit the definition of dyslexia.

2. **Intervention planning:** Students who have a specific learning disability in reading (dyslexia) need a specialized approach to reading instruction to make progress. It is crucial that this specially designed instruction begin at the student’s current level of reading skill development, rather than at the student’s grade level. An effective evaluation helps parents and teachers see which specific skills are weak and skills that will be targeted through reading and spelling instruction.

3. **Documentation:** An effective evaluation documents the history of a student’s learning. One purpose of this documentation is to determine eligibility for special services, including special education. Documentation is also important for obtaining accommodations on college entrance exams (ACT, SAT), in college, and/or in the workplace.

WHAT SHOULD BE INCLUDED IN AN EVALUATION?

There is no single test for dyslexia. A comprehensive evaluation consisting of multiple assessments is critical to support the identification of dyslexia, and the tests that are to be administered are determined by the Student Support Team.

According to the International Dyslexia Association, the following areas should be considered when carrying out an evaluation for dyslexia:

- Phonological Awareness – an individual’s awareness of and access to the sound structure of his/her oral language
- Phonological Memory – ability to recall sounds, syllables, words
- Rapid Automatic Naming – speed of naming objects, colors, digits, or letters
- Receptive Vocabulary – understanding of words heard
- Phonics Skills – understanding of the symbol (letter) to the sound(s) relationship, either individually or in combination with other letters
- Decoding – ability to use symbol-sound associations to identify (read – pronounce) words
  - Real Words
  - Nonsense Words
- Oral Reading Fluency – ability to read accurately, at a story-telling pace – to facilitate / support comprehension
- Single Word, Sentence, and Paragraph Reading
- Spelling
- Writing (Sentence and Paragraph level)

WHAT ARE THE POTENTIAL OUTCOMES OF AN EVALUATION?

An evaluation should result in a written report. This report should detail the kinds of information collected. It includes information related to family literacy history, any significant medical issues the child may have, prenatal and birth conditions,
and preschool development, including language learning. The student’s education history should include information on school attendance, tests administered, and test scores. This material should provide the framework for the detailed evaluation of relative strengths and weaknesses across the various skill areas assessed as well as the overall fit of all information with the typical profile of dyslexia for the child’s age. This should lead to a tentative conclusion that states that the child’s ability to learn to read, write, and spell does or does not appear to be related to dyslexia. Specific evidence that supports the conclusion should be explained in the report.

**HOW DOES EVALUATION LEAD TO IDENTIFICATION OF STUDENTS WITH DYSLEXIA?**

Identification of dyslexia begins with the gathering of information gained from interviews, observations, and testing. This information is collected by multiple adults familiar with the student, such as the classroom teacher(s), school leader, speech/language pathologist, educational assessment specialist(s), and/or medical personnel (if co-occurring difficulties related to development, health or attention are suspected).

The task of relating and interpreting the information collected should be the responsibility of a professional who is thoroughly familiar with the important characteristics of dyslexia at different stages in the development of literacy skills. This professional should also have knowledge of the influence of language development and behavior on literacy learning. Often, school psychologists and/or speech-language pathologists are responsible for this task.

**CAUTION:** A poor reader may appear to “fit the profile” of dyslexia. However, if the learner responds quickly to appropriate intervention, the source of the reading problem is more likely related to earlier educational opportunity than to differences in the child’s neurobiological makeup that limit the ability to learn from the instruction provided.

**WHAT MUST BE DOCUMENTED?**

The evaluation report should provide the documentation necessary to determine eligibility for individualized supports, including Early Intervention Program (EIP), Special Education, and Section 504. In the instance that the child will need Special Education Services, the local educational agency will follow the requirements as outlined in 160-4-7-.03 (Child Find Procedures). In the instance that the child will need other modifications, the local education agency will follow the requirements for Section 504.

Information about the child’s specific skill needs should be detailed in the report to assist in identifying the starting point for instruction. Recommended instructional approaches or intervention strategies should be consistent with the types of content and methods that research has shown to be effective for students with dyslexia and other poor readers. If warranted, a recommendation for further testing—vision, hearing, fine motor control (occupational therapy), attention, emotional adjustment—might also be included.

**CLINICAL DIAGNOSIS VS. SCHOOL IDENTIFICATION**

There is frequent confusion regarding the difference between the clinical diagnosis of dyslexia and the school-based identification of dyslexia as a specific learning disability. The diagnostic term “dyslexia” can be used by clinicians working in a private clinical setting and by evaluation teams found within a public school setting. The use of dyslexia as a descriptor of a specific type of reading disorder (and a specific type of learning disability) is not limited to those working in a medical setting. Rather, its use is only limited by the training and assessment experience of those who would use the term. In Georgia, there is no statute or regulation that would prohibit the use of the word dyslexia in a school setting or within school-generated documents. Likewise, there are no federal rules that prohibit the use of the term “dyslexia” when identifying a phonological-based, word-level reading disorder in a school-based setting (see OSERS Dear Colleague Letter in Appendix B). In using the descriptor “dyslexia,” the person or persons using the term have a responsibility to thoroughly understand typical reading development, what dyslexia is and is not, the key features of dyslexia, how it is assessed, and their obligation to use valid and reliable measurement tools and sound diagnostic judgment when making such a diagnosis.

Doctors and clinicians “diagnose” conditions such as dyslexia and Attention Deficit Hyperactive Disorder (ADHD). School districts working under the IDEA “identify” learning differences and then determine if a student is eligible for special education services. Schools identify conditions based on IDEA. IDEA covers 13 categories of disability. Dyslexia falls under the category SLD.
An evaluation team might consider any clinical information that has been made available when it is determining if a child is eligible for special education. That includes a clinical diagnosis. A diagnosis alone does not satisfy IDEA requirements for eligibility as a student with a disability and the evaluation team may request additional information to satisfy those requirements and provide the team with the appropriate information to make informed decisions.
Figure 6.1 explains the typical process and procedures for the identification of a student who has characteristics of dyslexia. Although the process originates with a universal screener, this is not the only path to receive an evaluation when attempting to identify struggling readers. A Section 504 referral or special education evaluation may be requested at any time upon request of a parent/guardian. Also, a student may be referred for a dyslexia evaluation if data show that a student continues to struggle with one or more components of reading.
STRUCTURED LITERACY

Structured Literacy (SL) offers a promising approach for educators interested in more effective ways to teach students with dyslexia (Spear-Swerling, 2018). It is characterized by providing systematic, explicit instruction that integrates listening, speaking, reading, and writing and emphasizes the structure of language across the speech sound system (phonology), the writing system (orthography), the structure of sentences (syntax), the meaningful parts of words (morphology), the relationships among words (semantics), and the organization of spoken and written discourse.

Structured Literacy instruction is identified by several elements:

- Phonology
- Sound-Symbol Association
- Syllable Instruction
- Morphology
- Syntax
- Semantics

INSTRUCTIONAL PRINCIPLES OF STRUCTURED LITERACY

The International Dyslexia Association provides guidance on the instructional features of a Structured Literacy approach to reading:

1. Instructional tasks are modeled and clearly explained, especially when first introduced or when a child is having difficulty.
2. Highly explicit instruction is provided, not only in important foundational skills such as decoding and spelling, but also in higher-level aspects of literacy such as syntax, reading comprehension, and text composition.
3. Important prerequisite skills are taught before students are expected to learn more advanced skills.
4. Meaningful interactions with language occur during the lesson.
5. Multiple opportunities are provided to practice instructional tasks.
6. Well targeted corrective feedback is provided after initial Structured Literacy is an approach to reading instruction that can be beneficial not only for students with reading disabilities, but also for other at-risk students including English learners and struggling adolescents.
7. Student effort is encouraged.
8. Lesson engagement during teacher-led instruction is monitored and scaffolded.
9. Lesson engagement during independent work is monitored and facilitated.
10. Students successfully complete activities at a high criterion level of performance before moving on to more advanced skills.

Figures 7.1 and 7.2 provide definitions of the elements of Structured Literacy as well as evidence-based teaching principles.
Figures 7.1 and 7.2: Elements of Structured Literacy and Teaching Principles of Structured Literacy

Structured Literacy’s ELEMENTS work together.

- **Phonology**: (study of sound structure of spoken words) is a key element of Structured Literacy Instruction. **Phonemic awareness** (ability to distinguish / segment / blend / manipulate sounds relevant to reading/spelling) is central to phonology.
- **Sound-Symbol Association**: Once students develop phoneme awareness, they must learn the **alphabetic principle**—how to map phonemes to letters (graphemes) and vice versa.
- **Syllables**: Knowing the six syllable / vowel grapheme types helps readers associate vowel spellings with vowel sounds. Syllable division rules help readers divide / decode unfamiliar words.
- **Morphology**: A **morpheme** is the smallest unit of meaning in language. Studying base elements and affixes helps readers decode and unlock the meanings of complex words.
- **Syntax**: The set of principles that dictate the sequence and function of words in a sentence includes grammar, sentence structure, and the mechanics of language.
- **Semantics**: Semantics is concerned with meaning. The Structured Literacy curriculum (from the start) includes instruction in the comprehension and appreciation of written language.

Structured Literacy teaching is systematic and cumulative. **Systematic** means that organization of material follows the logical order of language. The sequence begins with the easiest and most basic concepts and elements and progresses methodically to the more difficult. **Cumulative** means each step is based on concepts previously learned.

**Explicit**: Structured Literacy instruction requires direct teaching of concepts with continuous student-teacher interaction and does not assume students deduce concepts. (While **multisensory teaching** lacks the extensive research that validates Structured Literacy’s other teaching principles, decades of clinical results support efficacy of simultaneous association of auditory, visual, kinesthetic-motor modalities for enhancing memory and learning in students with dyslexia.)

**Diagnostic**: Teachers must be adept at individualized instruction (even within groups) based on careful and continuous assessment, both informal (e.g., observation) and formal (e.g., with standardized measures). Content must be mastered to the degree of automaticity needed to free attention and cognitive resources for comprehension and oral/written expression.


A list of example reading intervention programs can be found at [https://charts.intensiveintervention.org/aintervention](https://charts.intensiveintervention.org/aintervention).

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15 **Structured Literacy: An Introductory Guide**

16 Retrieved from [https://dyslexiaida.org/what-is-structured-literacy/](https://dyslexiaida.org/what-is-structured-literacy/)
The table below provides Spear-Swerling’s (2018) examples of Structured Literacy activities for different levels and components of literacy. Prerequisite skills needed before introducing the activity are also provided.

<table>
<thead>
<tr>
<th>Literacy Area</th>
<th>Specific Skill</th>
<th>Sample Activity</th>
<th>Some Prerequisites</th>
</tr>
</thead>
</table>
| Phonemic awareness  | Phoneme blending, words with four to five phonemes (e.g., smash) | • Teacher models how to orally blend four- to five-phoneme words, beginning with easier-to-blend words that have continuous sounds (e.g., /sl/, /ml/, /lf/), rather than harder-to-blend stop consonants (e.g., /g/, /t/, /b/).  
• Teacher provides guided practice with multiple examples of four- to five-phoneme words.  
• Students respond orally and teacher provides immediate corrective feedback and modeling as needed. | Students can orally blend words of two or three phonemes (e.g., in, fan, mop, tub).                      |
| Phonics             | Decoding of silent-e (SE) words         | • Teacher explains the pattern of these words (they end in a vowel- consonant-e pattern) and that the first vowel is long, with the final e silent.  
• Teacher provides multiple examples of words that contain the SE pattern (stone, tape, shine, use) and that do not contain the SE pattern (tree, noise, prince, beet); teacher is careful to avoid common irregular words (done, have, some).  
• Teacher provides guided practice with a sorting task on additional, unfamiliar words, where students sort SE and not-SE words into two groups.  
• For the SE words only, students give the vowel sound of each word, then decode it. | Students can recognize and decode short- vowel (closed) syllables; students know long-vowel sounds (i.e., vowel says its name). |
| Irregular words     | Learning to read irregular words that are common in texts that students are reading (e.g., what, of, have) | • Teacher models a multisensory tracing activity with the word what.  
• Students are taught to trace over each letter of the word while saying its name (not its sound); then they say the entire word (e.g., for what, teacher models "w–h–a–t, what"); then students cover the word and try to write it from memory.  
• If students make mistakes, they repeat the tracing process.  
• If they do not make mistakes, they put the word aside for continued review later. | Students can identify letter names.                                                                  |
| Vocabulary          | Learning the meanings of unfamiliar words that are important to the literacy curriculum (e.g., beverage) | • Teacher explains the meaning of the word beverage in student- friendly language (“A beverage is a drink”).  
• Teacher provides examples of beverages (milk, soda, juice) and not- beverages (cake, ice cream, gasoline).  
• Teacher asks students to classify whether certain additional items are beverages or not (spaghetti, tea, coffee, shampoo). | Students understand the meaning of words used in the teacher’s explanation and in examples of beverages and not-beverages. |
| Syntax              | Learning to combine short, choppy sentences into longer, grammatically correct sentences | • Teacher presents examples of short “kernel sentences” that can be combined into a longer, grammatically correct sentence (e.g., The car is red. The car sped quickly down the road.).  
• Teacher models good examples of how to combine the sentences (e.g., The red car sped quickly down the road.).  
• Teacher also discusses grammatically incorrect or awkward examples of combinations (e.g., The car is red the car sped quickly down the road.).  
• Students do guided practice with additional examples of kernel sentences to combine.  
• Students eventually apply what they have learned in editing their own writing. | Students can read and write simple sentences; students have sufficient oral language ability to recognize sentences that sound grammatically correct/incorrect (most of the time). |
Paragraphs

Learning to recognize “signal words” that tie together the ideas in a paragraph (e.g., therefore, next, for example, in summary)

- Using an appropriate sample paragraph, teacher highlights examples of one class of signal words, those signaling cause and effect (e.g., because, so, as a result, consequently, therefore).
- Teacher explains how attention to these words can improve students’ ability to understand what they are reading, with repeated reference to the sample paragraph.
- Students are given other paragraphs in which to highlight and explain the signal words, with teacher feedback.
- Students eventually apply their understanding of signal words to add clarity to their writing as well as improve their reading comprehension.

Students have the background knowledge, vocabulary, and other comprehension skills to understand the paragraphs being used in the activity.

MEANING-CENTERED READING AND WRITING STRATEGIES

Most importantly: reading and writing are ways to communicate meaning. An author writes to express a message; the reader reads to receive and construct meaning. A successful reader, whether of informational texts, narrative stories, essays expressing opinions, arguments, world literature or poetry, requires the reader to be able to make sense of the text. Guided reading, read-alouds, discussion and verbal memory related performance, small group work, sustained reading practice, writing about reading and free writing may facilitate meaning-centered literacy practices and skill-building.

For struggling readers who have dyslexia, meaning-making literate practices can be disrupted by the phonological decoding challenges of reading. Students who have only had decoding instruction sometimes forget to make meaning with what they read; they can become “word callers” without understanding the meaning of a text. Readers with dyslexia also may have difficulties with language comprehension, such as limited vocabulary and a restricted repertoire of easily recognized grammatical patterns. Some students come to kindergarten with these language development issues, and it is a mistake to wait until upper elementary grades to begin serious attention on comprehension. Decoding instruction often can be incorporated with meaning-centered activities. Enjoyable and meaningful experiences with texts, centered on reading and writing for meaning, provides students greater motivation and determination to persist during decoding instruction and intervention.

Strategies that have proven to be effective are:

- interactive read-alouds
- supported reading
- discussion
- verbal memory activities
- writing about reading
- sustained reading practice
- free writing
- small group work

17 Adapted from Kentucky Dyslexia Toolkit
For some students with dyslexia, more individualized instruction may be needed to address reading deficits. In some occurrences, special education settings may be deemed appropriate. In these cases, dyslexia is categorized as a Specific Learning Disability (SLD), and the evaluation process for determining eligibility for special education services will be implemented.

According to the Individuals with Disabilities Education Act (IDEA), “The term ‘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 disorder may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations. Such term includes such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. Such term does not include a learning problem that is primarily the result of visual, hearing, or motor disabilities, of mental retardation, of emotional disturbance, or of environmental, cultural, or economic disadvantage.” (IDEA, 2004, 20 U.S.C. §1401 [30])

**COMORBID DISORDERS AND SPECIFIC LEARNING DISABILITIES**

Several disorders may be comorbid or associated conditions that occur together with SLD and should be considered during the evaluation process when dyslexia is suspected. However, it is incumbent upon eligibility teams to determine whether the SLD is the primary disability based on eligibility requirements outlined in the GADOE SLD Guidelines.

Table 8.1 provides information on how dyslexia relates to other learning, emotional and behavioral disabilities. More information can be found at [https://www.95percentgroup.com/docs/default-source/understanding-dyslexia/understanding-dyslexia-resource_comorbidity.pdf?sfvrsn=2](https://www.95percentgroup.com/docs/default-source/understanding-dyslexia/understanding-dyslexia-resource_comorbidity.pdf?sfvrsn=2)

<table>
<thead>
<tr>
<th>Comorbid Issues</th>
<th>What it is</th>
<th>Signs</th>
<th>Prevalence</th>
</tr>
</thead>
</table>
| ADHD            | Inability to stay focused includes three subtypes: ADHD Predominately Inattentive, ADHAD Predominately Hyperactive-Impulsive; ADHD Combined Type | • Trouble finishing tasks  
• Difficulty following Directions  
• Slow to respond/process  
• Forgetful  
• Difficulty sitting still  
• Easily Distracted | 12-25% of those with Dyslexia (Shaywitz, 2005) |
| Dysgraphia      | Impaired handwriting; impaired spelling; impaired ability to organize and express thoughts in writing. | Motor Processing:  
• Messy handwriting/improper spacing  
• Problems with pencil grip  
• Writing is slow and labored  
Information Processing:  
• Poor spelling and grammar  
• Run on sentences  
• Lack of paragraphs |  
| Dyspraxia       | Developmental coordination disorder that impacts fine and gross motor skills. | • Trouble using snaps, zippers  
• Poor pencil/utensil grip | Up to 85% (Pauc, 2005) |
### Oppositional Defiant Disorder

- Recurring patterns of defiant and hostile behaviors
- Temper outbursts
- Persistent stubbornness
- Unwillingness to compromise
- Verbal or physical aggressions (Greene & Doyle, 1999)

**17%** (Pauc, 2005)

### Anxiety

- Excessive worry over what might be/possible situations or outcomes “What ifs”
- Headaches; stomachaches
- Avoidance of activities or social situations
- Obsessive thoughts or worries

**Up to 29%** (Rosen, 2017)

### Dyslexia and Gifted

- Twice exceptional students who are both intellectually gifted and learning disabled
- Superior oral vocabulary (Gilger, 2017)
- Extremely curious, imaginative, and questioning

**2-5% of school age children** (Gilger, 2017)

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**Specially Designed Instruction for Students Eligible for Special Education Services**

Students who are found eligible to receive special education services based on the IDEA criteria will receive specially designed instruction to address areas of reading difficulty through the implementation of an Individualized Education Program (IEP). According to IDEA, specially designed instruction means adapting, as appropriate to the needs of an eligible child under this part, the content, methodology, or delivery of instruction—

- To address the unique needs of the child that result from the child’s disability; and
- To ensure access of the child to the general curriculum, so that the child can meet the educational standards within the jurisdiction of the public agency that apply to all children.

<table>
<thead>
<tr>
<th>Specially Designed Instruction</th>
<th>Purposeful</th>
<th>Intentional</th>
<th>Planned</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individualized</td>
<td>Teaching</td>
<td>Coaching</td>
<td>Directing</td>
</tr>
<tr>
<td>Personalized</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Customized</td>
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<td></td>
</tr>
</tbody>
</table>

The IEP of a student identified with a SLD in basic reading skills (e.g., dyslexia) must contain the components required by IDEA, such as the present level of academic achievement and functional performance, goals, supplementary aids and services, accommodations, placement, and the participation in the state and district accountability system. Because dyslexia is a disorder that affects reading decoding, word recognition, spelling, and reading fluency, the IEP of a student with a SLD in reading must include standards-based and/or functional reading goals that address foundational skills (and objectives if necessary) as well as accommodations to facilitate their performance in the general education curriculum.

For more information on Specially Designed Instruction, please refer to the GaDOE Specially Designed Instruction Mini-Module at [https://www.gadoe.org/Curriculum-Instruction-and-Assessment/Special-Education-Services/Documents/LRE/Specially%20Designed%20Instruction%20PowerPoint.pdf](https://www.gadoe.org/Curriculum-Instruction-and-Assessment/Special-Education-Services/Documents/LRE/Specially%20Designed%20Instruction%20PowerPoint.pdf)
ACCOMMODATIONS

Students who are eligible for Special Education services often benefit from instructional and test accommodations. Any appropriate accommodations should be written into a student’s IEP. Instructional accommodations may include how instruction is provided, how the child is expected to respond to instruction, how the child participates in classroom activities and the kinds of instructional materials used. Test accommodations may include providing extended time, allowing for breaks, reading the test questions aloud, and/or taking the test in an alternate location.

Children receiving accommodations are still expected to meet the same grade level standards as their peers without disabilities. For example, a child might listen to portions of a text rather than reading it or answer questions orally or use a computer keyboard instead of writing with a pencil. Accommodations should provide access to or promote skill growth and some accommodations may be used instructionally that will not necessarily be used for assessment. Appropriateness and efficacy of accommodations should be evaluated on an ongoing basis. Accommodations should not be confused with differentiated instruction.

The following accommodations are provided as examples and may not be appropriate for all students with characteristics of dyslexia:

**Text Reading**
Provide text-to-speech technology, allowing the student to hear digital text. This allows for digital textbooks and digital books to be read to the student in part or whole as the student follows along in the written text.

Provide audio books for literature and grade-level text. The student should have a copy of the text in front of them while listening to help focus their attention, to increase their visual memory of words, and so that they may take advantage of graphics within the text. (See www.learningally.org or www.bookshare.org for low-cost and free audiobooks for schools and families; eBooks, which can be converted to audio file, are another good option.)

Oral testing or prompting upon request (i.e., allowing a student to request that certain words or text be read to them) when allowable.

**Spelling and Writing**
Allow use of a personal ‘vocabulary’ notebook, a dictionary, a speller’s dictionary, a Franklin Speller, or similar device for in-class assignments and to assist with correct spelling. The student’s spelling skills will need to be at least at a fifth to sixth grade level for this device to be helpful.

Allow access to a computer for written assignments. A program with word prediction and text-to-speech to compose writing assignments may be helpful as they get older.

Use of a recorder to record lectures or directions, especially as they get older.

**Assistive Technology**
An assistive technology (AT) device is defined as “any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve functional capabilities of a child with a disability.” According to the Office of Special Education and Rehabilitative Services (OSERS), AT must be provided by the school division at no cost to the family. If the IEP team decides that AT is needed for home use in order for the child to access FAPE, it must be provided by the school division at no cost to the family as well. To ensure FAPE, the need for AT must be included in the IEP and determined on a case-by-case basis, depending on the need of the student.

Effective integration of technology within the academic areas of instruction may enhance the outcomes of students with SLD (including dyslexia) and maximize their accessibility to the general education curriculum. For example, some students with SLD in written language can benefit from software that emphasizes word processing, especially from those that combine visual and auditory input. When choosing assistive technology for students with dyslexia, there is a need to identify the technology that addresses the student’s area of identified need, supports the goal of instruction and
supports student outcome. They can be compensatory/adaptive, instructional, or a combination of the two (e.g., technology-based graphic organizers and video games) (Allsopp, McHatton, & Farmer, 2010; Englert, Wu, & Zhao, 2005; Marino & Beecher, 2010; Smith & Okolo, 2010).

For more information on Assistive Technology, please refer to the GaDOE website for the Georgia Project for Assistive Technology [http://www.gpat.org/Georgia-Project-for-Assistive-Technology/Pages/default.aspx](http://www.gpat.org/Georgia-Project-for-Assistive-Technology/Pages/default.aspx). Use the left margin to locate specific needs for Assistive Technology.

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18 Adapted from 95% Group: Dyslexia and Comorbidity
19 Adapted from GaDOE Specially Designed Instruction Module
20 Retrieved from the GaDOE Special Education Rules Implementation Manual
21 Tennessee Center for the Study and Treatment of Dyslexia: Commonly Adopted Accommodations to Support Students with Characteristics of Dyslexia
LITERACY CONVERSATIONS

School instructional leaders must become highly knowledgeable and lead their professional learning communities to improve literacy outcomes. Literacy conversations in a school community must be focused on developing students as readers and writers who make meaning with printed texts. These conversations must include all stakeholders who play a role supporting students’ literacy learning.

Inclusive professional learning communities have elements to support all students’ learning to read:

• Identify adults’ common beliefs about literacy. What do we believe about literacy learning? Why? Do our beliefs align with our practice? What evidence do we have to support our beliefs?
• Create opportunities to observe, learn, discuss, and modify the school’s culture to meet the needs of the students collectively. Consider the students in the school “our students” rather than students belonging to individual teachers.
• Celebrate learning and learners by collecting evidence (data) and displaying exemplars.
• Ensure that all adults and students use the same words to describe their literacy knowledge and practices. Develop a common language.
• Reflect on common literacy practices. Note when instruction and/or assessments do not align to “real world” literacy practices. What practices can we take off our instructional plate? What can we refine, adjust, or modify?
• Focus on each student’s strengths before weaknesses. Build on those strengths.

Professional literacy conversations must be grounded in a common language for the whole school. Stakeholders need to know, identify, and communicate what a high-performing school looks like and feels like. They must address the learning environment, student interactions, and student engagement. Each component is described below.

LEARNING ENVIRONMENT (THE WHAT OF LEARNING)

• Content and language/literacy learning outcomes are posted, measurable, observable, and in student-friendly language (students know what they are learning and why).
• Classrooms are student centered, and student work is displayed, current, and accurate; classroom charts are made with/by students (students show evidence of their learning, resources, published works).
• Effective classroom management organization exists, and rules, procedures, and behavior expectations are posted.
• Classroom library is organized with student input; it’s accessible to all students and contains a variety of genres.
• Word walls and vocabulary charts are created with/by students; symbols and pictures are used as a resource by all students.
• Manipulatives, objects, and real-world examples are used.
• Transitions between activities are effective (sense of urgency).

TEACHER INSTRUCTIONAL PRACTICES

• Demonstration (I do it) occurs for the whole group; easily understandable instruction is provided throughout the lesson: clear language, pacing, visuals, color, and different learning modalities are evident; instruction is explicit.
• Shared experiences (we do it) occur with the whole group and small groups.
• Guided practice (you do it together) takes place in small groups and 1-1 with minimal guidance; for new learning, fluency and transfer occurs with support (students are in charge of the learning).
• Independent practice (you do it) time is provided for mastery of learning.
• Closure includes reviewing learning goals with students; various assessments are used (self, formative, interim, summative, anecdotal, exit cards, etc.).
• Student learning is monitored; engagement and interactions are noted; feedback is immediate, effective, and specific.
• Higher order thinking questions and wait time are incorporated into the lessons.

STUDENT INTERACTIONS (THE HOW OF LEARNING)

• Students are thinking, listening, speaking, reading, writing, sharing, and discussing.
• Students are involved in text activities, note-taking, and research; they use assistive
technologies and multi-media materials; they use multiple tools for construction and composition.

• Students are involved in goal setting, planning, and assessments (self, formative, interim, summative).
• Students are involved in guided practice, projects, conferencing, collaborating, and the community; they use personal coping skills and strategies.
• Students perform independent practice for mastery; they practice planning, making choices, autonomy, visualization, and manipulation.
• Students perform for a real audience and purpose.
• Students participate in higher order thinking and use a variety of learning modalities; physical action is involved.

STUDENT ENGAGEMENT (THE WHY OF LEARNING)

• Students connect learning to culture, background knowledge, and strengths.
• Students are engaged in meaningful, challenging, relevant activities; they become self-determined learners.
• Students are engaged in highly motivating real-world experiences and issues.
• Students demonstrate learning through planning, thinking, listening, speaking, reading, and writing; they are engaged in shared learning.
• Student's materials, resources, and texts are relevant and suitable to the content and literacy learning outcomes; students are self-regulating by planning, monitoring, and evaluating personal progress.
• Students have multiple opportunities for dialogue and conversations (50% student talk); they are engaged in information processing and transfer of learning.
• Students are participating in different activities with different accommodations.

GEORGIA STANDARDS OF EXCELLENCE

The K-5 Georgia Standards of Excellence (GSE) define what students should understand and be able to do by the end of each grade. Fundamentally, students in grades K through 5 are focused on developing comprehension strategies that will enable them to manipulate grade-level texts of appropriate complexity and communicate effectively both in writing and in speaking. Students will begin to anchor their inquiries and responses firmly to the text, whether literary or informational, using increasingly specific and relevant evidence to support their claims and inferences. Students’ analytical skills will extend to identifying main idea/theme, understanding character and plot development, and evaluating the impact of word choice. Additionally, students will identify structural elements in text such as scenes and chapters, distinguish narrative voice, understand the impact of aesthetic elements, and make logical connections. A key component of the GSE is the expectation of appropriate grade level complexity in text choices. Complexity levels are assessed based upon a variety of indicators.

To access the GSE for English Language Arts Standards, visit https://www.georgiastandards.org/Georgia-Standards/Pages/ELA.aspx

GET GEORGIA READING

The Get Georgia Reading Campaign partners developed a clearly defined framework to create the conditions for every child in Georgia to become a proficient reader by the end of third grade. The campaign framework consists of four research-based pillars that work together to provide a platform for success. Get Georgia Reading’s Four Campaign Pillars are:

• Language Nutrition: All children receive abundant, language-rich adult-child interactions, which are as critical for brain development as healthy food is for physical growth.
• Access: All children and their families have year-round access to, and supportive services for, healthy physical and social-emotional development and success in high-quality early childhood and elementary education.
• Positive Learning Climate: All educators, families, and policymakers understand and address the impact of learning climate on social-emotional development, attendance, engagement, academic achievement, and ultimately student success.
• Teacher Preparation and Effectiveness: All teachers of children ages 0-8 are equipped with evidence-informed skills, knowledge, and resources that effectively meet the literacy needs of each child in a developmentally appropriate manner. More information on Get Georgia Reading Campaign can be found at http://getgeorgiareading.org.
LITERACY FOR LEARNING, LIVING AND LEADING PLAN (L4GA)

In partnership with the Get Georgia Reading Campaign, the Literacy for Learning, Living and Leading Plan (L4GA) offers a unique approach to improving literacy by unifying community-driven action with research-proven instruction. Georgia’s state plan promises to improve literacy learning by establishing partnerships that utilize evidence-based practices (EBP) with proven success for improving student learning, teacher learning, classroom literacy instruction (birth to grade 12), school climate, family literacy and community-school partnerships. For additional information on L4GA, visit https://www.gadoe.org/Curriculum-Instruction-and-Assessment/L4/Pages/default.aspx.

DYSLEXIA ENDORSEMENT PROGRAMS IN GEORGIA

Per SB48, “The Professional Standards Commission shall create a dyslexia endorsement for teachers trained in appropriately recognizing and responding to students with characteristics of dyslexia and language disorders, such as difficulty with expressive or receptive language.” In accordance with the bill, the Georgia Professional Standards Commission (GaPSC) and GaDOE have collaborated to create a dyslexia endorsement program that is currently available at numerous colleges, universities, and RESAs across the state of Georgia. In order to receive a GaPSC endorsement for dyslexia, educators must enroll in a GaPSC-approved program. Alternative routes are not possible. Please contact the program provider or refer to GAPSC Approved Dyslexia Endorsement Programs for updates and further information. For information about the Dyslexia Endorsement, contact the Georgia Professional Standards Commission.

PROFESSIONAL LEARNING OPPORTUNITIES

Professional learning about how dyslexia is different from other reading difficulties is a necessary focus for professional learning among educators in Georgia. The following resources may serve districts with dyslexia-related professional development opportunities and assist districts in the identification and instruction of students with dyslexia. Additional resources and services may be available in local school districts. (Note: This is not an exhaustive list, and GaDOE does not endorse any organization.)

<table>
<thead>
<tr>
<th>Professional Learning Opportunity</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>AIM Institute for Learning and Research</td>
<td><a href="https://institute.aimpa.org/">https://institute.aimpa.org/</a></td>
</tr>
<tr>
<td>The Center for Effective Reading Instruction (CERI)</td>
<td><a href="https://effectiverreading.org/">https://effectiverreading.org/</a></td>
</tr>
<tr>
<td>Cox Campus</td>
<td><a href="https://www.coxcampus.org/">https://www.coxcampus.org/</a></td>
</tr>
<tr>
<td>The Dyslexia Resource</td>
<td><a href="https://dyslexiaresource.org/">https://dyslexiaresource.org/</a></td>
</tr>
<tr>
<td>Dyslexia Training Institute</td>
<td><a href="https://www.dyslexiatraininginstitute.org/certification.html">https://www.dyslexiatraininginstitute.org/certification.html</a></td>
</tr>
<tr>
<td>Institute for Multi-Sensory Education</td>
<td><a href="https://www.orton-gillingham.com/">https://www.orton-gillingham.com/</a></td>
</tr>
<tr>
<td>IDA Teacher Training Programs (Independent)</td>
<td><a href="https://dyslexiaida.org/accredited-teaching-training-programs/">https://dyslexiaida.org/accredited-teaching-training-programs/</a></td>
</tr>
<tr>
<td>IDA Teacher Training Programs (University)</td>
<td><a href="https://dyslexiaida.org/university-programs-accredited-by-ida/">https://dyslexiaida.org/university-programs-accredited-by-ida/</a></td>
</tr>
<tr>
<td>International Multisensory Structured Language Education Council (IMSLE)</td>
<td><a href="http://www.imslec.org/">http://www.imslec.org/</a></td>
</tr>
<tr>
<td>Language Essentials for Teachers of Reading and Spelling (LETLS)</td>
<td><a href="https://www.voyagersopris.com/professional-development/letrs/overview">https://www.voyagersopris.com/professional-development/letrs/overview</a></td>
</tr>
<tr>
<td>SREB Teacher Training Resources</td>
<td><a href="https://www.sreb.org/dyslexia/training">https://www.sreb.org/dyslexia/training</a></td>
</tr>
<tr>
<td>Tennessee Center for the Study and Treatment of Dyslexia</td>
<td><a href="https://www.mtsu.edu/dyslexia/overview.php">https://www.mtsu.edu/dyslexia/overview.php</a></td>
</tr>
</tbody>
</table>
PROFESSIONAL LEARNING ORGANIZATIONS

Many local organizations are working to provide educator and parent support for students with dyslexia. Below is a list of local organizations to contact if more information is needed. (Note: This is not an exhaustive list, and GaDOE does not endorse any organization.)

<table>
<thead>
<tr>
<th>Professional Learning Organization</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>International Dyslexia Association-Georgia</td>
<td><a href="https://ga.dyslexiaida.org/">https://ga.dyslexiaida.org/</a></td>
</tr>
<tr>
<td>Decoding Dyslexia-Georgia</td>
<td><a href="https://decodingdyslexiaga.com/">https://decodingdyslexiaga.com/</a></td>
</tr>
<tr>
<td>Reading League-Georgia</td>
<td><a href="https://ga.thereadingleague.org/">https://ga.thereadingleague.org/</a></td>
</tr>
<tr>
<td>Georgia Speech-Language-Hearing Association</td>
<td><a href="https://gsa.memberclicks.net/">https://gsa.memberclicks.net/</a></td>
</tr>
</tbody>
</table>

REFERENCES


psychoeducational profile of children with specific learning disability and co-occurring attention-deficit hyperactivity disorder. *Indian Journal of Medical Science*, 61, 639-647.


Understanding comprehension - Primary Education Network. Retrieved from Primary Education Network website: blogs.nottingham.ac.uk/primaryeducationnetwork/2016/09/22/understanding-comprehension/

## APPENDIX A: GLOSSARY

The following alphabetical list of terms is provided to give clarity for the specialized terminology that is used within the Resource Guide and other dyslexia resources.

<table>
<thead>
<tr>
<th>Area</th>
<th>Definition</th>
<th>Example/Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Articulatory Aphasia</td>
<td>A condition characterized by either partial or total loss of the ability to communicate verbally or through written words</td>
<td>The student may have difficulty finding the words to express a thought</td>
</tr>
<tr>
<td>Comorbid</td>
<td>a situation where two or more conditions that are diagnostically distinguishable from one another tend to occur together.</td>
<td>A student has been diagnosed with ADHD and a Specific Learning Disability in Reading</td>
</tr>
<tr>
<td>Curriculum-Based Measures (CBMs)</td>
<td>A set of individually administered standardized procedures designed to assess basic skills in reading, mathematics, writing, and spelling</td>
<td>oral reading probes - identifying correct words while a child reads for a minute from a passage</td>
</tr>
<tr>
<td>Discourse</td>
<td>verbal interchange of ideas; conversation</td>
<td>Dialogue, letter, conversation; is made up of more than one sentence</td>
</tr>
<tr>
<td>Dyscalculia</td>
<td>The inability to understand the meaning of numbers, the basic operations of addition and subtraction, or the complex operations of multiplication and division or to apply math principles to solve practical or abstract problems</td>
<td>The student may struggle with:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Telling time</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Recalling basic math facts</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Math calculations</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Identifying math symbols</td>
</tr>
<tr>
<td>Dysgraphia</td>
<td>Difficulty in automatically remembering and mastering the sequence of muscle motor movements needed to accurately write letters or numbers.</td>
<td>The student may struggle with:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Forming letters</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Spacing letters correctly</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Writing in a straight line</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Making letters the correct size</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Holding and controlling writing utensils</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Applying the appropriate pressure when writing</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Sustaining the right arm position and posture for writing</td>
</tr>
<tr>
<td>Dyslexia</td>
<td>A specific learning disability characterized by difficulties with accurate and fluent word recognition, poor spelling and decoding abilities that typically result from the phonological component of language and are often unexpected in relation to other cognitive abilities.</td>
<td>The student may struggle with:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Writing</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Spelling</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Recognizing sight words</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Decoding</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Reading fluency</td>
</tr>
<tr>
<td>Morphology</td>
<td>The study of how the aspects of language structure are related to the ways words are formed from prefixes, roots, and suffixes, and how words are related to each other</td>
<td></td>
</tr>
<tr>
<td>Multisensory</td>
<td>Use of two or more sensory pathways (auditory, visual, kinesthetic, tactile)</td>
<td>Ex: The use of an audiobook and printed text or using manipulatives and movement</td>
</tr>
</tbody>
</table>
| **Orthographic Awareness** | The ability to perceive and manipulate aspects of a writing system and the visual aspects of reading and spelling, such as letter, letter patterns, and words | The student may have difficulty with:  
• Sight word recognition  
• Spelling  
• Letter recognition and reversals  
• Written expression  
• Conventions |
|----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| **Phonological Awareness** | Broad category comprising a range of understandings related to the sounds of words and word parts  
The ability to recognize that a spoken word consists of a sequence of individual sounds and ability to manipulate individual sounds when speaking. | Includes:  
• listening  
• rhyming  
• blending  
• alliteration  
• segmenting  
• syllables |
| **Phonemic Awareness** | The ability to notice, think about, and work with the individual sounds in spoken words  
• deals only with sounds, not letters  
• a subcomponent of phonological awareness | • identifying and combining/blending the separate sounds of a word to say the word ("/c/ /a/ /t/ - cat.")  
• also, verbally manipulating sounds, changing "cat" to "mat"

| **Phoneme/Grapheme Correspondence** | The understanding and use of the alphabetic principle, that there is a predictable relationship between phonemes (the sounds in spoken language) and graphemes (the letters that represent those sounds) in written language and that this information is used to decode and spell words | "coin" is decoded as /c/ /oi/ /n/ and spelled as c-oi-n |
| **Pragmatics** | Ability to use language in context to communicate | Understanding the context of a conversation based on the intent of those involved in the conversation.  
Q: Have you seen Meg?  
A: The red bike is parked across the street.  
We contextually understand that Meg has a red bike and she is near. |
| **Rapid Naming** | The ability to connect visual verbal information by giving the appropriate names to common objects, colors, letters, and digits (quickly naming what is seen) | seeing a picture of an airplane and being able to quickly retrieve and say the word “airplane” |
| **Semantics** | the meaning, or an interpretation of the meaning, of a word, phrase, sentence, or text  
*interpretive | • subtle shades of meaning: "destination" vs. "last stop"  
• multiple meanings:  
  • "train" (railcars) vs. "train" (to teach)  
  • idiom: "the ball is in your court" means the next step is up to you |
| **Syllable Structure** | A syllable is a word part that contains a vowel or, in spoken language, a vowel sound (e- vent, news-pa- per)  
*syllabication is the act of breaking words into syllables | Six commonly used syllable types:  
• Closed: cat  
• Open: he  
• Vowel-consonant-e (vce): like  
• Consonant-l-e: candle  
• R-controlled: star |
<table>
<thead>
<tr>
<th>Syntax</th>
<th>Ability to recognize and use correct phrase and sentence structure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>[Diagram of sentence structure with categories like noun phrase, verb phrase, etc.]</td>
</tr>
</tbody>
</table>

- Vowel pairs: count, rainbow
October 23, 2015

Dear Colleague:

Ensuring a high-quality education for children with specific learning disabilities is a critical responsibility for all of us. I write today to focus particularly on the unique educational needs of children with dyslexia, dyscalculia, and dysgraphia, which are conditions that could qualify a child as a child with a specific learning disability under the Individuals with Disabilities Education Act (IDEA). The Office of Special Education and Rehabilitation Services (OSERS) has received communications from stakeholders, including parents, advocacy groups, and national disability organizations, who believe that State and local educational agencies (SEAs and LEAs) are reluctant to reference or use dyslexia, dyscalculia, and dysgraphia in evaluations, eligibility determinations, or in developing the individualized education program (IEP) under the IDEA. The purpose of this letter is to clarify that there is nothing in the IDEA that would prohibit the use of the terms dyslexia, dyscalculia, and dysgraphia in IDEA evaluation, eligibility determinations, or IEP documents.

Under the IDEA and its implementing regulations “specific learning disability” is defined, in part, as “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 the 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.” See 20 U.S.C. §1401(30) and 34 CFR §300.8(c)(10) (emphasis added). While our implementing regulations contain a list of conditions under the definition “specific learning disability,” which includes dyslexia, the list is not exhaustive. However, regardless of whether a child has dyslexia or any other condition explicitly included in this definition of “specific learning disability,” or has a condition such as dyscalculia or dysgraphia not listed expressly in the definition, the LEA must conduct an evaluation in accordance with 34 CFR §§300.304-300.311 to determine whether that child meets the criteria for specific learning disability or any of the other disabilities listed in 34 CFR §300.8, which implements IDEA’s definition of “child with a disability.”

For those students who may need additional academic and behavioral supports to succeed in a general education environment, schools may choose to implement a multi-tiered system of supports (MTSS), such as response to intervention (RTI) or positive behavioral interventions and supports (PBIS). MTSS is a schoolwide approach that addresses the needs of all students, including struggling learners and students with disabilities, and integrates assessment and intervention within a multi-level instructional and behavioral system to maximize student achievement and reduce problem behaviors.

MTSS, which includes scientific, research-based interventions, also may be used to identify children suspected of having a specific learning disability. With a multi-tiered instructional
framework, schools identify students at risk for poor learning outcomes, including those who may have dyslexia, dyscalculia, or dysgraphia; monitor their progress; provide evidence-based interventions; and adjust the intensity and nature of those interventions depending on a student’s responsiveness. Children who do not, or minimally, respond to interventions must be referred for an evaluation to determine if they are eligible for special education and related services (34 CFR §300.309(c)(1)); and those children who simply need intense short-term interventions may continue to receive those interventions. OSERS reminds SEAs and LEAs about previous guidance regarding the use of MTSS, including RTI, and timely evaluations, specifically that a parent may request an initial evaluation at any time to determine if a child is a child with a disability under IDEA (34 CFR §300.301(b)), and the use of MTSS, such as RTI, may not be used to delay or deny a full and individual evaluation under 34 CFR §§300.304-300.311 of a child suspected of having a disability.

In determining whether a child has a disability under the IDEA, including a specific learning disability, and is eligible to receive special education and related services because of that disability, the LEA must conduct a comprehensive evaluation under §300.304, which requires the use of a variety of assessment tools and strategies to gather relevant functional, developmental, and academic information about the child. This information, which includes information provided by the parent, may assist in determining: 1) whether the child is a child with a disability; and 2) the content of the child’s IEP to enable the child to be involved in, and make progress in, the general education curriculum. 34 CFR §300.340(b)(1). Therefore, information about the child’s learning difficulties, including the presenting difficulties related to reading, mathematics, or writing, is important in determining the nature and extent of the child’s disability and educational needs. In addition, other criteria are applicable in determining whether a child has a specific learning disability. For example, the team determining eligibility considers whether the child is not achieving adequately for the child’s age or to meet State-approved grade-level standards when provided with learning experiences and instruction appropriate for the child’s age or the relevant State standards in areas related to reading, mathematics, and written expression. The team also must determine that the child’s underachievement is not due to lack of appropriate instruction in reading or mathematics. 34 CFR §§300.309(a)(1) and (b).

Section 300.311 contains requirements for specific documentation of the child’s eligibility determination as a child with a specific learning disability, and includes documentation of the information described above. Therefore, there could be situations where the child’s parents and the team of qualified professionals responsible for determining whether the child has a specific learning disability would find it helpful to include information about the specific condition (e.g., dyslexia, dyscalculia, or dysgraphia) in documenting how that condition relates to the child’s eligibility determination. 34 CFR §§300.306(a)(1), (c)(1) and 300.308.

¹ See OSEP Memo 11-07 (January 21, 2011) available at: www.ed.gov/policy/speced/guid/idea/memosdeletes/osep11-07rtimemo.pdf Under 34 CFR §300.307(a)(2)-(3), as part of their criteria for determining whether a child has a specific learning disability, States must permit the use of a process based on the child’s response to scientific, research-based intervention, and may permit the use of other alternative research-based procedures in making this determination.
Stakeholders also requested that SEAs and LEAs have policies in place that allow for the use of the terms dyslexia, dyscalculia, and dysgraphia on a child’s IEP, if a child’s comprehensive evaluation supports use of these terms. There is nothing in the IDEA or our implementing regulations that prohibits the inclusion of the condition that is the basis for the child’s disability determination in the child’s IEP. In addition, the IEP must address the child’s needs resulting from the child’s disability to enable the child to advance appropriately towards attaining his or her annual IEP goals and to enable the child to be involved in, and make progress in, the general education curriculum. 34 CFR §§300.320(a)(1), (2), and (4). Therefore, if a child’s dyslexia, dyscalculia, or dysgraphia is the condition that forms the basis for the determination that a child has a specific learning disability, OSERS believes that there could be situations where an IEP Team could determine that personnel responsible for IEP implementation would need to know about the condition underlying the child’s disability (e.g., that a child has a weakness in decoding skills as a result of the child’s dyslexia). Under 34 CFR §300.323(d), a child’s IEP must be accessible to the regular education teacher and any other school personnel responsible for its implementation, and these personnel must be informed of their specific responsibilities related to implementing the IEP and the specific accommodations, modifications, and supports that must be provided for the child in accordance with the IEP. Therefore, OSERS reiterates that there is nothing in the IDEA or our implementing regulations that would prohibit IEP Teams from referencing or using dyslexia, dyscalculia, or dysgraphia in a child’s IEP.

Stakeholders requested that OSERS provide SEAs and LEAs with a comprehensive guide to commonly used accommodations in the classroom for students with specific learning disabilities, including dyslexia, dyscalculia, and dysgraphia. The IDEA does not dictate the services or accommodations to be provided to individual children based solely on the disability category in which the child has been classified, or the specific condition underlying the child’s disability classification. The Office of Special Education Programs (OSEP) funds a large network of technical assistance centers that develop materials and resources to support States, school districts, schools, and teachers to improve the provision of services to children with disabilities, including materials on the use of accommodations. The U.S. Department of Education does not mandate the use of, or endorse the content of, these products, services, materials, and/or resources; however, States and LEAs may wish to seek assistance from entities such as the National Center on Intensive Intervention at: [http://www.intensiveintervention.org](http://www.intensiveintervention.org), the Center for Parent Information and Resources available at: [http://www.parentcenterhub.org](http://www.parentcenterhub.org), and the National Center on Accessible Educational Materials available at: [http://aem.cast.org/](http://aem.cast.org/). For a complete list of OSEP-funded technical assistance centers please see: [http://ecrs.osepideasthatawork.org/](http://ecrs.osepideasthatawork.org/).

In implementing the IDEA requirements discussed above, OSERS encourages SEAs and LEAs to consider situations where it would be appropriate to use the terms dyslexia, dyscalculia, or dysgraphia to describe and address the child’s unique, identified needs through evaluation, eligibility, and IEP documents. OSERS further encourages States to review their policies.

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2 Although the IDEA uses the term “accommodations” primarily in the assessment context, OSERS understands the request to refer to the various components of a free appropriate public education, including special education, related services, supplementary aids and services, and program modifications or supports for school personnel, as well as accommodations for students taking assessments.
procedures, and practices to ensure that they do not prohibit the use of the terms dyslexia, dyscalculia, and dysgraphia in evaluations, eligibility, and IEP documents. Finally, in ensuring the provision of free appropriate public education, OSERS encourages SEAs to remind their LEAs of the importance of addressing the unique educational needs of children with specific learning disabilities resulting from dyslexia, dyscalculia, and dysgraphia during IEP Team meetings and other meetings with parents under IDEA.

I hope this clarification is helpful to both parents and practitioners in ensuring a high-quality education for children with specific learning disabilities, including children with dyslexia, dyscalculia, and dysgraphia. If you have additional questions or comments, please email them to sld@ed.gov.

Sincerely,

/s/

Michael K. Yudin
APPENDIX C: SENATE STUDY COMMITTEE RECOMMENDATIONS

FINAL REPORT OF THE SENATE STUDY COMMITTEE ON DYSLEXIA (SR 761)

Committee Members

Senator Fran Millar - Chair
District 40

Senator Matt Brass
District 48

Senator Gloria Butler
District 55

Dr. Gary McGiboney
Department of Education

Dr. Leslie Stuart
Licensed Clinical Psychologist

Prepared by the Senate Research Office, 2018
TABLE OF CONTENTS

Committee Focus, Creation, and Duties ................................................................. 3
Summary of Testimony and Discussion ............................................................... 4
Committee Recommendations ............................................................................. 8
Signature Page ....................................................................................................... 9

Appendices ........................................................................................................... 0
  Dyslexia Policies in SREB States: Addressing the Needs of Struggling Young Readers.... Appendix A
  Dyslexia Policies in SREB States ........................................................................ Appendix B
  Reading and Dyslexia Screening Components and Instruments in SREB States .... Appendix C

Page 2 of 9
STUDY COMMITTEE FOCUS, CREATION, & DUTIES

The Senate Study Committee on Dyslexia (the “Committee”) was created with the adoption of Senate Resolution 761 during the 2018 Legislative Session of the Georgia General Assembly. The Committee was charged with undertaking a study of community-based solutions to better identify and meet the needs of dyslexic students in Georgia through early diagnosis, early remediation, and evidence-based solutions. Senate Resolution 761 expressed the sense of the Senate that Georgia should keep current with other states’ policy trends on dyslexia, the most common learning disability, affecting approximately one in five individuals and approximately 80 percent of all individuals with a learning disability.

Senator Fran Millar of the 40th served as Chair of the Committee. The other legislative members included Senator Matt Brass of the 28th and Senator Gloria Butler of the 50th. The Governor appointees included: Dr. Gary McGiboney, Deputy Superintendent of External Affairs and Policy at the Georgia Department of Education; and Dr. Leslie Stuart, licensed clinical psychologist and former board member for the International Dyslexia Association, Georgia Chapter.

The following legislative staff members were assigned to this Committee: Natalie Heath of the Senate Budget and Evaluation Office; Elisabeth Fletcher of the Senate Press Office; Elizabeth Holcomb of the Senate Research Office; and Donna Nealey, Legislative Assistant to Senator Millar and Committee Secretary for the Senate Higher Education Committee.

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SUMMARY OF TESTIMONY AND DISCUSSION

Background on Federal IDEA
The Individuals with Disabilities Education Act of 2004 (IDEA) enumerates 13 learning disability categories or conditions that make students eligible to receive special education services through an Individualized Education Program (IEP):

- Autism;
- Deaf-blindness;
- Deafness;
- Hearing Impairment;
- Emotional and Behavioral Disorder;
- Intellectual Disabilities;
- Orthopedic Impairment;
- Other Health Impairment;
- Significant Development Delay;
- Specific Learning Disability;
- Speech-Language Impairment;
- Traumatic Brain Injury; and
- Visual Impairment and Blindness

The list of qualifying conditions includes a specific learning disability (SLD), which is defined under IDEA and its implementing regulations to include dyslexia, dysgraphia, and dyscalculia.\(^2\)

Specific learning disability is defined as 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 do mathematical calculations. The term includes such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. The term does not apply to students who have learning problems that are primarily the result of visual, hearing or motor disabilities, intellectual disabilities, emotional or behavioral disorders or environmental, cultural or economic disadvantage.

However, IDEA does not provide a definition for dyslexia, nor does it dictate the services or accommodations to be provided to individual children based solely on the disability category in which the child has been classified, or the specific condition underlying the child's disability classification. These limitations of IDEA were detailed in a Dear Colleague Letter issued by OSEP in 2015. As a result, states have adopted their own dyslexia laws, definitions, and universal screening programs. These initiatives were examined by the Committee during this study.

Meeting 1 – August 17, 2018
At the first meeting, background information and an overview of the issues to be studied were provided by:

- Caitlyn Dooley, PhD. Deputy Superintendent of Teaching and Learning, Georgia Department of Education (GaDOE).

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\(^2\) 34 C.F.R. §300.8(d)(10)
- Jennifer Lindstrom, PhD: Associate Professor in Special Education and Adjunct Professor, Department of Educational Psychology at the University of Georgia.
- Leslie Stuart, PsyD: Licensed Clinical Psychologist and former board member for the International Dyslexia Association, Georgia Chapter.

Chairman Millar provided introductory remarks and explained that Georgia has fallen behind when it comes to dyslexia screening and training policies in schools. After reviewing research provided by SREB, he realized that Georgia is the only state in the southeast that does not have a comprehensive program for dyslexia.

Dr. Stuart shared her expertise with the rest of the Committee and provided testimony on definitions, clinical approaches, and the misconceptions associated with detecting dyslexia (e.g. reading words backwards). It is estimated that 20 percent of the population has dyslexia, 50 percent of children with learning disabilities have problems with reading, and a reading disorder alone can affect learning in most academic subjects. Dr. Stuart stressed the importance of early identification and explained that the earlier parents and teachers become aware of a child's difficulty and seek intervention, the greater the chance for that child to become a fluent reader. In short, the earlier we detect, the better the prognosis and impact of fluency.

Dr. Dooley spoke on dyslexia identification and services in Georgia on behalf of Georgia Department of Education (GaDOE). State-wide intervention programs span from birth to K-12, including programs such as Babies Can't Wait, Children First, Georgia PINES, Early Intervention Program (EIP) for grades K-5, and Remedial Education Program (REP) for grades 6-12. Dr. Dooley indicated that workforce and training gaps exist in special education programs in preschool, Pre-K, and grades K-12.

GaDOE defines dyslexia in accordance with the International Dyslexia Association (IDA) as follows:

"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."

As explained by Dr. Dooley, GaDOE plays a key role in providing general supervision across the state for local school districts to improve educational results and functional outcomes for all children with disabilities while ensuring that the requirements of IDEA are met. GaDOE's Division for Special Education Services and Supports is mandated by law to monitor compliance with IDEA, federal regulations, and rules promulgated by the State Board of Education. The federal Office of Special Education Programs (OSEP) specifically requires "a continuous review procedure designed to compare present functioning against specific standards, and to yield a profile showing areas of conformance as well as those in which new procedures, training, or other methods of improvement may be needed in order to comply with specific standards."
Meeting 2 – September 14, 2018

Testimony was provided by the following individuals:

- Susan Adams: Deputy Commissioner for Pre-K and Instructional Support Services, Georgia Department of Early Care and Learning (DECAL).
- Dr. Marti Venn: Deputy Vice Chancellor for Academic Affairs, University System of Georgia (USG).
- Ms. Ashley Jones: Director of Government Relations, USG.
- Stephen Pruitt: President of Southern Regional Education Board (SREB).
- Samantha Durance: Policy Analyst, SREB.

Ms. Adams of DECAL provided information on dyslexia identification and services in Georgia. This included an extension list of red flags of learning disabilities in general, as well as those specific to dyslexia such large discrepancies in language, receptive, cognitive processing, and motor.

Dr. Venn of USG explained to the committee that 24 of its institutions have teacher training and preparation. Of these, 15 institutions offer a Bachelor of Science in Elementary Education, 6 institutions offer a Bachelor of Science in Early Childhood Special Education, 10 institutions offer a Bachelor of Science in Special Education, and 6 institutions offer a Master of Arts in Special Education. Teacher education curriculum includes a mandatory introductory course on special education and a survey introductory course that covers a broad range of disabilities and characteristics including dyslexia under the category of learning disabilities, definitions, IDEA eligibility, special education services and IEPs.

As Chairman Millar indicated at Meeting 1, the Southern Regional Education Board (SREB) served as a tremendous resource to the Committee throughout this study in terms of providing policy briefs on the implementation of dyslexia screening and training programs in other states. The following publications are available in the Appendix:

- **Appendix B**: Dyslexia Policies in SREB States (Executive Summary, January 2018).
- **Appendix C**: Reading and Dyslexia Screening Components and Instruments in SREB States (Table, October 2018).

Ms. Durance of SREB opened with facts on promising practices in dyslexia, noting that evidence-based reading instruction and intervention is the most researched topic in learning. Other promising practices include screening to identify all at-risk readers, teacher training for dyslexia, and leveraging funds to support students with dyslexia. Ms. Durance went on to provide a survey of state screening programs and laws relating to dyslexia, which can be found in the Appendix. While no state currently screens pre-K students for reading difficulties or dyslexia, a majority of SREB states meeting a benchmark on a universal screening must be screened for dyslexia at least once in grades K–3.

Meeting 3 – October 19, 2018

A third meeting was held on October 19, 2018, when the Committee received testimony from the following individuals: Phil Jacobs of Coxe Curry & Associates; Brenda Fitzgerald, Ed. S, CDP, Curriculum and Instruction Specialist at the Georgia Educational Training Agency; Penney McRoy, Director Educator in the Preparation Division of the Georgia Professional Standards
Commission; Comer Yates and Sondra Mims of the Atlanta Speech School; and Dr. Sally Shaywitz, MD, Audrey G. Ratner Professor in Learning Development, Co-Founder and Co-Director of the Yale Center for Dyslexia & Creativity at Yale University.

Ms. Fitzgerald presented on “Addressing Reading, Writing, and Spelling, and the Needs of the Dyslexia Learner.” This included a description of seven intentional, practical steps to addressing the dyslexia issues in Georgia. The Atlanta Speech School presented on “Attacking Dyslexia for All of Our Children,” stressing the importance of not leaving economically disadvantaged youth behind in this effort to address dyslexia.

Dr. Shaywitz provided a special presentation titled “Dyslexia: Aligning Education with 21st Century Science; We Know More, We Must Act Now.” This presentation highlighted her research in dyslexia, which represents the longest longitudinal study of dyslexia in the United States. Dr. Shaywitz explained to the Committee how she defines dyslexia, “as an unexpected difficulty in learning to read. Dyslexia takes away an individual’s ability to read quickly and automatically, and to retrieve spoken words easily, but it does not dampen their creativity and ingenuity.”4

Meeting 4 – December 12, 2018
The Committee met a final time, at the Capitol in Atlanta, Georgia, to discuss findings, recommendations, and adopt a final report. Chairman Millar was joined by the rest of the Committee in Room 307 of the Coverdale Legislative Office Building, where this report was approved by unanimous vote.

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4 For more information on Dr. Shaywitz's research and publications, please visit https://dyslexia.yale.edu/the-center/our-leadership/
RECOMMENDATIONS

Post-Secondary Curriculum
The University System of Georgia should develop and offer a dyslexia and language disorders course of study for college and university students studying to become public or private school teachers. Curriculum should include coursework specific to identifying the early “red flags” for dyslexia. Such signs may include but are not limited to a history of language delays in speaking and understanding, difficulty learning letters and associated sounds, difficulty rhyming, word retrieval problems, and difficulty learning calendar facts such as days of a week and months.

Screening in Schools and Approved Screeners
Mandated screening for all kindergarten students should be implemented across the state. In addition, include all students kindergarten through 2nd grade, including K-2nd grade students transferring to a new school from another school or from another state who have not been screened, should be screened by teachers and/or student support staff (e.g., school nurse, school psychologist, speech and language pathologist, etc.) for phonological and phonemic awareness; sound symbol recognition; alphabet knowledge; decoding skills; encoding skills, and language skills, including expressive and receptive language, using a screener approved by the Georgia Department of Education and funded by the state.

Statewide Guidance, Teacher Training, and Evaluation
The Georgia Department of Education should, with assistance from experts in both the fields of dyslexia and language, create an informational handbook that includes information about dyslexia, reading, and language disorders and how they interconnect. In addition, the Department should develop required teacher training on dyslexia and other related language disorders.

The Georgia Professional Standards Commission should create a Dyslexia Endorsement for teachers and other education staff members that would enable them to recognize and appropriately respond to dyslexia and language disorders, such as difficulty with expressive and receptive language ability. Such Dyslexia Endorsement may include universal screening measures to identify those at risk for dyslexia and provide public guidance as well as training opportunities for teachers and other school personnel. These screening measures should be based on empirical data obtained through direct teacher-student contact and exercises including an examination of reading and math readiness as well as receptive and expressive language processing errors. It should also establish measures to assess the fidelity of the teacher training and implementation under the Dyslexia Endorsement.

Over the course of this study, terms and definitions played an important role in understanding the complexity of the issue at hand. Therefore, any statewide guidance should use a universal definition for dyslexia.
Respectfully Submitted,

FINAL REPORT OF THE SENATE STUDY COMMITTEE ON DYSLEXIA

[Signature]

Honorable Fran Millar, Chair
Senator, District 40
APPENDIX D: SENATE BILL 48(2019)

Senate Bill 48
By: Senators Martin of the 9th, Kirkpatrick of the 32nd, Brass of the 28th, Unterman of the 45th, Sims of the 12th and others

AS PASSED

A BILL TO BE ENTITLED
AN ACT

To amend Chapter 2 of Title 20 of the Official Code of Georgia Annotated, relating to elementary and secondary education, so as to provide for identification of and support for students in kindergarten through grade three with characteristics of dyslexia; to provide for definitions; to require the State Board of Education to develop policies for the identification and assistance of students with dyslexia; to require the Department of Education to make a dyslexia informational handbook available to local school systems; to provide for certain information in the dyslexia informational handbook; to provide for ongoing professional development opportunities relating to dyslexia for teachers; to provide for a pilot program to demonstrate and evaluate the effectiveness of early reading assistance programs for students with risk factors for dyslexia; to provide for a report; to provide for screening for all kindergarten students; to provide for referral for screening for students in grades one through three through response-to-intervention programs; to provide for data collection; to provide for a teaching endorsement in dyslexia; to provide for related matters; to repeal conflicting laws; and for other purposes.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

SECTION 1.
Chapter 2 of Title 20 of the Official Code of Georgia Annotated, relating to elementary and secondary education, is amended in Part 3 of Article 6, relating to educational programs, by adding a new Code section to read as follows:

‘20-2-159.6,
(a) As used in this Code section, the term:
(1) ‘Aphasia’ means a condition characterized by either partial or total loss of the ability to communicate verbally or through written words. A person with aphasia may have difficulty speaking, reading, writing, recognizing the names of objects, or understanding what other people have said. The condition may be temporary or permanent and shall not include speech problems caused by loss of muscle control.

S. B. 48
- 1 -
(2) 'Dyscalculia' means the inability to understand the meaning of numbers, the basic
operations of addition and subtraction, or the complex operations of multiplication and
division or to apply math principles to solve practical or abstract problems.

(3) 'Dysgraphia' means difficulty in automatically remembering and mastering the
sequence of muscle motor movements needed to accurately write letters or numbers.

(4) 'Dyslexia' means a specific learning disability that is neurological in origin. Dyslexia
is characterized by difficulties with accurate 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 the growth of vocabulary and background knowledge.

(5) 'Other disorders' means aphasia, dyscalculia, and dysgraphia.

(6) 'Parent' means a parent, legal agent, legal guardian, or kinship caregiver.

(7) 'Phonemic awareness' means the ability to recognize that a spoken word consists of
a sequence of individual sounds and the ability to manipulate individual sounds when
speaking.

(8) 'Qualified dyslexia screening tool' means an assessment that measures a student's
ability to demonstrate phonological awareness skills, phonemic decoding efficiency
skills, sight word reading efficiency skills, rapid automatic naming skills, and accuracy
of word reading on grade-level text.

(b) No later than July 1, 2020, the State Board of Education shall develop policies for
referring students in kindergarten and grades one through three for screening who have
been identified through the response-to-intervention process as having characteristics of
dyslexia, other disorders, or both. Such policies shall include but are not limited to:

(1) The definition and characteristics of dyslexia and related disorders;

(2) A list of approved qualified dyslexia screening tools that address the following
components:

(A) Phonological awareness and phonemic awareness;

(B) Sound symbol recognition;

(C) Alphabet knowledge;

(D) Decoding skills;

(E) Encoding skills; and

(F) Rapid naming;

(3) The process for referring students in kindergarten and grades one through three for
screening in collaboration with the local school system's response-to-intervention
programs.
(4) A process for parents to provide informed consent for use of a qualified dyslexia
screening tool and notification of the results of the screening;
(5) A process for parents to decline dyslexia screening for their child;
(6) A process for providing the parents of students identified as having characteristics
of dyslexia with information and resource material regarding dyslexia; and
(7) A process for monitoring the student's progress after the positive identification of
characteristics of dyslexia.
(c) Not later than December 1, 2019, the Department of Education shall make available a
dyslexia informational handbook that includes guidance, technical assistance, and training
to assist all local school systems in the implementation of evidence based practices for
instructing students with characteristics of dyslexia. Such handbook shall include, but not
be limited to, the following information for local school systems screening students in
kindergarten and grades one through three who have been identified through the
response-to-intervention process as having characteristics of dyslexia:
(1) Evidence based practices designed specifically for students with characteristics of
dyslexia;
(2) Characteristics of targeted instruction for dyslexia;
(3) Guidance on developing instructional plans for students with characteristics of
dyslexia;
(4) Best practices toward meaning-centered reading and writing;
(5) Developmentally appropriate curricula and engaging instructional materials and
practices;
(6) Structured multisensory approaches to teach language and reading skills; and
(7) Suggested training programs.
(d) The Department of Education shall collaborate with the Professional Standards
Commission to improve and update professional development opportunities for teachers
specifically relating to dyslexia. The training shall focus on:
(1) Development and ongoing implementation of training and coaching for teachers
regarding dyslexia and other disorders;
(2) Identifying high-quality trainers to provide support to local school systems utilizing
a coaching model to develop school level dyslexia experts;
(3) Developing awareness training modules for all instructional staff to include
information about dyslexia;
(4) Evidence based interventions, structured multisensory approaches to teach language
and reading skills, and accommodations for students with characteristics of dyslexia and
other disorders; and
(5) School and school system policies and procedures related to the response-to-intervention framework addressing reading, writing, mathematics, and behavior. Teachers shall be notified annually of any changes in policy, procedures, and specific instructional methodologies.

(e)(1) Beginning with the 2020-2021 school year, the State School Superintendent shall establish a three-year pilot program to demonstrate and evaluate the effectiveness of early reading assistance programs for students with risk factors for dyslexia. The State School Superintendent shall select at least three local school systems, preferably at least one of which is located in an urban setting, one of which is located in a suburban setting, and one of which is located in a rural setting. The State School Superintendent shall consult with recognized organizations that specialize in structured literacy programs for the instruction of students with characteristics of dyslexia in establishing and operating the pilot program.

(2) To be considered by the State School Superintendent to be in the pilot program, a local school system shall submit a proposal to the Department of Education that:

(A) Identifies a method of screening students for low phonemic awareness, rapid automatic naming skills, and characteristics of dyslexia;

(B) Provides for the enrollment of students with characteristics of dyslexia in an International Dyslexia Association (IDA) approved reading program staffed by teachers trained in structured literacy programs as outlined in IDA's Knowledge and Practice Standards; and

(C) Includes a methodology for evaluating the effects of the reading program on the student's identified characteristics.

(3) Local school systems selected to participate in the pilot program shall screen all kindergarten students for characteristics of dyslexia and may screen kindergarten students for other disorders. Further, such participating local school systems shall screen students in grades one through three for characteristics of dyslexia, and may screen such students for other disorders, who have been identified through the response-to-intervention process. Participating local school systems shall also provide appropriate reading intervention services for such students and administer assessments to ascertain whether the intervention services improve such students' language processing and reading skills.

(4) Each local school system chosen to participate in the pilot program shall comply with all applicable state and federal laws and require the parent of students suspected of having characteristics of dyslexia to indicate in writing that the parent voluntarily and knowingly consents to the student's participation in the pilot program for the provision of reading intervention services. Each participating local school system shall provide to the parents
of students suspected of having characteristics of dyslexia information about dyslexia and
recommended interventions.
(5) Each participating local school system shall report to the Department of Education
data about the operation and results of the pilot program, as required by the department's
guidelines and procedures.
(6) Not later than December 1 of the third school year in which the pilot program is
operating, the State School Superintendent shall submit a report to the House Education
Committee and the Senate Committee on Education and Youth that contains the
superintendent's evaluation of the results of the pilot program and any legislative
recommendations regarding the identification of and interventions for students with
characteristics of dyslexia, including recommendations regarding screening of all
kindergarten students.
(7) This subsection shall be subject to appropriations by the General Assembly.
(8)(1) Beginning with the 2024-2025 school year, local school systems shall screen all
kindergarten students for characteristics of dyslexia and may screen kindergarten students
for other disorders. Further, local school systems shall screen students in grades one
through three for characteristics of dyslexia, and may screen such students for other
disorders who have been identified through the response-to-intervention process.
Screening shall be conducted in accordance with the policies developed by the State
Board of Education pursuant to subsection (b) of this Code section and the dyslexia
informational handbook produced by the Department of Education pursuant to
subsection (c) of this Code section, including policies and information developed relating
to universal screening of kindergarten students for characteristics of dyslexia.
(2) By June 30 of each year, local school systems shall provide the following data to the
Department of Education:
(A) The number of students in kindergarten through grade three who were identified
as having characteristics of dyslexia through screening;
(B) The number of students in kindergarten through grade three who were screened for
characteristics of dyslexia in a school year;
(C) The number of students in kindergarten through grade three who were newly
identified as having characteristics of dyslexia in a school year;
(D) The process or tool used to evaluate student progress;
(E) The number of students in kindergarten through grade three who were participating
in interventions within the school setting and the number participating in interventions
outside the school setting; and
(F) The number of trained school system personnel or licensed professionals used to
administer the qualified dyslexia screening tool.
(3) This subsection shall be subject to appropriations by the General Assembly."

SECTION 2.

Said chapter is further amended in Subpart 1 of Part 6 of Article 6, relating to certificated professional personnel in elementary and secondary education, by adding a new Code section to read as follows:

"20-2-208.1

(a) No later than December 30, 2019, the Professional Standards Commission shall create a dyslexia endorsement for teachers trained in appropriately recognizing and responding to students with characteristics of dyslexia and language disorders, such as difficulty with expressive or receptive language.

(b) The requirements to receive such dyslexia endorsement may include training on the use of universal screening measures to identify those at risk for dyslexia, providing guidance to parents, and providing training or guidance to other teachers and school personnel.

(c) The Professional Standards Commission shall establish measures to assess the fidelity of teacher training and implementation for teachers who receive the dyslexia endorsement."

SECTION 3.

Said chapter is further amended in Subpart 1 of Part 6 of Article 6, relating to certificated professional personnel in elementary and secondary education, by adding a new Code section to read as follows:

"20-2-208.1

The Professional Standards Commission shall include in its standards for teacher preparation programs for elementary and secondary education instruction on:

(1) The definition and characteristics of dyslexia and other disorders;

(2) Evidence based interventions and accommodations for students with characteristics of dyslexia and other disorders; and

(3) Core elements of a response-to-intervention framework addressing reading, writing, mathematics, and behavior, including:

(A) Universal screening;

(B) Scientific, research based interventions;

(C) Progress monitoring of the effectiveness of interventions on student performance;

(D) Data based decision-making procedures related to:

(i) Determining intervention effectiveness on student performance; and

(ii) Determining the need to continue, alter, or discontinue interventions or conduct further evaluation of student needs; and

S. B. 48
- 6 -
(E) Application and implementation of response-to-intervention and dyslexia instructional practices in the classroom setting."

SECTION 4.

All laws and parts of laws in conflict with this Act are repealed.
APPENDIX E: ADDITIONAL EDUCATOR RESOURCES

RESOURCES AND ARTICLES

1. Dyslexia Basics [https://dyslexiaida.org/dyslexia-basics/]
Do you think your child or student might have dyslexia? "Dyslexia Basics," a factsheet by International Dyslexia Association, tells you the definition, symptoms, causes and effects. Find out how to help.

2. Clues to Dyslexia in Early Childhood [https://www.readingrockets.org/article/clues-dyslexia-early-childhood]
The earliest clues involve mostly spoken language. The very first clue to a language (and reading) problem may be delayed language. Once the child begins to speak, look for difficulties with rhyming, phonemic awareness, and the ability to read common one-syllable words.

3. Clues to Dyslexia from Second Grade On [https://www.readingrockets.org/article/69/]
The specific signs of dyslexia, both weaknesses and strengths, vary widely. Problems with oral language, decoding, fluency, spelling, and handwriting are addressed, as well as strengths in higher order thinking skills.

4. Reading and the Brain [https://youtu.be/jJlVfNzTPaU?list=PLLxDwKxHx1ylcczylSEmrJ3rPwh5RMJ85]
Hosted by Henry Winkler, who has had his own struggles with reading, Reading and the Brain explores how brain scientists are working to solve the puzzle of why some children struggle to read and others don't. Startling new research shows the answer may lie in how a child's brain is wired from birth. This program is part of our PBS Launching Young Readers series about how children learn to read, why so many struggle, and what we can do to help.

5. What Are Classrooms Like for Students with Learning Disabilities? [https://www.readingrockets.org/article/39151/]
Classrooms can be perilous in a number of ways for students with learning disabilities. Here are some tips to remember when working with students with LD. Reading Rockets has developed a set of family literacy bags to encourage hands-on fun and learning centered around paired fiction and nonfiction books.

If your child has a learning disability, he or she may benefit from assistive technology tools that play to their strengths and work around their challenges. This article will introduce parents to the role of AT in helping their children with LD.

7. Spelling and Dyslexia [https://dyslexiaida.org/spelling/]
Spelling is a challenge for people with dyslexia. The International Dyslexia Association provides a fact sheet explaining why people with dyslexia have trouble spelling, how to find out the reasons a particular child has this difficulty, and how to help children with dyslexia spell better.

8. Strategies for Summer Reading for Children with Dyslexia [https://www.readingrockets.org/article/15569/]
Here are a dozen simple strategies to help your children keep the academic skills they learned during the school year. Support them as they read. Give them material that is motivating — and some of it should be easy. Help them enjoy books and feel pleasure — not pressure — from reading. The summer should be a relaxed time where their love of learning can flower.

9. FAQs About Dyslexia [http://www.readingrockets.org/helping/questions/dyslexia/]
Dyslexia is the most common learning disability, and Reading Rockets gets lots of questions about it, including what it is, warning signs, what to do, and how to help. Here you'll find questions from parents and answers from our experts.

Thanks to advances in imaging techniques and scientific inquiry, we now know much more about learning disabilities (LD), dyslexia, and the role of vision problems. The American Academy of Pediatrics, the Council on Children with Disabilities, and the American Academy of Ophthalmology published a joint statement that summarizes what is currently known about visual problems and dyslexia. The statement also covers what treatments are and are not recommended when diagnosing and treating vision problems, learning disabilities, and dyslexia.