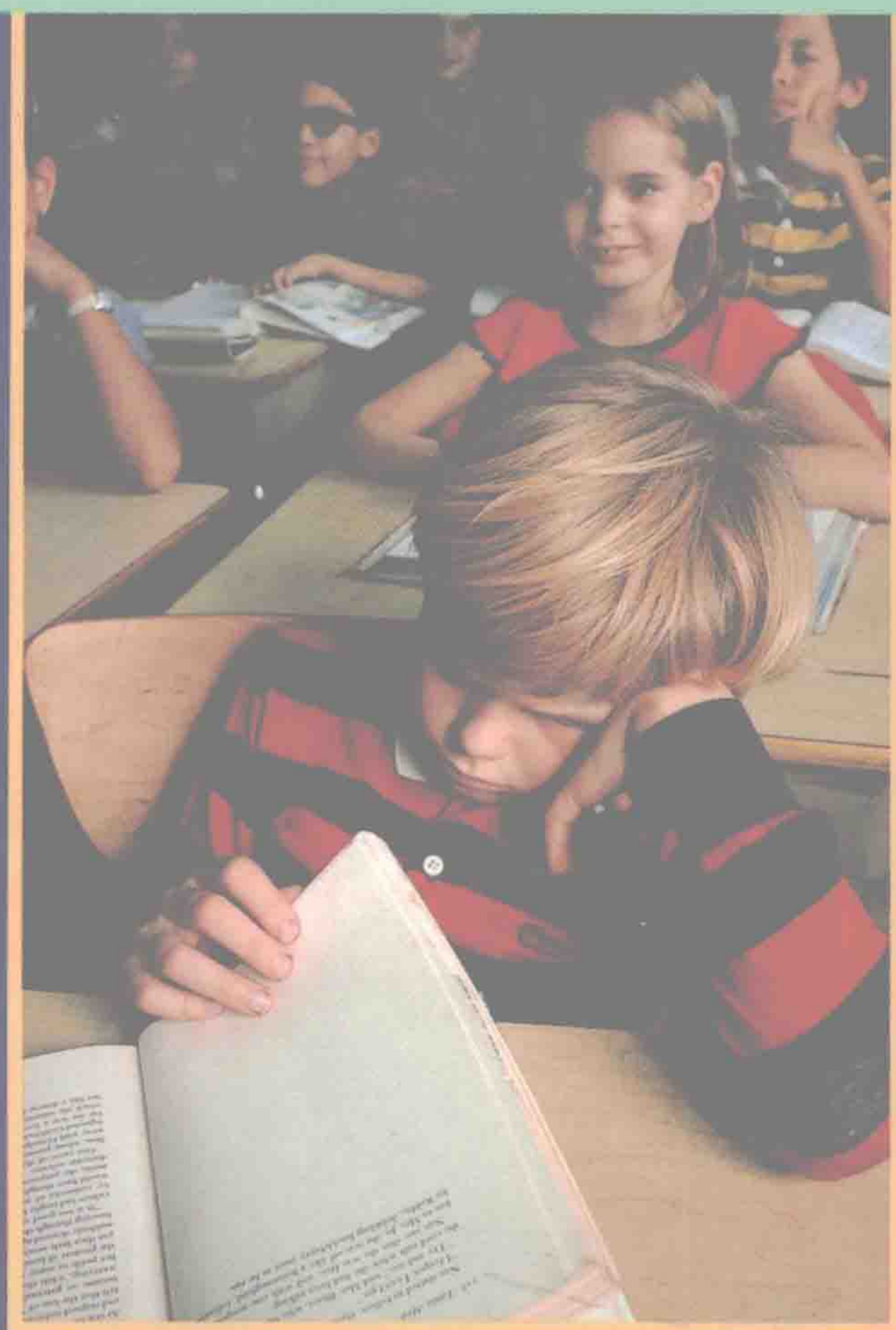


THE DEVELOPING CHILD



The Learning-Disabled Child

Sylvia Farnham-Diggory

SERIES EDITORS

Jerome Bruner Michael Cole Annette Karmiloff-Smith

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Sylvia Farnham-Diggory

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THE DEVELOPING CHILD

Recent decades have witnessed unprecedented advances in research on human development. In those same decades there have been profound changes in public policy toward children. Each book in the Developing Child series reflects the importance of such research in its own right and as it bears on the formulation of policy. It is the purpose of the series to make the findings of this research available to those who are responsible for raising a new generation and for shaping policy in its behalf. We hope that these books will provide rich and useful information for parents, educators, child-care professionals, students of developmental psychology, and all others concerned with the challenge of human growth.

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Preface

The psychologists of my generation witnessed the birth of two major disciplines, developmental psychology and cognitive science. When I was in graduate school, these fields did not exist in their present forms. I learned about them, and contributed to them, during their formative years, and mine. I also worked and published in the field of abnormal child psychology. So, when Jerome Bruner first invited me in 1977 to contribute a volume to the *Developing Child* series, I chose a topic at the intersection of abnormal, developmental, and cognitive psychology: learning disabilities.

As I read through that earlier book I can see that I was trying to make sense, for myself, of a confusing picture. In this book I have tried to make sense of the field—still very confusing—for others. I try to provide guidelines especially for parents, teachers, and students, including those with an interest in research, each of whom may be seeing only a small part of the picture. Many parents, for example, will read this book in search of answers to the question “What’s wrong with my child?” Many teachers, for answers to “How should I handle this child?”

For the past five years I have been addressing these questions in daily practice, as the director of the University of Delaware’s Consultation and Assessment service

(now discontinued because of budget cuts). I have met with many parents, teachers, children, and college students who believed that they, or someone they knew, might have a learning disability. I have dealt with school systems and learned about the sociopolitical forces that govern decisions to classify children as learning-disabled. I have directed research in educational policy, as well as in reading, dyslexia, attentional disorders, and schooling in general. I have been struck by the efforts that some teachers and other school professionals have made on behalf of individual children, and been frustrated by the closed-minded density of others. I have been able to view the entire spectrum of development, and in particular to study learning-disabled students of college age. The disability in these cases is much more sharply defined than it is in younger children, and clarifies what one should be looking for. This book, then, represents my attempt to make sense of the field not just for myself but for others, given my new understanding of their special points of entry and their vistas.

The book is still a personal one. It is written from a strong sense of concern for individuals who are seeking guidance through a confusing and often frightening domain. It describes the procedures that one consultation and assessment service worked out, through studying and experimenting with a number of alternatives, in a five-year effort to set clients on safe paths. It contains the broadest synthesis of current knowledge, and the clearest practical advice, that I know how to provide.

Acknowledgments

In 1985 I was asked to assume the directorship of two interconnected units in the College of Education at the University of Delaware. One was the Reading Study Center, a remedial clinic and training center, and the other was then known as the Psychoeducational Assessment Service. Eager to put theory into practice, I accepted happily, only to discover that, like most academics, I had no idea how to go about it. There began for me then a series of tutorials with school psychologists, special education teachers, school counselors, remedial reading tutors, learning disabilities specialists and psychometricians—only a few of whom there is space to mention here—in how such services actually worked. These patient and personally dedicated individuals include Marilyn Carver-Magnani, Laura Gordon, Marguerite Hoerl, Patricia Howe, David Johns, Chris Madden, Patricia Moeller, Marilyn Pare, Elizabeth Petrick, Lisa Schwartz, Rita Simon, and Neill Wenger. I thank them all warmly—on my own behalf, and on behalf of hundreds of clients—for their guidance, assistance, and insights.

I also thank Angela von der Lippe, of Harvard University Press, for encouraging me to bring out a new version of *Learning Disabilities*—so new, as it happened,

that we decided to give it a new title—and for making the job so pleasant; Jennifer Snodgrass, my excellent editor; and Joseph Torgesen, for his careful scrutiny of the initial manuscript, and his many helpful comments. Above all, I thank Keith Heckert, of the University of Delaware's graphic services, for his skillful preparation of the art in this book.

The Learning-Disabled Child

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1/ Compass Points

In American public schools, the rights of handicapped children to a free and appropriate education is a matter of law. The term "handicapped" has traditionally referred to the deaf, blind, physically disabled, and mentally disabled—including psychotic, retarded, and autistic children. Beginning in the 1960s, the term was extended to include a newly defined type of handicap called a "learning disability." As a matter of law, public schools must now provide free education that meets the special needs of learning-disabled youngsters.

Exactly what those needs are, and what is involved in correctly identifying them, is the general topic of this book. I begin with a description of the stream of events that typically results in the classification of a public school child as learning-disabled. These events have both formal (legally mandated) and informal aspects.

FORMAL CLASSIFICATION PROCEDURES

The process of classifying a child as learning-disabled typically begins when a teacher or a parent, or both, become dissatisfied with the child's performance in school. Testing (of the child, not of the teacher or the classroom, a point to ponder) is recommended. In the

public school system, there may be a long wait for such testing. Private testing (at the parents' expense) is an alternative, but the school may not be willing to accept the results of private testing. By law, public schools are required to accept certain test scores (IQ scores, for example) but not necessarily the private agency's interpretation of them.

States and school districts across the nation have different—sometimes very different—test requirements and diagnostic rules. In some states, children are classified as learning-disabled if they are reading a year or so below grade level. In other states, the classification is based on a sophisticated statistical measure of the discrepancy between the child's potential and her achievement on standardized tests.

Whatever the school rules, test data of various types are obtained. A conference is then convened, usually called a Child Study Team meeting, or an IEP meeting. IEP stands for Individualized Educational Program, and obtaining the parent's approval of that program is the object of the meeting. By law, a parent or guardian must attend the meeting, along with the person (usually a school psychologist) who reports the test results; perhaps a specialist such as a speech therapist or a reading supervisor; usually the child's classroom teacher; a special education teacher; and sometimes even the principal. At the meeting, the test scores are presented, the diagnosis is delivered, and the child's IEP is presented in written form.

The IEP specifies the new lessons the child will receive: extra reading instruction or a special science class, for example. Often the IEP presents the plan in terms of "behavioral objectives" for the child: "Billy will pass tests at the end of each social studies chapter at the 80 percent level." The special education staff plays a crucial role in these determinations.

Each school has one or more teachers who have credentials in special education. These teachers are in charge of what are usually called "resource rooms." Children can be assigned to resource rooms for tutoring or small-group instruction. In large elementary and secondary schools, the special education staff may also teach classes in social studies, science, reading, and so on. These will be small classes, so that students can receive more attention. Such classes nonetheless usually follow a standardized curriculum, although one less demanding than the regular curriculum. Thus the child's educational program may not be truly individualized. A guiding principle of special education placement is that the child must be placed in the least restrictive setting—mainstreamed in regular classes to the fullest extent possible. This is a matter of federal law.

When all the information about the child has been presented and discussed, and the parent is satisfied with the proposed program, the parent signs the IEP, and the meeting is adjourned.

On the face of it, the classification of a child as learning-disabled, and the prescription of the remedial program, appears to be properly documented and carefully thought out. What has been happening behind the scenes, however, may tell quite a different story.

INFORMAL CLASSIFICATION PROCEDURES

By the time a child is having classroom difficulties serious enough to be referred for testing, a stream of informal procedures will also have been set in motion.¹ The teacher will typically discuss the child with other teachers, the principal, the school psychologist, the special education teacher, and often with parents or guardians. Everyone tries to figure out the best way of handling the situation—to help the child, and, especially if

the child is troublesome, to help the teacher. By the time test scores come in (usually months after the referral), concerned school personnel will have largely decided how to handle the problem. They will have decided, for example, that the child should be assigned to the resource room for special help with arithmetic because the special education teacher is known for her skills in helping children with arithmetic. For an obstreperous child, who makes it difficult for the teacher to devote adequate attention to the other children in the class, the main objective may be to get the child out of the class for the longest possible amount of time. Solutions may also involve problems that parents present. If a militant parent who considers himself an authority on reading will be placated by providing a child with supplementary reading instruction, then it may be provided, even though the teacher says the child is reading well. Of course the child will have to miss science class, because that's when the supplementary reading class is held, but that can't be helped. These solutions may not have evolved without controversy among staff members, and they may not be good solutions by some standards, but they are "minimax" solutions: they strive for the minimum discomfort and the maximum satisfaction all around.

Test scores therefore typically take their place within the framework of solutions that have already been worked out. There is often wide leeway in test choice and interpretation, and in how much of the data have to be reported. For the purposes of the IEP meeting, it is enough that the school diagnostician describes the problem and indicates that "tests" have verified it. In fact, the problem was identified long before the test data were obtained.

The IEP has often been worked out and written up in

advance of the meeting. This is actually against federal rules. The program for the child is supposed to be worked out at the meeting, in collaboration with the parents. But in this computer age, many schools automatically compile IEPs from lists of objectives that represent programs already in place. The child may join a group of students in a resource room, all of whom are receiving the same instruction, and all of whom therefore received the same IEP. I once saw a teacher, preparing for an IEP meeting, erase one child's name from an IEP, and write in another's—despite the fact that one child was retarded, and the other had a speech problem. Incidents of this sort are commonplace.

IMPLICATIONS

It is by no means a foregone conclusion that these informal, behind-the-scenes classification procedures are bad. The crucial issue is the quality of the school staff. The child may well have been provided with excellent services: The child has been considered, in depth, as an individual; his strengths, weaknesses, aspirations, and talents have been thoroughly discussed. A substantial amount of behind-the-scenes adjustment may have been made to shunt the child into a more appropriate program. The child may have been tactfully rescued from a teacher who was wrong for him, and placed in a new environment where he is more likely to thrive. The fact that test scores, classification criteria, and formal IEPs were contrived in order to legalize these decisions doesn't mean the decisions were wrong. So, why worry?

Well, there are several reasons to worry. First, an alarming number of children are misclassified as learning-disabled. By recent estimates, 80 percent of the children who are classified as learning-disabled should not

have been.² Their families believe that something is wrong with their child's brain, when there isn't.³ They believe that school personnel have come up with an authoritative diagnosis, based on test scores and expert judgment, when they haven't.⁴ Parents are not told: "Look, the problem is that your child is in a class with an inexperienced teacher who doesn't know how to teach reading very well. But we'll offend the teacher and stir up union problems if we go on the record with that. The best way to get your child more competent instruction is to classify him as learning-disabled, which we have figured out a way to do, and assign him to a special education reading class." No one will say to a parent who is desperate for a child to attend college: "Your child just doesn't have the academic aptitude to keep up with the college-bound classes. Her SAT scores are not competitive. But we've figured out a way to classify her as learning-disabled, and that means she can take the SATs again, untimed, which should help offset her high school record." In this case, because the competitive situation is much worse in college, the school may be starting the youngster down a cruel garden path.⁵ Sound judgments about a child's future must be made on the basis of accurate information, not on the basis of hopes and fantasies and romantic misconceptions engendered in part by a school's well-meaning efforts to find congenial solutions to immediate problems.

Second, the rare genuinely learning-disabled children—perhaps five out of every thousand children—are often lost in the misclassified crowd, and are not receiving the specialized education that they need and that federal law mandates. This is a direct violation of the children's legal rights. The informal classification procedures used by school personnel, however well meant, usually do not detect such children, especially if the children are well-behaved in class.