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# MEETING CHILDREN'S READING NEEDS: EXAMINING THE ROLES OF SPECIAL TEACHERS

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Those who teach remedial reading in the schools have numerous titles, dissimilar training, and overlapping responsibilities. Children who have mild to severe reading problems may be instructed by reading specialists, Title I teachers, teachers of the learning disabled, and so forth. Similarly, the reading teachers' training may range from participation in an undergraduate or graduate reading program to never having taken a formal course in reading. Though there may be an inherent assumption that all these individuals are equally capable of teaching reading, there are marked differences in training that could make this assumption untrue.

There is little question that the ability to read is of primary importance, regardless of the type of teacher who accomplishes the task. Yet, it is difficult to believe that all teachers of remedial reading are equally qualified to teach on the basis of background or training. Assuming, for the moment, that all of these individuals are capable, there still are a number of differing assumptions which affect how the reading instructional process is delivered. Some of these assumptions are:

1. the primary factor causing reading problems or the inability to read,
2. the importance of reading in the life process,
3. the likelihood that teaching will lead to substantial or sustained improvement,
4. the remedial techniques which are most likely to improve reading performance,
5. the diagnostic process that will provide the greatest amount of information,
6. the types of materials utilized for instruction,
7. the concept of what one is reading.

An elaboration of these assumptions will be undertaken as we attempt to explore where the discrepancies and inter-faces exist between these groups.

## *Learning Disabilities Teachers*

Most of the theories that have attempted to account for the reading failures of learning disabled children are based on the medical model (Bryan & Bryan, 1975). Thus, the most prevalent theories involve infor-

mation processing difficulties (Birch & Belmont, 1964; Vande Voort & Senf, 1973), perceptual deficits (Orton, 1937; Vellutino, Pruzek, Steger, & Meshoulan, 1973), and deficiencies in verbal skills (Owen, Adams, Forrest, Stoltz, & Fisher, 1971; Hutson, Note 1). In spite of the fact that more research has been done on reading than any other academic area, there is very little known about a “best method of teaching reading” that is generally accepted (Diederich, 1973); about the only point of consensus is that the most important variable is the teacher (Bond & Dykstra, 1967; Rutherford, 1971; McDonald, 1976). Even though definitive information about a best method teaching reading is lacking, the emphasis of LD teachers is toward task-analytic or behavior approaches (Lovitt, 1975a, 1975b).

It is interesting to note that the major remedial emphasis for learning disabled children is often on reading (Kirk & Elkins, 1975). This suggests that LD teachers' primary responsibilities are correction or remediation of reading problems, even though they are also responsible for improving academic performance in the areas of language, spelling, arithmetic, and handwriting. Regrettably, many learning disabilities teachers have little preparation to teach reading. Furthermore, few states have any reading requirement for LD certification, while the few states that do have a requirement, require little more than an introductory reading course or two (IRA, 1976). It is paradoxical that most states regard remedial reading programs as embodying learning disabilities programs (Kirk & Elkins, 1975). In view of the severe reading problems these LD teachers encounter, it is questionable whether they are well-equipped to deal with the various types of reading problems they encounter.

Admittedly, some LD teachers are able to effectively work with children who have reading problems. However, due to the variation of certification requirements from state to state, it is impossible to determine precisely which states, and which individual teacher training programs, are preparing LD teachers who are effective teachers of reading. Again, the assumption is that all LD teachers can teach reading, since that is one aspect of their professional responsibility. Whether this assumption finds realization in practice is unknown.

LD teachers work with disabled learners who have difficulty in academic and learning tasks. As has been noted, their primary emphasis is not necessarily on reading, even though poor reading is the handicap that is most prevalent in learning disabled children (Kirk & Elkins, Note 2). Since their training emphasizes such a broad background, and since the children they teach may manifest multiple problems, they must by necessity be generalists rather than specialists. The question arises as to whether a generalist can effectively diagnose and teach reading to children who have known problems associated with this skill.

#### *Reading Specialists*

The International Reading Association (1968) has established a set of

guidelines for identifying and certifying reading specialists. These guidelines are provided below:

- Complete a minimum of three years of successful classroom teaching in which the teaching of reading is an important responsibility of the position.
- Complete a planned program for the Master's Degree from an accredited institution to include:
  1. A minimum of 12 semester hours in graduate level reading courses with at least one course in each of the following:
    - (a) *Foundations or survey of reading*  
A basic course whose content is related exclusively to reading instruction or the psychology of reading. Such a course ordinarily would be first in a sequence of reading courses.
    - (b) *Diagnosis and correction of reading disabilities*  
The content of this course or courses includes the following: causes of reading disabilities; observation and interview procedures; diagnostic instruments; standard and informal tests; report writing; materials and methods of instruction.
    - (c) *Clinical or laboratory practicum in reading*  
A clinical or laboratory experience which might be an integral part of a course or courses in the diagnosis and correction of reading disabilities cases under supervision.
  2. Complete an undergraduate or graduate level study in each of the following areas:
    - (a) Measurement and/or evaluation
    - (b) Child and/or adolescent psychology
    - (c) Psychology, including such aspects as personality, cognition, and learning behaviors.
    - (d) Literature for children and/or adolescents.
  3. Fulfill remaining portions of the program from related areas of study (IRA, 1968).

More recently, the IRA (1978) has formulated a series of attitudes, concepts, and skills which are considered to be requisite behaviors for those individuals who desire to teach reading. The IRA has recommended that all individuals involved in teaching of reading be trained in the following skill areas:

- Language Foundations for Reading Language development
- Comprehension
  - Literal and interpretive comprehension
  - Critical comprehension
  - Reference and study skills
- Word Analysis
- Enjoyment of Reading
- Diagnostic Teaching
  - Diagnostic evaluation
  - Organizing school and classroom for diagnostic teaching

Adapting instruction to students with varied linguistic backgrounds  
 Instruction of students with special reading needs

- Program Planning and Improvement
  - Interaction with parents/community
  - Instructional planning: curriculum and approaches
  - Initiating improvements

The training is far more extensive for a reading specialist vis-a-vis and LD teacher. Two major differences exist. First, the primary emphasis in the case of the reading specialist is on reading. Assessment and clinical courses are designed solely for reading, and not for other academic areas. In other words, there is a pivotal point around which training is centered. Second, the guidelines recommend that the reading specialist program be administered at the graduate level. While the trend is toward graduate level training for LD teachers, much of special education training is at the undergraduate level and does not involve specialization.

Although there is still some question regarding inadequate, or non-existent, state certification requirements for reading specialists (Kinder, 1969), more adequate certification is becoming commonplace. As has been pointed out, the responsibility for adequately trained reading personnel must also lie with higher education (Briggs & Coulter, 1977), who may lack necessary faculty for practicum supervision.

Thus, the reading specialist is uniquely equipped to remediate reading disabilities. Unlike the LD teacher, who is a generalist, the reading specialist is, as the name implies, a specialist. The reading specialist's abilities are uniquely suited to the assessment, evaluation, instruction, and programming efforts of the problem reader.

### *Discussion*

As has been noted the impreciseness in defining a learning disability has created many difficulties for those involved in the teaching of reading (Sartain, 1976). Children who have been identified as manifesting a reading problem have had this problem attributed to a learning disability and, therefore, come under the auspices of special education personnel.

Very few school districts can afford to provide duplications of services. Yet, in view of the current state-of-the-art, a district has several options. First, it may elect to decide which children have a learning disability or only a reading problem. Once this decision has been made, appropriate resources can be made available. Second, school systems may opt to eliminate, or phase-out, reading specialist positions. If a learning disabilities teacher can provide reading instruction, and is *assumed* qualified to do so, that individual becomes far more valuable to the system in view of the fact that she can teach not only remedial reading, but also remedial math, writing, and spelling. This is, of course, a specious argument and one which has little merit. LD teachers cannot substitute for highly trained reading specialists.

One final point needs to be made. With the enactment of the Education for All Handicapped Children Act (PL 94-142), more federal and state dollars will be flowing to services provided for handicapped children. Regrettably, this legislation will not include those children whose only difficulty is in reading—unless that child is designated as handicapped. Therefore, local education agencies will be under increasing pressure to obtain monies and provide services for reading disabled children by determining that they are handicapped and therefore eligible for the services of a LD specialist. If a large number of reading problem children are referred to special education teachers, the need for reading specialists will decline.

### *Conclusion*

There are those who would argue that the decision about who serves reading disabled children is irrelevant (e.g., Lovitt, 1978). However, it is evident that philosophical basis, training, and perhaps competencies of learning disabilities and reading specialists differs. “Who” serves these children is just as critical as “what” or “where” they are taught.

Obviously, it would be best if LD specialists and reading specialists could work cooperatively toward the development of effective reading programs. This would improve reading instruction and help those children who have reading problems. Since this reconciliation may not occur in the near future, due to the aforementioned constraints, we would agree with Sartain (1976) that the reading specialist is more capable of diagnosis and instruction as they relate to reading. For the present time, reading remediation will be best left to the reading specialist.

Interesting enough, this separation of responsibilities should benefit the LD specialist. The emphasis will be less on reading, and more on other academic skill areas. As the LD specialists' reading efforts decline, greater attention will be focused toward the improvement of arithmetic, spelling, and writing skills in learning disabled children. Similarly, the integrity of the reading profession will be preserved and the competition for limited monetary resources diminished.

Ultimately, efforts need to be directed toward achieving a rapprochement between reading specialists and learning disabilities teachers. For this to happen, two mutually inclusive circumstances must exist. First, it will require that LD teachers become cognizant of developments within the field of reading. Second, teachers of reading will need to become aware of the major findings that have taken place in the field of learning disabilities (Lerner, 1975). Promotion of this awareness could take the form of innovative trans-disciplinary programs, professional meetings involving both groups, joint publications, or informal gatherings. What is crucial, is that a dialogue be established that begins to clarify the roles and responsibilities of *all* professionals engaged in the teaching of reading.

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