

The TRAMPLIP

Because the literacy skills of a child with dyslexia are below that of his / her peers, the default classroom curriculum is usually inadequate to help that child learn literacy skills at their level.

For this reason a range of factors need to be coordinated together to ensure that both the mental health and the academic ability of the child with Dyslexia is effectively managed.

The following factors (TRAMPLIP) are essential to for a balanced approach:

- Time Management
- Resilience
- Accommodations
- Measuring
- Love of Literacy
- Interventions
- Professionals

T – Time Management

Dyslexia is usually (not always) a lifelong problem. Even though children improve, it is usually not enough to 'catch up' and 'fix' the problem.

This means that for all the time they are at school, they are probably going to struggle with the reading, writing and spelling parts of the curriculum.

Parents need to be thinking ahead, talking to teachers, managing the year to year transitions, and whatever is necessary over time to maintain the goals:

- Optimal Literacy- Reading and Spelling
- Preserved Passion for Literacy
- Expectations Modified to an Achievable and Sustainable Level
- Resilience and Mental Health Made and Kept Strong

REMEMBER: The greatest thing you can do for the child with Dyslexia is to give them more time. Time to start work, time to complete work and time to think about what they have to do.

R - Resilience Building

For the child with dyslexia, school can be difficult and unrewarding. There is a risk not only that the child will give up but also they may become angry, anxious or depressed. They may think of themselves as stupid in all areas of learning.

For this reason it is important that children feel good about themselves. The following are useful strategies:

- Clarifying what the child enjoys and feels successful at and ensuring that the child spends as much time doing these good things as they do in working on their problem areas.
- Doing activities where other people (peers in particular) are likely to provide the child with positive feedback (e.g. sport). Preserve these activities, and do not take them away as punishments or to make time for more learning.
- Allowing the child to spend time with people who like the child 'just as they are'. This may be, for example, a set of grandparents.
- Helping the child develop an accurate, positive understanding of themselves (this usually begins between 6 and 9 years). Specifically they have to reach understanding and acceptance of the fact that even though they have a dyslexic disorder, they are still smart, likeable, and have a positive future.
- Involving the child in decision making discussion for issues such as homework, assignments and tests. This will model for the child a logical approach based on an understanding of the dyslexia, without any criticism and embarrassment.

REMEMBER: Good Mental Health is More Important Than Great Reading Ability

A - Accommodations and Modifications

Definitions of the notions of Accommodation and Modification vary and tend to interchange at times. The following general definitions help in understanding the whole idea of Special Consideration for the child with Dyslexia.

Modification refers to the idea of making appropriate adjustments to the otherwise regular classroom activities and work that reflects sensitivity to the child's difficulties.

Accommodation on the other hand is a complete change to the nature and level of the child's work and involves changes in expectations and often includes the notions of empathy and advocacy.

If a child's literacy skills are below class standard, this impacts on every learning activity. For that child, the experience of learning may become dominated by failure.

For this reason, the curriculum expectations need to be accommodated and modified so that the child can experience success with the same degree of effort that the other children put in.

For example:

- In subjects where reading is needed, to make allowances so that their learning or skills are not limited (such as reading math problems to the child, or allowing additional time).
- Not humiliating the child through public and embarrassing activities such as getting them to read in front of the class

- Modifying homework expectations to a fixed amount of time and effort rather than completing the same volume of work as other children.
- Overlooking spelling mistakes if the assignment or assessment is primarily interested in what the child knows.
- Allow the use of technology (spell checkers, reading programs, etc) when other children need to read and write.
- Developing a Personal Best framework for evaluating the child's progress and effort, rather than measures drawn from the curriculum that compares the child with others.

Assistive Technology is also a form of accommodation for the student with Dyslexia.

The use of Assistive Technology is something that must be negotiated with the child's classroom teacher and learning support teacher as they are the ones who know best relative to his/her needs in the classroom setting.

REMEMBER: Accommodations and Modifications are not attempts to remediate or bypass the problem. They are strategies designed to 'level the playing field' for the affected student. Modifying the curriculum does not mean making life too easy for the child. It just means reducing the demands so that with a reasonable, sustainable level of effort, that child can experience success and learn at their best rate

M - Measuring Progress

Measuring progress and the use of tests and assessment instruments needs careful consideration. The regular way of using tests may be quite unsuitable and even damaging to a child with Dyslexia. Because they struggle so much with reading most tests will actually fail to determine the child's real level of ability. For this reason a child with dyslexia must be provided with special considerations such as more time when completing regular tests. Complete exemption from certain tests should also be considered.

What works best is if teachers can create a personal best assessment framework. This means that the child will be tested in such a way that their reading disability does not impact too heavily on their ability to complete the test. Secondly it means that when reporting outcomes it is the child's degree of improvement that is important rather than how they "stack up" to a predetermined or arbitrary set of standards.

REMEMBER: Measure success on the basis of personal improvement

L - Love of Literacy

For children with dyslexia, learning to read, write and spell is hard work. Homework is often difficult and traumatic. It is easy for children to develop a dislike, or even a hatred for the written word.

If this occurs, they stop learning and their problem becomes a much larger issue than it needed to be. Children may give up, and all the hard work done already may be lost.

What to Do:

The following are suggestions for how a lifelong love and appreciation of reading can be developed and maintained:

For The Beginner Reader

- Reading to the child every day, anytime and anywhere. This is not a learning exercise, it is a time when the child can relax and listen to what the book has to offer.
- Read for enjoyment and to learn new things
- Talk about the illustrations, story line, words and the information in the story
- Give them time to have a try by themselves
- Talk about the beginning of words
- Tell them the words that they can't work out
- Talk about the “tricky” parts of the word
- Encourage them

For a Developing Reader

- Reading books that peers are reading is particularly useful – the child can then participate in discussions and activities around those books.
- If the book is hard the parent reads it; if it is easy the child try's to read it; if it is just right then take turns in reading it
- Encourage your child to write shopping lists, cards, letters and labels
- Help the child find patterns in words – rain, paint, sign, signature, could, should, would
- Make up gimmicks or tricks to learn hard parts or new words – a piece of pie
- Play spelling games like Hangman, Scrabble, Find-A-Word or Upwords
- Look at words in the everyday world – read supermarket labels, road signs, shop fronts.
- Read junk mail and cut out the same letters or words from brochures or catalogues

Other strategies to preserve love of literacy include:

- Audio-books (often available from the local library) – these can be listened to at home or on long car trips.
- Having a home ‘culture’ of books – going to the library, talking about books, parents reading themselves etc.
- Finding literature the child likes (e.g. magazines on topics of interest)

REMEMBER: For the struggling reader it is more important for them to read books they are interested in rather than always reading books that are at their level. It is better for a child with Dyslexia to read a book that they love with 65% accuracy than a book that is too immature for them even though they can read it with 99% accuracy.

I - Interventions

Research on effective treatments for reading disability has come a long way. Brain scanning technology has allowed scientists to go further than ever before in their understanding about how the brain works.

As a result of such advancements, treatments for learning and reading disorders have also advanced significantly. There are now many programs available for educators to utilize in their efforts to overcome dyslexia.

However the debate continues about exactly what type of program is best. Is it best to use “an off the rack” program or is a customized program better? Is it more important to have a great resource or a great teacher? Are the notions of prescriptivism and eclecticism mutually exclusive?

These are important questions to answer before deciding to engage a student in the rigours and demands of structured programming.

P - Professionals

A very serious consideration and possibly the most difficult decision of all for a parent is determining what and which professional to access.

The three professionals that are likely to know the most about learning disability are:

- Paediatricians (Medical)
- Neuropsychologists and Educational Psychologists (Psychology)
- Educational and or Reading Specialists (Education)

Individuals from these three areas represent the core of any group of professionals that may be involved. Other professionals that could also play a meaningful role are:

- Guidance Counselors
- Classroom Teachers
- Learning Support Teachers
- Occupational Therapists and Speech Pathologist
- A Private Tutor for General Schooling

However it doesn't matter how many professionals become involved in is important to establish the following:

- Who will the child see first?
- Who will remain the primary carer? Will it be the Paediatrician or perhaps the Reading Specialist?
- Who will coordinate the interaction of the professionals involved? Will it be the parent, the school or one of the professionals?

Whoever ends up taking responsibility for being involved in the child's treatment the following steps are essential:

- A correct, practical and working diagnosis. This will allow for specific and accurate planning as well as application for special consideration
- A coordinated plan that defines the following:
 - Goals
 - Dates of Review
 - Length of Treatment
 - Roles and Responsibilities of the Parent, School, Child and Professional

REMEMBER: Research suggests that the most important factor in the treatment roles and responsibilities of the parent, school, child and professional and management of Dyslexia is the quality of the special Educator. It is important to have state of the art resources and of course the child must be willing. But above all of this is the vitally important issue of ongoing high quality instruction from dedicated and experienced specialist.