The revised Individuals with Disabilities Education Act (IDEA) offers U.S. schools confronting rising enrollments of students with learning disabilities (LD) two options for managing this increasing population. The first option is that local education agencies can use as much as 15% of their special education funds to pay for early intervening services (EIS) and to support professional development and literacy instruction. The second option offered by IDEA is Response to Intervention (RTI) that can be used to provide early interventions without labeling students at risk for school failure as learning disabled. RTI encourages early identification and prereferral intervention to determine if a child responds to the intervening instruction. The goal is to limit referrals based on inadequate instruction or limited English proficiency and to reduce the number of children identified for LD services. In order to do this, the lowest performing children must be identified early so that appropriately intensive interventions and tiers of support can be provided within a comprehensive approach to literacy instruction at the first indication of the child’s difficulty.

**Fundamental Principles**

The U.S. Department of Education does not require or endorse any particular model of RTI. State education agencies may establish the criteria for identifying children with specific learning disabilities, but the state criteria must permit local agencies to choose an RTI model. In this column, I will present the fundamental principles of an appropriate RTI approach and review the evidence on early literacy interventions as provided by the U.S. Department of Education. The following points that are central to the provision of RTI and EIS within the IDEA are based on those identified by Lose et al. (2007) and are elaborated upon here:

**Ensure Early Identification and Early Intervention for All Children Struggling With Literacy Learning.** Research has shown that signs of a child’s literacy learning difficulties usually surface after one year in school. If schools expect children to meet literacy achievement benchmarks, a child must be identified and intensive interventions provided at the first indication of a difficulty.

**Provide a Way to Appropriately Identify Children With LD.** Assessments must explore a child’s multiple knowledge sources and literacy experiences. Assessments should examine all aspects of a child’s control over literacy, including oral language skill; knowledge of letters, words, and sound–letter correspondences; concepts of print; and text reading and writing.

**Provide Effective, Intensive, Evidence-Based Early Intervening Services.** An intervention must show accelerative learning and steady progress over time on the part of the child or else it has failed. The U.S. Department of Education Institute for Education Sciences identified one-to-one tutoring by qualified tutors in grades 1–3 as meeting the gold standard for effectiveness for the most at-risk learners. Other researchers have documented the importance of individual lessons for the lowest-performing students at
the onset of their literacy learning difficulties (Pinnell, Lyons, DeFord, Bryk, & Seltzer, 1994; Snow, Burns, & Griffin, 1998; Vellutino et al., 1996; Wasik & Slavin, 1993).

**Ensure Monitoring of Student Progress and Data-Based Documentation for Each Student.**
Student progress is best monitored by a teacher who is a skilled diagnostician and who also designs and delivers the intervention in response to the child. Assessment information and sensitive observation on the part of the teacher are used to refine teaching decisions in response to changes in the child’s control over literacy processing.

**Report Annual Yearly Progress, Which Depends on Accelerated Growth of Struggling Readers.**
Yearly reports of progress ensure that struggling readers will receive interventions that support their accelerative progress regardless of their economic status, race, or ethnicity. Annual reporting also helps schools, systems, and the community monitor the quality of their intervention services for children and advocate for equity in appropriately and responsively serving all their low-performing students.

**Provide the Highest Quality of Professional Development for Teachers of Low Achievers.**
Research has shown that every dollar spent on teachers’ professional development yields greater student achievement outcomes than any other expenditure of school dollars (Darling-Hammond, 1996). Because they are the learners most vulnerable to instruction, regardless of the approach to instruction in our schools, the lowest-performing learners need the most skilled teachers (McEneaney, Lose, & Schwartz, 2006).

**Create a Multitiered Problem-Solving Team to Support Comprehensive Literacy Efforts.** For optimum child learning, all members of the school team—administrators, teachers, and intervention specialists—must acknowledge the range of students’ learning abilities and assume responsibility for children’s success. Intervention effectiveness may be seriously compromised by fractured approaches to children’s learning. Collegial communication within a comprehensive approach to literacy and shared accountability for children by members of the school team can ensure that students’ needs are quickly identified and strategies formulated to meet those needs.

### Fundamental Principles of a Successful RTI Approach

**What principles do we, as teachers of reading, need to keep in mind to ensure that struggling literacy learners will achieve success within the provisions of the IDEA for RTI?** Unfortunately, many RTI approaches place emphasis on prescriptive instruction delivered by teachers-as-technicians who focus on what children don’t know as the starting point for instruction. Such approaches lack the necessary decision making on the part of teachers to respond effectively to differing challenges posed by individual children (Clay, 2005a). In contrast, I now highlight several fundamental principles that I consider foundational to any successful RTI approach.

**A Child, Not a Group, Learns to Read.** Anecdotal and research evidence supports the notion that children come “by different paths to common outcomes” in literacy (Clay, 1998). A skilled responsive teacher will observe the different paths taken by individual children and will design instruction that supports their literacy learning progress.

**The Only Valid RTI Approach Is One in Which the Child Responds Successfully.** The intervention must be appropriately intensive, delivered without delay, and tailored precisely to the individual child. A child who has been provided with the intervention he or she needs will respond successfully, making progress daily and learning how to lift his or her own literacy performance with skilled support from a knowledgeable teacher (Clay, 2001, 2005b). While many children respond quite well to whole-class and small-group instruction, the most struggling literacy learner needs the most intensive instruction delivered individually and tailored precisely to his or her needs.

**To Be Successful, the Most Struggling Child Requires the Most Expert Teacher.** Teachers, not programs, teach children to read. The child who is challenged by literacy learning requires a knowledgeable teacher who can make moment-by-moment teaching decisions in response to his or her idiosyncratic literacy competencies. The struggling child is likely to be harmed by a one-size-fits-all, prescriptive intervention that fails to acknowledge his or her abilities as a starting point for instruction.
**Teacher Expertise Requires High-Quality, Sustained Professional Development.** Teaching the lowest-performing learners is difficult. Because no two children ever respond quite the same, teachers of the lowest-performing children must be the most tentative, skilled, and responsive in their interactions with children. Sustained continual professional development is required to continuously develop highly expert teachers (Darling-Hammond, 1996; Darling-Hammond & McLaughlin, 1995).

Given the federal requirement for evidence-based interventions, the most reliable source for teachers, administrators, researchers, and policymakers seeking effective reading interventions is the What Works Clearinghouse (WWC; www.whatworks.ed.gov). Established in 2002 by the U.S. Department of Education’s Institute for Education Sciences, the WWC’s mission is to provide “a central and trusted source of scientific evidence of what works in education.” The WWC provides information on the relative effectiveness of a variety of beginning reading programs in four key domains: alphabetics (phonemic awareness, phonological awareness, letter identification, print awareness, and phonics), reading fluency, comprehension (vocabulary development and reading comprehension), and general reading achievement (a combination of two or more of the previous domains). Ratings are based on the statistical significance of the empirical effect estimate and the quality of the research design generating the effect estimate. They are reported at the following six levels of effects from highest to lowest: “positive effects” (+), “potentially positive effects” (+?), “mixed effects” (±), “no discernable effects” (?), “potentially negative effects” (-?), and “negative effects” (-).

Of the 20 interventions reviewed by the WWC, only one intervention, Reading Recovery, an early intervention and prevention for the lowest-performing, first-grade students, has qualifying research evidence in all four domains. Reading Recovery received the highest ratings of any of the 20 programs with two “positive effects” (+) ratings for alphabetics and general reading achievement and two “potentially positive effects” (+?) ratings for reading fluency and comprehension. Reading Recovery, developed by researcher and developmental psychologist Marie Clay, is implemented as a not-for-profit collaborative among schools and universities (Clay, 2005a, 2005b). Reading Recovery students participate in 30-minute daily lessons in reading and writing activities tailored to their individual needs and delivered one-to-one by a certified Reading Recovery teacher. Reading Recovery teachers initially receive one year of graduate-level coursework and are required to participate in continual professional development each year thereafter to remain certified.

Of the 19 remaining beginning reading programs, only 3 are rated as providing evidence for either “positive effects” (+) or “potentially positive effects” (+?) in, at most, three of the four domains. Out of those programs, only one, Kaplan SpellRead, exhibited a positive (+) rating. The program has one rating of “positive effects” (+) in alphabetics and two ratings of “potentially positive effects” (+?) in fluency and comprehension. According to the developers, Kaplan SpellRead is a literacy program for struggling students in grades 2 and above who are two or more years below grade level in reading, are receiving special education, or are English-language learners. The program is delivered in small groups of five students with one instructor; takes five to nine months to complete; and “consists of 140 lessons implemented in three distinct phases that interweave phonemics, phonetics, and instruction in language-based reading and writing” (www.whatworks.ed.gov/InterventionReportLinks.asp?iid=373&tid=01&pg=IntRating.asp). Teachers who implement the program receive five days of instruction, two follow-up workshops, and regular on-site coaching visits from Kaplan K12 staff and a Web-based instructor support system to monitor student progress. The next highest rated programs with potentially positive effects (+?) in alphabetics, fluency, and comprehension are Peer-Assisted Learning Strategies (PALS) and Start Making a Reader Today (SMART).

It is clear that the emphasis today is (as it should be) on evidence-based approaches to early literacy intervention, and we, as teachers, administrators, and policymakers, have a responsibility to children to implement highly rated evidence-based approaches. We all agree that children are the focus of our work, and children who struggle with literacy learning do not deserve unproven programs when we already know what works. As indicated in the title of this column, a child’s response to intervention requires a skilled, responsive teacher, and reading professionals already have enough information to make an appropriate, informed, and timely response to the challenges of RTI.
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References


The department editors welcome reader comments. To contact Connie Briggs, e-mail cbriggs1@comcast.net. To contact Catherine Compton-Lilley, e-mail comptonlily@wisc.edu. The Struggling Readers department will appear again in the May 2008 issue of The Reading Teacher.