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## NASP Position Statement on Identification of Students With Specific Learning Disabilities

Enhancing the mental health and

educational competence of all children.

Ongoing research on specific learning disabilities (SLD) is reshaping our understanding of children with this disability and the laws and regulations concerning how school psychologists and other team members identify them. Approximately 2.9 million children in the United States receive special education services with SLD as their designated primary disability category (U.S. Department of Education, 2006). This represents over 5.5 percent of the school-age population, and approximately one-half of all children receiving special education services. Identification and treatment of children with specific learning disabilities has been, and continues to be, the subject of considerable interest. Issues of particular current concern include (1) the high prevalence of learning disabilities; (2) variability in identification rates and eligibility procedures across school districts and across states; (3) insufficient emphasis on prevention, early identification of, and intervention for learning problems; (4) questionable validity and educational relevance of methods and practices used for SLD identification; (5) differentiating between children whose failure is related to inadequate instruction and lack of effective remediation, and those who have a specific learning disability; and (6) differentiating between children whose failure is related to inadequate accommodations for the students' cultural diversity or their linguistic diversity or both, and those who have a learning disability.

School psychologists have long had a prominent role as members of school teams that identify specific learning disabilities. Accordingly, NASP is dedicated to promoting policies and practices that are consistent with scientific research and that yield optimal student outcomes. This includes support for the following positions, as addressed in this position statement:

- Relying primarily upon an ability-achievement discrepancy as the means of identifying children with specific learning disabilities is at odds with scientific research and with best practice.
- Identification of and intervention for children with learning disabilities is most
  effectively implemented within the context of a multi-tiered service delivery
  system that provides quality instruction and timely additional strategies and
  supports within general education for children with learning problems.
- When a learning disability is suspected, and instruction and intervention within general education fail to meet a child's educational needs, a comprehensive assessment by qualified professionals is an essential step in the identification of a specific learning disability.

Please note that NASP periodically revises its Position Statements. We encourage you to check the NASP website at <a href="https://www.nasponline.org">www.nasponline.org</a> to ensure that you have the most current version of this Position Statement.

- School psychologists play a key role in making appropriate decisions about individual children and advocating for effective policies at a systems level (federal, state, district, and school). They have unique and valuable expertise in the area of learning disabilities.
- As best practice in the field of learning disabilities continues to be shaped by evidence-based scientific research, it is critical for school psychologists to continually upgrade their knowledge and skills.

## The Nature of Specific Learning Disabilities

Researchers have learned a great deal about the nature of specific learning disabilities in recent years. There is general agreement that:

- Specific learning disabilities are endogenous in nature, and are characterized by neurologically-based deficits in cognitive processes;
- These deficits are specific, that is, they impact particular cognitive processes that interfere with the acquisition of formal learning skills;
- Specific learning disabilities are heterogeneous—there are various types of learning disabilities, and there is no single defining characteristic common to all learning disabilities;
- Specific learning disabilities may co-exist with other disabling conditions (e.g., sensory deficits, language impairment, behavior problems), but are not due to these conditions;
- Of children identified as having specific learning disabilities, the great majority (over 80 percent) have a disability in the area of reading;
- The manifestation of a specific learning disability is contingent upon the type of instruction, supports, and accommodations provided, and the demands of the learning situation;
- Early intervention can reduce the impact of many learning difficulties;
- Specific learning disabilities vary in their degree of severity; and moderate to severe learning disabilities can be expected to impact performance throughout the lifespan.

Widely used definitions of specific learning disabilities tend to be fairly similar in nature—identifying dysfunctional cognitive, or neuropsychological, processes as the primary causative factor; and citing exclusionary factors (e.g., other disabilities, sensory impairment, environmental conditions) that must be ruled out as primary explanatory causes. The following is the definition of SLD in IDEA 2004:

"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 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."

The term *dyslexia* is often used interchangeably with reading disability. Dyslexia is commonly used in medical settings, although the *Diagnostic and Statistical Manual of Mental Disorders (DSM-IV)* uses the term "reading disorder" instead. Some researchers use the term dyslexia in a narrow sense to refer to difficulty with accurate and fluent single word identification, or decoding. To avoid confusion, NASP advises school psychologists to use the term "reading disability," rather than dyslexia, when referring to learning disabilities in the area of reading, and to reframe parents' referrals and inquiries accordingly.

Federal special education law (IDEA 2004) permits, but no longer requires, an ability-achievement discrepancy as a criterion for SLD eligibility. This is in keeping with recommendations by NASP (2003), and by the organizations, including NASP, that comprised the LD Roundtable (2002). Alternative approaches to SLD identification have been advanced, including: (1) use of a systematic process for determining whether a student responds to evidence-based interventions in the regular classroom environment, and (2) use of standardized tests to assess "basic psychological processes." The former is supported by language in IDEA 2004 stating that, in identifying SLD, schools "may use a process which determines if a child responds to scientific, research-based intervention as part of the evaluation procedures." The latter is supported by language in IDEA 2004 that defines a specific learning disability as a disorder of "basic psychological processes." In addition, IDEA 2004 allows for "the use of other alternative research-based procedures for determining whether a child has a specific learning disability."

### SLD Identification Within a Multi-Tiered Model

NASP advocates the use of a multi-tiered model, as described below, that incorporates relevant data from multiple sources of information. A multi-tiered model addresses the learning needs of all children, including children with SLD. A multi-tiered model is intended to provide for quality instruction in the general education classroom and timely interventions in general education before a special education referral is considered. While various versions have been proposed, the multi-tiered model presented here is a widely used generic framework that offers many advantages. (For more detailed description and commentary on multi-tiered models, see Kovaleski & Prasse, 2004; NJCLD, 2005; Tilly et.al, 2005.)

Tier 1: High quality instructional and behavioral supports for all students in general education.

The basis of Tier 1 is the delivery of high quality instruction by a qualified teacher using evidence-based instruction in the general education setting. Teachers should implement a variety of research-supported teaching methods and approaches. Teachers of culturally and linguistically diverse students should use teaching methods and approaches that are research-supported for these populations, and should receive the training they need to be qualified teachers of diverse students. Universal screening of essential academic skills should be conducted periodically to inform instruction and to identify students who may require Tier 2 services. Students whose performance level and rate of progress are deemed insufficient in Tier 1 should receive more intensive evidence-based remediation services and/or individually designed interventions in Tier 2. School psychologists can consult with teachers on evidence-based instruction, universal screening, and criteria for evaluating academic progress.

Tier 2: Targeted supplemental services for students whose performance and rate of progress are below what is expected for their grade and educational setting.

Identified students receive additional strategies and supports that are designed and implemented through collaborative efforts of general and special education teachers, and support services personnel (e.g., school psychologists, speech-language pathologists, remedial reading teachers). Multiple strategies may be implemented at Tier 2, either concurrently or in succession. These may involve remedial programs designed in consultation with school psychologists to address common areas of academic difficulty (reading, written language, math), as well as a problem-solving model through which school psychologists and other educators review data, design and implement interventions for individual students, and monitor intervention outcomes. Assessment conducted at Tier 2 focuses on information needed to inform interventions and understand the context of the presenting issues. Outcomes on critical achievement variables are monitored to determine degree of responsiveness. Judgments of degree of responsiveness take the student's cultural and/or linguistic diversity into account. Lack of satisfactory progress at this point indicates the need for more intensive instruction and supports, which may be implemented as another phase within general education, or addressed by a referral for a special education evaluation because the student is suspected of having a specific learning disability. For students with cultural and/or linguistic diversity, lack of satisfactory progress may not constitute a learning disability if the language of the Tier 2 services was not accessible for the student or if the services were inappropriate for the student's culture. If the Tier 2 services needed to produce satisfactory outcomes are so intensive or specialized as to approximate specialized instruction, this may warrant consideration of SLD eligibility.

Tier 3: Intensive, individualized intervention that has been designed based upon comprehensive evaluation data from multiple sources.

Intensive, individualized intervention is provided in order to help the student make substantial progress towards meeting grade level standards. The intervention is designed based upon the results of comprehensive evaluation data from multiple sources. The purpose of comprehensive Tier 3 assessment is to provide information about the instructional interventions that are likely to be effective for the student.

At this stage, given the clear need for more intensive, specialized services, a special education evaluation is usually conducted. As described in IDEA 2004, a multi-disciplinary evaluation includes a variety of assessments and other evaluation methods that must not be discriminatory on a racial or cultural basis; must be administered in the language and form most likely to yield accurate information; are used for purposes for which the measures are valid and reliable; are administered by trained and knowledgeable personnel and in accordance with instructions provided by the producer; and encompass all areas of suspected disability. In making a determination of eligibility, the evaluation team also considers whether the determining factor is the lack of appropriate instruction in reading, math, limited English proficiency, or cultural differences. Evaluation teams should consider whether the multi-tiered interventions and assessment techniques utilized are culturally sensitive and adequately address the issues related to English Language Learners. The purpose of the evaluation is to gather relevant functional, developmental, and academic information, including information provided by the parent, to determine the educational needs of the child and whether the child has a specific learning disability.

NASP recommends that initial evaluation of a student with a suspected specific learning disability includes an individual comprehensive assessment, as prescribed by the evaluation team. This evaluation may include measures of academic skills (norm-referenced and criterion-referenced), cognitive abilities and processes, and mental health status (social-emotional development); measures of academic and oral language proficiency as appropriate; classroom observations; and indirect sources of data (e.g., teacher and parent reports). Existing data from a problem-solving process that determines if the child responds to scientific evidence-based intervention may be considered at the time of referral, or new data of this type may be collected as part of the Tier 3 comprehensive evaluation. An eligibility determination should not be based on any single method, measure, or assessment.

Regardless of whether or not the student qualifies for special education, the student should be provided with more substantial supports and strategies than those provided at Tier 2.

## The Role of School Psychologists

The expertise and support of school psychologists can be a critical factor in the effective implementation of a multi-tiered model. At Tier 1, school psychologists can

assist teachers with evidence-based instruction, behavioral interventions, periodic screening of literacy skills, and criteria for evaluating academic progress. At Tier 2, school psychologists should collaborate with general and special education teachers and support services personnel to design and implement effective, evidence-based strategies. This may be accomplished through active participation and leadership on multidisciplinary teams and by consultative relationships. At Tier 3, school psychologists work with other school personnel to consider programmatic options and plan and conduct comprehensive evaluations to determine eligibility for special education services and the educational needs of the child.

In the course of designing or conducting assessments, both in general and special education, school psychologists should strategically select assessment procedures with clearly defined purposes in mind, for example, (1) to identify the presence of a specific learning disability or other disability, (2) to differentiate between cultural, behavioral and cognitive factors underlying learning difficulties, and (3) to determine what culturally responsive instructional, behavioral, or social-emotional interventions may be needed.

Expertise in specific learning disabilities (SLD) is an essential area of specialization for school psychologists. Therefore, school psychologists must be knowledgeable about:

1. Federal and state laws and regulations, and (where applicable) state and local guidelines regarding special education evaluation procedures.

This includes federal requirements for evaluations under the Individuals with Disabilities Education Improvement Act (IDEA 2004), such as (1) use of a variety of assessment tools and strategies to gather functional, developmental, and academic information, (2) use of technically sound instruments, (3) nondiscriminatory assessment, (4) use of educationally relevant assessment tools and strategies, and (5) ruling out the lack of appropriate instruction in reading or math or limited English proficiency as the determining factors in special education eligibility.

2. Assessment measures and procedures that adhere to professional standards and enable school psychologists to address the requirements listed above.

This includes curriculum-based assessment measures and procedures for monitoring response to intervention, in addition to norm-referenced measures that assess basic psychological processes, and measures of academic and behavioral skills associated with SLD.

3. Research on specific learning disabilities.

This includes research on the nature of learning disabilities (e.g., Bradley et al, 2002; Fletcher et. al, 2002; Kaufman & Kaufman, 2001; Scruggs & Mastropieri, 2003); effective interventions (e.g., Gersten et. al., 2005; Jenkins & O'Connor, 2002; Lyon et al 2001; Mastropieri & Scruggs, 2007; National Research Council,

- 1998); and response to intervention (e.g., Fuchs et al. 2003; Fuchs & Young, 2006; Kovaleski & Prasse, 2004; NJCLD, 2005; Tilly et al, 2005).
- 4. Effective instructional practices including research-based practices for general education; the relation between results of comprehensive assessments and the recommendations that can be made for strengthening classroom instruction; research-based instructional practices for culturally and linguistically diverse students; and the impact of cultural and linguistic diversity on response to instructional intervention.
- NOTE: Other NASP position statements that are relevant to this statement on the identification of students with learning disabilities can be found on the NASP website.

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