

TABLE 1.
CRITERIA FOR SLD DETERMINATION

1. Age or grade-level state standards are not met despite the provision of appropriate instruction in at least one of 7 areas: oral expression, basic reading skills, reading fluency, reading comprehension, written expression, mathematics calculation, or mathematic problem solving.
2. Progress in response to evidence-based intervention is insufficient.
3. Delays are not due to an underlying visual or hearing impairment; motor disability; intellectual disability; cultural or environmental factors; economic disadvantage; or limited English proficiency.
4. Delays are not due to a lack of appropriate instruction.
5. Observation of the student learning environment documents academic performance and behavior in areas of difficulty.
6. Parents must be notified about instructional strategies, progress monitoring, and the right to request an evaluation for disability determination.⁴

TABLE 2.
POSSIBLE SIGNS OF DYSLEXIA

- Difficulty learning numbers, letters, and letter sounds
- Trouble with rhyming
- Trouble learning new words or sounding out words
- Difficulty breaking words up into syllables or sounds
- Trouble repeating words or numbers
- Mixing up the order of letters in words¹⁰

How are learning disabilities diagnosed?

Historically, school systems and psychologists have often identified a child as having a specific learning disability (SLD) when a significant discrepancy between the child's intellectual ability (measured by intelligence testing, or IQ) and academic achievement (measured by achievement testing) was present. Often called the "discrepancy model," this model had its flaws. In many cases, psychological testing did not occur until third or fourth grade and after the child had struggled for a few grades. Critics suggested that this model waited for the child to fail before providing help. In addition, the model may not be statistically valid for children with different types of cognitive profiles.³

Starting in 2004, the Individuals with Disabilities Education Act (IDEA) specified that states could no longer require schools to use the discrepancy model when identifying children in need of special education services. It provided schools with the flexibility to use RTI as well as other alternative research-based process in determining the need for special

education services. As specified by IDEA, a student should be considered for SLD determination when they are failing to meet age or grade-level state expectations despite the presence of appropriate instruction and in absence of other causes.⁴ See **Table 1** for full description of SLD determination. SLD in reading is also referred to as dyslexia.

In 2015, the Every Student Succeeds Act (ESSA), which replaced the No Child Left Behind Act of 2001, provided more flexibility to states and school districts while providing protections to economically disadvantaged students, students with disabilities, and English language learners.⁵ This type of flexibility is designed to allow states and schools to better tailor intervention to the unique needs of their communities,⁶ which will be especially important as schools tackle the effects COVID-19.

Regardless of how dyslexia is defined or identified, the core features remain the same. Children with dyslexia struggle with phonemic awareness and processing. That is, they have difficulties recognizing how letter symbols translate into specific sounds that

form the building blocks of words and sentences. This can result in difficulties with reading and decoding words, with spelling, and with reading comprehension. These difficulties are typically out of proportion with the child's overall cognitive level. Children with a history of language delay may also be at increased risk for dyslexia.

Individuals with reading difficulties are at risk for poorer health and vocational outcomes.

How COVID-19 has affected learning to read?

Research to determine how COVID-19 has affected learning is ongoing. Early studies suggest that academic progress declined by the end of the 2020-21 school year compared with previous years by 8 to 12 percentile points in math and 3 to 6 percentile points in reading.⁷ These effects are not universal: Students in earlier grades,⁷ students in economically disadvantaged schools, and students of color (eg, Black, Hispanic/Latino,

and American Indian and Alaska Native)⁸ seem to be disproportionately affected.^{8,9} In part, these disparities likely represent the significant challenges schools and communities faced in scaling up high-quality instruction during disruptions caused by COVID-19. Interestingly, implementation of remote learning does not completely explain differences in the degree of learning loss experienced by certain students and schools,⁹ which also suggests the importance of other sociodemographic factors.

Given these changes in performance, schools will need to determine how children with SLD are identified going forward. It seems likely that a larger number of children will qualify for MTSS services, but additional questions remain. For example, should lower age/grade norms be used for reference? And if so, what should those norms be, given disparities described above? Flexibilities built into ESSA and IDEA should ideally allow for these types of considerations.

The role of the pediatrician in promoting literacy skills

Encouraging families to read with young children and provide exposure to language and book promotes foundational reading skills. Pediatricians can check in with their patients and families about early literacy skills at health supervision visits, or when concerns about development or learning arise. Dyslexia also runs in families, so taking a good family history is important. See **Table 2** for possible signs of dyslexia¹⁰ that pediatricians can use as a part of the surveillance process.

Intervention for dyslexia often occurs in the school setting, and pediatricians can play a role in advocacy. Tutoring outside school may be an option for some families, but relying on

tutoring alone can further exacerbate inequities related to socioeconomic factors. Given the flexibility states and school systems have in implementing IDEA and ESSA, pediatricians can work with local school districts to understand their current processes. Pediatricians can also encourage parents and caregivers to work with their children to practice reading skills and, most importantly, to help make reading fun. See **Table 3** for ways to promote reading skills at home. Practice and repetition are important for children with reading difficulties, but understandably these children may resist practicing something that is inherently difficult. Children with dyslexia are at increased risk for co-occurring emotional/behavioral conditions, including anxiety, depression, and ADHD. In general, individuals with reading difficulties are at risk for poorer health and vocational outcomes, so early identification and intervention are especially important.¹¹

Closing the loop

Getting back to our case, JK's pediatrician can obtain a bit more history about the nature of his reading difficulties and provide advice to his family to contact the school about his progress. JK may already be receiving MTSS support or it may be time for his family to request an evaluation for SLD. Being able to help JK's family navigate this process is time well spent. ■

COMMENTS? Email them to llevine@mjlifesciences.com



For references, go to [ContemporaryPediatrics.com/view/learning-disabilities-COVID-19](https://www.ContemporaryPediatrics.com/view/learning-disabilities-COVID-19)

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TABLE 3. WAYS TO PROMOTE READING SKILLS AT HOME

Practice, but make it fun!
For example, rhyming games can help promote phonemic awareness

Don't make it too hard, provide encouragement, and give praise for effort (not just for the "right" answer).

Pick materials that are of interest to the child. Even comic books and books with lots of pictures encourage dialogue and engagement.

Provide exposure to language in different forms, including talking, reading to/with children, and even audiobooks.

Keep books and reading material accessible and use things in everyday life. Activities like shopping and driving in the car provide great opportunities to practice reading skills.

Help children recognize patterns in letters and sounds.¹²

RESOURCES

Learning Disabilities Association:
<https://ldaamerica.org/>

LD Online:
<https://www.ldonline.org/>



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