

# So You Know What I'm Saying?

## Exact Definitions for School Psychologists

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The average school psychologist rivals Stephen King in number of words written per year. One thousand pages of reports, parent notes, memos and other communication is a fairly typical number for many of us. Yet, communicating clearly and completely in writing is an extraordinarily difficult skill. I wish I had some helpful hints, but there are some words that we use without truly thinking about the exact meaning of what we are saying. "The difference between the perfect word and the nearly perfect word is the difference between lightning and a lightning bug," ranted Mark Twain.

**Significant:** I would guess that about 90% of all reports written by school psychologists have the word significant somewhere in the text. Everyone uses this word. And it is a fine word. The problem is that significant has two very different meanings. Meaning one is "statistical significance." In the common cases of difference scores or discrepancy scores, significance means the probability that scores are different by something other than chance or error alone. This is 1-alpha. And alpha is usually the sacred, but arbitrary, .05. Of course, this means that at  $\alpha = .05$ , one out of every twenty pair of scores without true differences will show up as having statistically significant differences (Type I error). We can make the case that nearly all children labeled leaning disabled are, in fact, manifestations of Type I error.

The second meaning is "of clinical importance." These two meanings are very different. It is possible for data to be statistically significant, but unimportant. Likewise, it is possible for data to lack statistical significance, but be clinically important. However, in most psychological reports, it is unclear if the word significant refers to statistical significance, importance or both. In most cases, statistical significance is a necessary, but not sufficient, condition for importance. A common example is a significant difference between verbal and performance scale scores on the WISC-III. A 15-point difference is statistically significant, but occurs in about 24% of the population - hardly, the ah-ha experience we all look for in making differential diagnoses. Usually, such a difference means nothing important. Just to introduce a spanner into the machine - it is theoretically possible that 100% of the population could have statistically significant differences or discrepancies on pairs of test scores. How clinically important would significant differences be in this case? On the flip side, if on a behavior checklist, a child endorses one item about self-harm, it is unlikely that any scale will be statistically significant. However, it is critical that this response be followed up immediately. A significant amount of thought is required when using the word significance.

**Needs:** This child needs special education. This child needs a father figure. This child needs a Lovaas approach. This child needs Orton-Gillingham. We hear this and may say this constantly. No children need any of these things. The children we work with need to have the presenting problems ameliorated. The above examples are simply methods to help children address needs. A child with mild mental retardation does not

need special education. The child needs to gain functional skills, adaptive skills, social skills and the highest degree of academic skills possible. Special education is only one method to help a child meet these needs. And when you review the outcome measures for EMH classes, it is not a particularly good method. No one needs a father figure. Children need academic skills, socially appropriate behaviors and adaptive skills. No one needs the Lovaas approach. Children may need to improve pragmatic language, develop self-care skills and expand behavioral repertoires. No child needs Orton-Gillingham. Children need to learn how to read better. If we think of needs as something the child has (not what is convenient for us to offer), then we can be more flexible and accommodating in our educational interventions. Referring to the methods we have available as what the child needs is somewhat arrogant and condemns the child to a cookie-cutter education.

**Potential:** Intelligence tests do not measure potential in any way, shape or form. Potential is the highest level of achievement that a person is capable of under the best of all possible circumstances. Best of all possible circumstances is, of course, a hypothetical construct. No one knows what the best of all possible circumstances are. As educators we spend our entire careers looking for this construct. For those with a genetics bent, potential is the hypothetical highest phenotypic point on the reaction range achieved via an environmental ideal for the expression of a genotype. Intelligence tests are merely samples of behavior from which inferences of typical cognitive functioning are made. This is important information, but it is not potential. Those who use dynamic assessment and the Learning Potential Assessment Device do a fairly good, but not perfect, job of estimating potential (see works by Reuven Feuerstein or Carol Lidz for details). Until we know what the best of all possible circumstances are, we cannot accurately estimate potential.

**Cannot:** This is my least favorite word in psychological reports or teacher referrals. Because a person does not demonstrate a certain behavior in a certain situation it does not follow that the child cannot demonstrate that behavior. For example, "Johnny cannot sit still." When you carefully observe Johnny, you notice that he does sit still while watching TV and in a one-on-one situation. Therefore, Johnny can sit still. He simply does not sit still in the teacher's class at the times that she wants him to. The other least favorite thing to hear a teacher say is, "This child cannot learn." As an undergraduate, my lab partner and I taught planaria (flatworms with no brains) to navigate a smile maze. Certainly, if invertebrate flatworms can learn, then any child can learn. If, in the course of a psychological assessment, a child does not recite the alphabet, names no colors and does not count, the appropriate verb to use is that this child did not show these behaviors. In another situation (perhaps in the best of all possible circumstances), the child may show these behaviors, so the word cannot is inappropriate.

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# Reducing the Child's Reading Anxiety

by John Zbornik, Ph.D. and Jo Ann Coffin, M.A. (reprinted from *The Ohio School Psychologist*, Summer 1998)

## Overview

Reading anxiety may be the cause of a child's avoidance of reading. The child may be exhibiting characteristics which would indicate that the child has a fear of exercising curiosity, a fear of aggression and a fear of doing tasks independently (Zbornik & Wallbrown, 1991). Anxiety may manifest itself in avoiding the reading task. This avoidance is masking an underlying fear which the child cannot verbalize, but parents and educators can observe.

Recent and past investigations of children's emotional reactions to the reading process suggest that when children believe that important people in their lives disapprove of their curiosity or don't reinforce the curiosity, reading activity becomes hindered. Often these children act or behave as if they do not care about learning to read and give up easily.

A second factor of reading anxiety is observed when children refuse to assert themselves in the reading process. This happens when the child has difficulty overcoming feelings associated with significant others' negative expectations of the child's academic accomplishments. Success at school is not reinforced at home. These children typically become oppositional toward the reading task. The child may exhibit an "I don't feel like reading" or "I'm tired of reading" attitude. The energy to be assertive in reading is absent from the process.

A third way in which the child may display reading anxiety occurs when the child fears reading independently. In this situation, the child's reluctance to read is related to the child's fear of reading independently. Often these children would prefer if someone else would do the reading. These children typically exhibit little tolerance for frustration and need to be constantly encouraged to "Try it yourself first." They often display an "I can't help myself" disposition. Anxiety manifests itself in an unwillingness to try or to make a mistake.

The task of the parent/teacher is to provide motivating and relaxed ways to get the child to read. The suggestions listed in this article are designed to improve reading skills in a relaxed atmosphere and to reduce anxiety in the child who is not progressing steadily in the reading process.

## Interventions

1. When reading to the child, read often in a relaxed manner such as sitting on the couch or just before the child goes to bed. The books should be of high interest and slightly above the reading level of the child. Your reading will help increase vocabulary skills and anticipation of the correct word used in the story or context. Do not have the child read to you at this time. The child needs to relax and enjoy the process.
2. As you read to your child using a book from the classroom, let the child tell you when s(he) would like to start reading the pas-

sage to you. Some perceived control of the situation will help the child relax. The child will have times when s(he) is pressured to read. The child does not need the same pressure from you.

3. Make up a menu for dinner. Type the menu and ask your child to read the menu to everyone at the table. Your child should take orders. As the child reports back to you, the child will be reading in a relaxed atmosphere.

4. Get the child involved in activities outside of school, (swimming, soccer, tennis, painting etc.) The child should not only show an interest in the activity, but also show capability. The child needs to be comfortable and successful in this process. A feeling of independence and control is important for the child to have in this activity. The child will be engaging in an activity without the anxiety that is generally associated with reading and schoolwork in general.

5. Ask the child to choose a book for you to read aloud. Read the book many times until the child has the book memorized. After the child has the book memorized, leave words out of a sentence to establish a closure pattern. The child has a sense of participating in the reading process and the child is building the anticipation skills necessary for reading. This strategy is especially useful for preschoolers and beginning readers.

6. Give the child coupons in the grocery store to use independently to get the groceries. The items that the child likes are very motivating to read. The child will be curious about reading the coupons without the anxiety that is generally associated with reading.

7. When the child is reading to you, wait for a response before you fill in the words that the child is having difficulty reading. The child will relax if s(he) knows that you are going to give the child time. This waiting time allows the child to play with the words that might fit.

8. The child should read books aloud at home that are slightly below the grade-level reading level to gain confidence and the flow of reading. The child may want to read to a younger relative. The younger child will not put pressure on the reader to be perfect.

9. Allow the child to insert a word that means approximately the same as the target word. This allows the child to feel the flow of reading and allows the child to make a mistake without too much pressure. Example: home/house

10. Look for ways to have the child engaged in the reading process without the anxiety s(he) associates with reading. Board games are reading activities with a high motivation, but a low frustration level for the child. The cards are repetitious which gives the child a lot of practice. Competition in the game itself is motivating to try to read the words.

## Resource

Zbornik, J., & Wallbrown, E.H. (1991). The Development and validation of a scale to measure reading anxiety. *Reading Improvement*, 28, 2-13.