Upcoming Alliance Registration Exam Dates

Contact the ALTA office for an exam application, casey@madcrouch.com, or call 972/233-9107 ext. 208.

April 5, 2008
KEY LEARNING CENTER / MULTISENSORY STRUCTURED LANGUAGE TRAINING
7:30 AM
1345 Hendersonville Rd. • Asheville, NC 28803
828/274-3311
www.cdschool.org

April 11, 2008
ALTA CONFERENCE
Hilton – Lincoln Centre
1:00 PM
Eisenhower Room (Lobby Floor – near L’Express Café) • Dallas, TX 972/233-9107 ext. 201

July 9, 2008
SCOTTISH RITE LEARNING CENTER OF WEST TEXAS
1101 70th • Lubbock, TX 78408
806-765-9150
www.lubbockscottishrite.org

July 14, 2008
SCOTTISH RITE LEARNING CENTER OF AUSTIN
12871 Research Blvd. • Austin, TX 78750
512/472-1231
www.scottishritelearningcenter.org
The idea that dyslexia is a neurologically based disorder has a long history. Dr. Samuel Orton originally proposed that developmental dyslexia was a neurological problem, specifically a problem with communication between the hemispheres of the brain. Although subsequent studies have not supported many of the specifics of Dr. Orton’s theory, research has consistently shown that the brains of people with dyslexia are different in both structure and function than those of non-reading impaired individuals.
Dear Fellow ALTA members,

This is my last letter to you as ALTA president. What a wonderful two years it has been! When I look back on these two years, I see great progress and see us poised for great things for the future.

As a founding member of the Alliance, ALTA continues to support that organization. Suzanne Carreker chairs the Alliance Exam Committee, insuring that the exam continues to improve and to serve as the benchmark for professionals across the country. With participation from ALTA, the Alliance is exploring ways to collaborate with like-minded professionals to better serve the public.

On the legislation front, ALTA continues to work with a lobbyist in Texas where the strategy for passing a licensure bill in 2009 is being developed. Jeanine Phillips is very involved in Kansas where legislation is being proposed. There are rumors of legislation “in the wings” in Oklahoma and in South Dakota. Last year we established the Legislative Action Fund so that we could support legislation, not only in Texas, but across the country. Please remember that contributing to the Legislative Action Fund is an ongoing need. A contribution to the fund is vital to ALTA’s ability to support legislation that benefits our members as well as those we serve. Please join me in contributing regularly.

Last year we instituted three ongoing awards: the Founders Award, the Luke Waite ALTA Award of Service, and the Ayllett R. Cox ALTA Educator Award. Recently I asked Karen Avrit, Awards Committee chair, how the deliberations were going. She replied, “GREAT” and flashed a huge grin. These awards acknowledge the contributions of our members as well as others to our profession and to those whom we serve. I cannot wait to hear who will be recognized this year!

I am proud to have been “steering the ship” as ALTA has continued support of the Alliance, established the Legislative Action Fund and instituted ongoing awards. I am also proud to have been involved as our Board of Directors has moved from regional representation to include members across the country. I know that you will be impressed with the slate for the 2008/2009 board. We are very fortunate that individuals of this professional caliber are willing to give their time and talent to ALTA. By committing to sit on our board, they raise the profile of the organization.

Now get ready for April 12, 2008! Jennifer Price-Sellers and her committee have been working diligently to insure that our upcoming conference will benefit you as members, our association, and interested others that attend. I look forward to learning from the wonderful speakers, hearing about the next award winners, and seeing each of you.

I would be remiss if I did not stop to thank the 2007/2008 Board of Directors. They have worked untold hours to insure that your interests were protected. Mary Lou Slania, Jeanine Phillips, Melanie Royal, Elsa Hagan, Sandra Dillon and Linda Stringer will move off the board at our general membership meeting in April. Each has made a unique and important contribution to ALTA. Please join me in thanking them for their service.

Thank-you for the trust and support that you have shown me for the past two years. I have learned so much about the struggles that our members face in areas where dyslexia is not recognized and have been continually surprised and impressed by the determination of our members to offer better services to more children who struggle to read, wherever they are. It has been an honor and a privilege to serve ALTA as your president.

Sincerely,

[Signature]

Nancy Coffman, MS, CALT, QI

The Academic Language Therapy Association neither recommends nor endorses any specific speaker, school, institution, instructional program or material advertised in ALTA promotional or educational materials.
In Part I of *The Reading Brain*, we provided a simplified description of how reading works in the brain. To begin the current installment, we re-visit the functional brain differences observed when non-impaired readers and children with dyslexia perform basic reading tasks. The intent of the review is to ground our discussion of the reading brain provided in Part I on the functional differences commonly observed between children with dyslexia and non-impaired readers. The discussion of these differences is then followed by several specific questions that we are frequently asked when speaking with language therapists and diagnosticians about the science of reading and the reading brain. We make an effort to answer these questions using the current state of the scientific understanding of the reading brain. Our goal when answering these questions is to provide practical answers based on our knowledge of the real world constraints faced by language therapists and diagnosticians.

**Functional brain differences observed between non-impaired readers and children with dyslexia**

Several distributed areas in the left hemisphere dominate brain activity when reading. These left hemisphere brain areas can be divided into two distinct regions as shown in Figure 2. One region is located in the anterior, or front part, of the brain. The other region is located in the posterior or rear part of the brain. These two regions can be further subdivided into the numbered regions depicted in Figure 2. Note that for reference, we have included the neurological terms for each of these areas in the figure notes. The figure provides a simplified representation of brain activation that is consistently observed in the left hemisphere of non-impaired readers and children with dyslexia when performing basic reading tasks. Importantly, Figure 2 depicts the brain activation consistently observed when children with dyslexia perform basic reading tasks prior to receiving treatment for their reading problems. A glance at the figure highlights similarities as well as differences in the brain activation observed across these two groups of children.

Notice in Figure 2 that Region 3, which is located in the left inferior prefrontal frontal cortex, is shown as being active when both non-impaired readers as well as children with dyslexia perform basic reading tasks. The left inferior prefrontal cortex has been implicated as being important for several cognitive abilities other than reading. For example, it has been identified as being critically important to working memory and executive functions such as retrieving information from memory. This region is recruited when reading for the overt and/or sub-vocal articulation of speech sounds. Prior to receiving treatment, children with dyslexia actually demonstrate greater activation in the left prefrontal cortex than non-impaired readers. After successful treatment, those children demonstrate a more typical pattern of function in that same area. Their activation in the region is equivalent to that of non-impaired readers when performing basic reading tasks. Such data are commonly interpreted as evidence that children with dyslexia are relying less on compensatory reading strategies that might involve retrieving whole words from memory based on context or other retrieval cues.

In addition to anterior reading areas, there are also posterior brain regions that are involved in reading. The posterior brain areas in the left hemisphere that are most consistently observed to be part of the reading network in the brain are shown as Regions 1, 2, and 4 in Figure 2. Prior to treatment, these posterior brain regions typically do not show activation to the same extent in children with dyslexia as they do in non-impaired readers. Most notably, Figure 2 depicts the posterior functional brain deficit commonly highlighted by Drs. Sally and Bennett Shaywitz as a hallmark of dyslexia. These posterior brain regions have been associated with phonological awareness, phonics and letter knowledge. Brain imaging studies consistently demonstrate that those individuals who respond well to intervention show a more typical pattern of brain function in posterior regions of the reading network.

Thus, brain research indicates response to intervention to be associated with more or less normalized function in the reading networks of the left hemisphere of the brain. A thorough review of the current literature also demonstrates substantial evidence that there is an area in an anterior right hemisphere brain region that shows increased activation in children with dyslexia after they have completed therapy. Moreover, the activation in this right hemisphere region is far greater in children with dyslexia than non-impaired readers. In our own research, we observe elevated activation in the right anterior region after successful response to intervention, replicating previous research. Such findings suggest that, even with the ‘normalization’ of brain function in the left hemisphere reading network, there are still commonly observed differences in how the brains of children with dyslexia function even after successful therapy.

Any discussion of brain differences in dyslexia and the observed effects of treatment raises numerous questions. Perhaps the most important question is also the most practical one: How might these data apply to my practice? Now that we have reviewed some of the basics about how the reading brain works in dyslexia let us apply this knowledge to answer some of the questions asked by members of the therapeutic community.

**Can our knowledge of how the brain works help identify children with dyslexia?**

The answer to this question is a qualified Yes. Researchers at Stanford University recently demonstrated that using standard educational tests of reading abilities in addition to functional and structural brain scans improved their ability to identify children who would continue to struggle with decoding a year later. These researchers first measured reading abilities in struggling readers and obtained scans of the brains of these children. After one school year, they re-tested the ability of these children to decode words. The researchers found the initial reading abilities test scores to do a good job of identifying those children who still struggled to decode words a year later. But, interestingly, using the information from the brain scans in addition to the standard test scores proved to be an even more effective method for predicting which children would continue to struggle with decoding a year later. In other words, the brain scans captured something that apparently was not measured by the standardized reading tests.

However, as therapists we face the practical constraints that come with working with children in the classroom, and as such, we are forced to ask practical questions. Is it feasible or even desirable to include brain scans as part of the diagnostic package used to better identify children with reading difficulties? Moreover, is there a real need for most students to complete such scans? Presently, the answer to these questions is that it is not necessary nor is it realistically feasible to
obtain brain scans for every child with suspected reading disability. Current diagnostic tools (i.e., standardized cognitive tests) do a good job of identifying which children need a targeted reading intervention. Moreover, the current treatments are effective for the overwhelming majority of the children identified by such means. However, the fact still remains that brain scans provide additional information that is not yet obtained from diagnostic tests, but continued research is still needed to help identify exactly how best to use brain scans for this purpose.

Can knowledge about how the brain works when reading help you teach children to read?

The answer is yes, in an indirect way. Research on brain function now confirms reading to be a complex integrative task that requires precise coordination of visual, phonological, and articulatory processes with oral vocabulary and background knowledge. In this sense, reading is truly multisensory. Good reading instruction, particularly for children with dyslexia, must therefore emphasize each of those elements to be most effective. The brain research also confirms that real, measurable changes occur in the brains of children who respond to treatment. Moreover, studies are underway that are attempting to figure out what specific elements of instruction are most effective for different kinds of treatment success. Thus, the new brain research is providing visible evidence that supports instructional methods that both educational research and our experience as therapists tell us are most effective for our children.

How can our knowledge of how the brain works help us teach those children who do not respond to standard intervention efforts?

The answer to this question is somewhat speculative at this time. As therapists, we all have experience with some children who, despite the best instruction available and our best efforts as therapists, still continue to struggle with reading after treatment. A review of the research on individual differences in treatment response suggests that even with what is theoretically the most appropriate instruction, the reading skills in approximately 2-6% of children served will still be significantly below average. The question is why? Certainly, in many cases, there are significant co-morbid conditions, such as attention problems, that can interfere with learning. Nevertheless, even controlling for those conditions, some children will continue to have difficulty with reading. Recent research on brain functioning has started to address this important question. Some researchers have interpreted the brain imaging research to suggest that some children with dyslexia have an under-developed, rather than a disrupted, neurological circuit for reading. An important and as-yet-unsolved question is whether some children may have disrupted rather than under-developed neurological circuits, and if so, whether those differences have any impact on treatment success. In our own brain imaging research we are replicating the findings of other research teams and identifying differences between children with dyslexia and typically-developing children in the density of the wiring between reading areas in the brain. Moreover, differences in the neurological wiring correlate with reading ability. It remains to be seen if such anatomical measures can predict who will respond to treatment and who will continue to struggle after treatment.

However, this is all theoretical speculation. As therapists, we deal with the pragmatic issues of treating the disorder. If the current brain research finds that differences in brain structure impact functioning and in turn behavioral outcomes, then the research confirms that the standard course of treatment will have to be amended. How treatment should be amended is another unanswered question. Research activities examining components of successful treatment may provide suggestions for treatment manipulations for treatment resisters. Such manipulations could include significantly slower pacing, increased intensity (e.g., one-on-one therapy), specific targeting of some skills (e.g., articulatory awareness, increased rate practice, contextual reading) or individualized combinations of therapeutic intervention. The take-home message is that brain science may tell us why some children are resistant to treatment, but it is up to us as therapists to work around those deficits to achieve success.

Some Caveats and Conclusions

In closing, it is important to point out some of the limitations of brain imaging studies. First, it is important to understand that in the vast majority of functional brain studies children are not asked to read per se. Instead, they perform simple tasks that are related to reading and the basic component skills required for reading. For example, researchers have asked children to do tasks such as matching letter names or phonemes to their corresponding letters, to tap into basic phonics skills. Additionally, children have been asked to indicate if two non-words rhyme with one another to tap decoding skills. Higher order abilities such as semantic retrieval, narrative construction and integration, inferring, summarizing, etc. have yet to be explored as extensively in brain imaging research as have single word decoding skills.

One reason for the lack of such research on higher order abilities is the physical constraints placed on individuals while their brains are being scanned. For example, participants in an fMRI study are placed within a narrow tube surrounded by a very powerful magnet. While in this confining physical space, participants are asked to not move. In addition, the MR scanner generates a considerable amount of noise when it is scanning, making it difficult to capture spoken responses from children. As a result, behavioral responses that children make when performing basic reading tasks in fMRI studies are usually limited to button presses on a response pad. Such constraints require relying on somewhat contrived ‘reading’ tasks to stand in for more genuine tasks such as oral reading of text.

Thus, the impressive color pictures generated from brain imaging studies are based on something that, on the surface, does not seem much like what children in your classrooms are being taught to do. Yet, at the same time, the tasks that have been created to tap into basic reading skills are analogous to commonly used screening and diagnostic tools. As such, in some respects, brain imaging tasks have some ecological validity. That is to say, because fMRI reading tasks are similar in nature to how children’s reading skills are measured in real world settings, the results can be applied to basic reading behavior in general. Moreover, the imaging data provide converging evidence with standardized tests of reading abilities. Response to intervention is accompanied by increased phonological awareness and single word decoding skills. Similarly, response to intervention is associated with increased activation in posterior left hemisphere brain regions that are thought to be important for phonological awareness and single word decoding. As such, a continued

See The Reading Brain, Part 2 on Page 5
theme throughout this article has been that the brain imaging data act to confirm what has been demonstrated by standardized tests of basic reading skills.

The last point raises a fundamental question. Do brain imaging studies add anything extra to research efforts in dyslexia treatment than what is already provided by standard testing practices? The answer to this question is an emphatic yes. In our research and in other studies, children who responded well to intervention looked identical to non-impaired readers on behavioral measures (i.e., standardized tests of reading skills). Their neurological data also suggest a ‘normalization’ of activation patterns in left hemisphere anterior and posterior reading circuits. It is seemingly very easy to conclude from such data that these children’s reading problems are now ‘fixed’, and they can now proceed as if they never had difficulties with reading. Yet, there is no evidence to support such conclusions. Rather, the imaging data confirm in clear terms what we as therapists experience. Even children who experience successful treatment outcomes can continue to struggle with learning. The imaging studies show that children with dyslexia still exhibit significant differences in their brain response when compared to non-impaired readers. Moreover, there are clear functional and structural brain differences between treatment responders and treatment non-responders.

The neuroscience of reading serves to underscore the need for additional applied research to develop treatment strategies that are effective for all children who experience difficulties with reading and learning in general.

In conclusion, scientists and practitioners share the same goal. Each of us strives to better understand how to teach children with dyslexia how to read. It is our hope that the twin threads of basic neuroscience research and the more applied therapy based research efforts will develop a partnership between practitioners and researchers that guides future experimental research on response to intervention and the components of the curricula that foster that response.

References


Suggested Readings


The Educator’s Mindset: The Basis for Touching a Student’s Mind and Heart

By Dr. Robert L. Brooks

Dr. Sam Goldstein and I have emphasized the concept of mindsets in our books pertaining to resilience. We have defined mindsets as assumptions and expectations that we possess about ourselves and others. We may not always reflect upon or even be aware of these assumptions, but they play a major role in determining our actions and behaviors.

The following are five of the key beliefs that I believe represent the mindset of the effective educator, that is, educators who touch both the minds and hearts of students. It is my hope that this relatively brief description will provide the reader with a sense of the mindset that I advocate be defined, embraced, and incorporated by all educators in their teaching activities.

1. To believe that what we say and do in the classroom each day can have a lifelong influence on students, including their sense of hope and their ability to be resilient. I as well as others have found that the seemingly simple comments or actions of an educator can make a profound difference in the paths that students choose in their lives.

2. To believe that addressing the social-emotional needs of students is not an extra curriculum. It is unfortunate that a belief has emerged in some quarters that nurturing a student’s emotional and social well-being is mutually exclusive from reinforcing academic skills. I am convinced from my own experience as well as the feedback I have received from numerous educators that strengthening a student’s self-worth is not an “extra” curriculum that siphons time from teaching academics; if anything, a student’s sense of belonging, security, and self-confidence in a classroom provides the scaffolding that bolsters the foundation for enhanced learning, motivation, self-discipline, and caring.

3. To believe that all students enter school hoping to learn and to succeed. Without wishing to sound facetious, I have never met a young child first beginning school who says, “I hope I do not do well in school, I hope I have trouble learning, I hope my parents and my teachers are always on my back criticizing me about my school performance.” If we accept that all students truly wish to succeed, and they are displaying academic and/or behavior problems, we must ask, “What is it that we can do differently so that the student will succeed?”

4. To believe that students will be more responsive and motivated to learn from us when we first meet their basic needs. Effective educators subscribe to the view that before they attempt to teach a student academic skills or content, their first task is to create a safe and secure environment in which all students feel comfortable and motivated to learn. As has often been said, “Students don’t care what you know until they first know you care.” As psychologist Edward Deci has noted, basic needs include the need to belong, to feel a sense of ownership for one’s life, and to feel competent.

5. To believe that parents are our partners, not our adversaries. I have witnessed far too many situations in which educators and parents have become adversaries and it is the child who suffers. Effective parent-teacher relationships enhance a child’s success in school.

Reprinted with permission from Dr. Robert L. Brooks. This excerpt is an edited version from his article entitled “The Educator’s Mindset: The Basis for Touching a Student’s Mind and Heart” published in September 2005 and found on his web site www.drrobertbrooks.com.
Arnie’s Story

By Arnie Clark

Hello! My name is Arnie Clark. I’m 67 years old, and this is my story. I was born in Hoopston, Illinois to Mr. and Mrs. Arnold Clark. My mom was Anna May Clark. I went to elementary school in Midlothian, Illinois. I felt like the class idiot, because I couldn’t go as fast as the other kids. I was trying to read and write, but I couldn’t keep up and was passed on, because of my size.

In junior high, actually in the grade school, it went from all grades to eighth in one building. There was never any special help for any student. In high school, my freshman teacher threatened to expel me, so I just quit going to school. My parents didn’t like it, but there was nothing they could do. I started working for the city of Midlothian in Illinois.

At age 19, I proposed to Elaine. She didn’t know I couldn’t read until she gave me a birthday card and asked me to read it out loud. It was at that time I had to tell Elaine I couldn’t read. She married me anyway. If it had not been for her love and support I would not be where I am today.

As we were raising our two boys, I tried several times to learn how to read. It never worked out, and my family came first – period. Everything I learned, I learned the hard way, always by doing. I now have a teacher who understands my situation, and I am finally learning to read and write. Elaine, my wife, helps me review my daily lessons (rap) at home. If it was not for my reading teacher, Mrs. Stoner, and my wife, I would have given up. Now I can say, “I’m going to beat this and make it work.”

Elaine made Dr. Dooley a quilt and Mrs. Stoner a wall hanging for helping me. (Mrs. Stoner volunteers to help me – everyday) I enjoy hunting, and I also raise white peacocks and India blues which are the most popular.

Thank you to all of you that help people to become better in our world by teaching them to read – and That’s the Truth.

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Support legislative efforts to secure licensure by making a non tax deductible donation to ALTA’s Legislative Action Fund (LAF). Check or credit card contributions can be sent to the national office.

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Southern Methodist University’s Learning Therapy Center is proud to announce that Jana Jones, Coordinator for the Learning Therapist Certificate Program (LTP) at Southern Methodist University (SMU) in The Annette Caldwell Simmons School of Education and Human Development, was awarded the sole Dallas Branch International Dyslexia Association’s (DBIDA) Excellence in Education Award for 2008. As LTP Coordinator, Jana teaches graduate-level courses and serves as an advisor to students working on clinical teaching requirements. She also trains and evaluates instructors who are participating in the Certificate of Advanced Studies program to become Qualified Instructors. Jana is a Consultant for the Academic Enhancement Workshops (AEW) at SMU and has been instrumental in writing curriculum for many of the AEW classes.

Jana also currently serves as Greenville Independent School District’s Assistant 504 and Dyslexia Coordinator and teaches classes at Greenville Middle School campus. She has been teaching in Texas public schools for 16 years and her experience includes teaching Reading to Kindergarten through eighth grades, serving as a fourth grade teacher, and providing instruction in dyslexia remediation and private instruction to individuals with dyslexia and related disorders. She is a frequent presenter for local in-service programs and for events at the local, state, and national levels.

Jana is truly gifted in the area of teaching and brings compassion and understanding to her colleagues. Her gift for reaching students who struggle with reading is evident in each area of her professional life. Her expertise and dedication to high standards is only surpassed by the gentle approach she uses to effect lifelong changes in her students. For those who know Jana outside the classroom, it is her sincere and thoughtful deliberation which makes her a respected advisor to so many in the field. Any listing of Jana’s talents would be incomplete without mentioning her amusing wit and love of a good joke or prank that often leave her colleagues in stitches. All of these qualities endear Jana to her students, advisees, colleagues and friends.

Jana is a member of the DBIDA, as well as a member of the Academic Language Therapy Association (ALTA). She has served several terms on the ALTA Board of Directors and currently serves on the board of the ALTA Foundation. She also served for two years as the conference chair for the annual ALTA conference and was responsible for bringing in such keynote speakers as Bennett and Sally Shaywitz.

Jana earned her B. S. in Interdisciplinary Studies with a Reading Specialization from East Texas State University in Commerce, Texas. She continued her studies to become a Certified Academic Language Therapist and completed the requirements of both the Academic Language Therapy Association and Southern Methodist University’s Certificate of Advanced Studies to become an Academic Language Therapist Qualified Instructor. She also earned her Master of Liberal Arts degree from Southern Methodist University. Jana is married to James Jones, a fourth grade teacher in the Greenville Independent School and has two grown children and one grandson.
A lot of ghosts and goblins came out to trick or treat at the National IDA Conference on October 31 – November 3 in Dallas, Texas. The real treat was how well attended the conference was by ALTA members. Fourteen CALT/QI presenters and several exhibitors shared all their tricks to help students with dyslexia get their treats of learning to read.
In the last few decades, a significant shift has occurred in the ways in which researchers, educators, and parents view literacy development. In the past, proponents of this reading readiness model suggested that children were not “ready to read” until they had developed proficiency in oral language skills. It was also widely acknowledged that formal reading and writing instruction were necessary to develop this readiness.

Emergent literacy theory has now become generally accepted as a more accurate way to view a young child’s transition from oral to literate language. Investigators have confirmed that even very young children (i.e., two and three years of age) display nascent pre-literacy capacities. Observing various behaviors in these young children support this developmental progression. Activities such as enjoying nursery rhymes and noticing that words sound alike or rhyme, engaging in book sharing activities, viewing themselves as “reading” books that they have memorized, “writing” notes to parents and grandparents, and showing an interest in the alphabet (perhaps specifically for the letters in their names) serve as early developmental markers.

Researchers have also confirmed that a number of these emerging literacy skills are strongly correlated with later literacy success suggesting that these skills are necessary precursors to literacy development. Likewise, it is clear that children getting a late start in these pre-reading abilities (perhaps secondary to lack of opportunity for immersion in a literacy-rich environment, a history of frequent ear infections, family history of dyslexia, attention and behavioral challenges and/or due to developmental speech, language and learning challenges) are at significantly greater risk of developing reading disabilities as well as difficulty with writing and spelling development and mastery. Four general domains are often cited to reflect emergent literacy skills most strongly associated with later reading proficiency including phonological awareness, print awareness, oral language, and emergent writing and spelling.

Currently, we are armed with important information regarding emerging literacy skill development in young children. Additionally, much is known about those children at risk for developing reading disabilities. As a result, when weaknesses in a child’s emerging literacy skills are identified with the knowledge that these weaknesses are an early, sensitive indicator of the child’s vulnerability for reading disability, direct instruction is warranted. With the implementation of a structured, sequential, evidenced based program tailored specifically to the needs ascertained for each child, professionals may substantially reduce the risk for potential reading disability or at least mitigate its severity.

Reminder to all Qualified Instructors and Instructors of Associate Academic Language Teachers: You must provide documentation that you have complied with the CEU requirements for 2007-2008. Documentation of 10 contact hours of CEU credit, between March 1, 2007 and February 29, 2008, must accompany your membership renewal. Your documentation should include copies of dated letters, forms, or certificates bearing the number of hours earned and a valid signature. In addition, please include the form entitled “Continuing Education Units – Member Verification Form”. (Available online)
Meet Cassandra

By Joan Ellet Hogge

“I like to paint because it expresses my feelings a lot.” - Cassandra Mendez

Last year’s winner of the “I Believe in Myself” Scholarship was Cassandra Mendez from Weslaco, TX, a student of Deborah Kremer. I spoke with Debra after last year’s ALTA Conference, and she shared the story of Cassandra’s passion for art and her interest in competing for the scholarship. Cassandra verbalized her feelings about art beautifully while Debra helped her write her paragraph. After the conference, Cassandra sent me a DVD introducing herself. Since it captures and conveys her enthusiasm and artistic spirit, I’m hoping you can visualize Cassandra as I verbally paint her message.

The DVD opens with an expressive young girl sitting on the bed in her bedroom surrounded by paintings which cover her bed, chairs and the floor. She introduces herself: “Hi, I’m Cassandra, and I’m ten years old.” She spreads her arms around the room, and points to a painting of a rainbow, as she explains her paintings: “My mom bought me a canvas, and I use scrapbook papers and pieces of cardboard, and I turn boxes into a painting. I painted mom a red shoe box and she puts our Bingo game in it. When I can’t find my paints, I use colored pencils.” Her mother, behind the camera, asks her where she paints, and again she extends her arms, “I paint in my closet. It doesn’t have a lock, and I sit on the floor,” she smiles, displaying the jars of paint and pencils on the shelves. “I like patterns a lot, and if I don’t have the color I need, I put another color in it, then I can do so many other things.” Her paintings are of butterflies and flowers, much like those on the walls of her room, but there is also a colorful lady bug, a dolphin, a duck in a pond, and a delightful painting of Sponge Bob. “I like to paint because it expresses your feeling a lot,” she states, and explains that, “This is a picture of my mother. She was very sad one day, and I painted her blue.”

Cassandra exuberantly shares how she likes to go to the paint section of WalMart because she’ll “find steps on how to make art things” and learn new ways to make art. She also watches a show on T.V. called “Hands On,” where she learns new creative ideas. “I feel happy you gave me this art scholarship. Thank you, goodbye,” she waves.

Cassandra’s ability to understand and explain that “painting expresses my feelings a lot” is remarkable for a ten year old. Whether art continues as a hobby or becomes a profession, she’ll always have a way of understanding and nurturing herself. Deborah Kremer says she has seen Cassandra’s self confidence develop this year, and she attributes it to her growing understanding of her ability and talents, and the recognition she has received from her peers and teachers due to the scholarship.

Cassandra’s mother tells me they have bought her a new easel and watercolor paints, and they plan to ask a watercolorist at their church to give her some help with that medium. Some of Cassandra’s new paintings will be on display at this year’s conference, and I know you’ll enjoy them. It is exciting for me to see Cassandra’s enthusiasm and know she is learning to believe in herself as a unique individual.

As Academic Language Therapists, we appreciate each child’s unique qualities, and art is one way to help children develop these qualities on a very deep, emotional level. It is my hope that this scholarship can encourage other talented, dyslexic children, such as Cassandra, to understand and appreciate their individuality through art.

ALTA FOUNDATION

Please keep the ALTA Foundation in mind whenever you consider giving a memorial, scholarship money, or simply a charitable donation. The ALTA Foundation is a 501(C)(3) non-profit entity established to accept donations and contributions that support ALTA’s educational mission. Through the financial support provided by the Foundation, Academic Language Therapists benefit from continued education in the most current research based information emphasizing strategies and techniques most effective in clinical and school settings. The Foundation also supports programs to help students with dyslexia, their peers, and public at large to better understand dyslexia and to demystify the disorder. Other Foundation activities include opportunities to provide and support best practices among our members and maintain high levels of professionalism in the field. For more information, or to make a tax-deductible donation, please contact the ALTA national office.
The Code of Ethics for ALTA members expresses the profession’s recognition of its responsibilities due students, parents, legal guardians or caretakers, administrators, colleagues, associated professionals, and the community, through its members.

Compliance with the Principles and Rules will guide ALTA members in the fulfillment of their personal conduct, clinical expertise, professional competence, and responsibilities necessary to maintain the highest standards of integrity and professional conduct. The omission of any other ethic or rule must not be interpreted as denial of those ethics or rules.

By acceptance of voluntary membership in ALTA, members accept an obligation of self-discipline, beyond the requirements of the law, to observe the Code of Ethics under all conditions of professional activity. Any violation of the Code of Ethics will be deemed unethical.

The fundamentals of ethical conduct are described by Principles and Rules. Principles provide the moral framework for standards of personal and professional conduct, clinical expertise, and competence. Rules represent minimally acceptable standards of professional conduct.

**Principle I:**
ALTA members shall maintain the highest standards of integrity, clinical competence, and responsibility in their professional interaction with their students.

Rules:

ALTA members shall

A. strictly abide by the Code in their interactions and dialogues in the delivery of their professional services.

B. provide all services with the highest standards of professional competence.

C. refrain from any conduct involving fraud, deceit, dishonesty, misrepresentation, unprofessional communication, sexual misconduct, or other actions which may cause the student physical or emotional injury.

D. maintain strictly confidential student records in accordance with the highest professional integrity and release this information only under the following circumstances:
   1. when required by law;
   2. with written consent from the adult student, or from the parent(s), legal guardian(s) or caretaker(s) of the minor student;
   3. when there is clear and imminent danger to the student, another individual, or society.

E. maintain adequate records of professional services rendered and provide reasonable access to these records limited by confidentiality.

F. be familiar with all the available diagnostic data and other relevant information regarding each student.

G. limit professional services to the areas of documented competencies and shall not misrepresent or falsely advertise their qualifications, training, clinical competencies, credentials or professional status.

H. provide professional services only as long as such services are deemed beneficial to the student.

I. exercise caution not to mislead individuals by guaranteeing the results of any therapeutic procedures or services.

J. avoid offering any professional services to an individual concurrently receiving them from another ALTA member, except with the prior knowledge and consent of that member.

K. not discriminate according to race, ethnicity, religion, sexual orientation, or national origin in the delivery of professional services.

**Principle II:**
ALTA members shall maintain the highest standards of integrity, clinical competence, and responsibility in their professional interaction with parents, legal guardians, or caretakers of their students.

Rules:

ALTA members shall

A. not engage in any conduct involving fraud, deceit, dishonesty, misrepresentation, unprofessional communication, or other actions to cause physical or emotional injury.

B. inform the parent(s), legal guardian(s) or caretaker(s) of all aspects of the professional relationship including goals, techniques, fees, materials, and hours.

C. obtain written consent from the parent(s), legal guardian(s) or caretaker(s) of all aspects of the professional relationship including goals, techniques, fees, materials, and hours.

D. maintain objectivity and refrain from participating in activities that create a conflict of interest. They shall:
   1. respect freedom of choice of professional services and/or products.
   2. accurately describe the performance of a product they have developed.
   3. not mislead the student or parent regarding the
exclusive use or recommendation of products created or produced by the ALTA member(s).

**Principle III:**
ALTA members shall maintain the highest standards of professional integrity, competence and responsibility in their relationship with administrators, colleagues, other allied professionals and the community.

Rules:

ALTA members shall

A. not engage in any conduct involving fraud, deceit, dishonesty, misrepresentation, unprofessional communication, or other actions to cause physical or emotional injury.

B. not malign or discredit any member of ALTA, other professionals, or instructional programs and shall strive to establish and maintain congenial relations with their colleagues and members of other professions.

C. refer individuals/organizations for recommended professional services to those professionals qualified to perform the recommended professional services and not on the basis of any personal financial interest.

D. not engage in the diagnosis or medical treatment of dyslexia unless otherwise qualified to do so, but may suggest appropriate academic, psychological and/or medical evaluation.

E. neither give nor receive a commission, rebate or any other form of remuneration for the referral of students for Academic Language Therapy or other professional services.

F. give appropriate credit to contributors in the field.

**Principle IV:**
ALTA members shall maintain the highest standards of commitment to the Profession and ALTA.

Rules:

ALTA members shall

A. pursue their continued professional development in compliance with ALTA’s continuing education requirements.

B. be obliged to notify the Ethics Committee of ALTA of possible violations of the Code of Ethics.

C. assist the Ethics Committee of ALTA in any matters pertaining to this Code.
CEU Opportunities

ADHD / Study Skills
Date: March 27, 2008
Time: 8:30 a.m. – 12:00 p.m.
Location: Southwest Multisensory Training Center
600 S. Jupiter
Allen, TX 75002
Sponsor: Southwest Multisensory Training Center
Presenter: Beverly Dooley, Ph.D., CALT, QI
Contact Person: Ashley Morris-Johnson
Email: Ashley.mj@southwestacademy.org
Telephone: 972-359-6646
CEU Contact Hours: 3

Interpreting Dyslexia Assessment
Date: March 27 and April 9, 2008
Time: 8:30 a.m. – 3:30 p.m.
Location: Region 4 Education Service Center
7145 Tidwell
Houston, TX 77092
Sponsor: Region 4 Education Service Center
Presenter: Carol McManus, M.Ed.
Contact Person: Carol McManus
Email: cmcmanus@esc4.net
Telephone: 713-774-6360
CEU Contact Hours: 12

Bringing the Essential Components of Reading to Early Childhood
Date: March 28, 2008
Time: 9:00 a.m. – 12:00 p.m.
Location: Scottish Rite Learning Center of Austin
12871 N US HWY US 183; Suite 105
Austin, TX 78750
Sponsor: Scottish Rite Learning Center of Austin
Presenter: Ms. Marsel, M.A., CALT
Contact Person: Linda Gladden
Email: lsgladden@aol.com
Telephone: 512-472-1231
CEU Contact Hours: 2.5

 fluency and Comprehension
Date: March 29, 2008
Time: 8:00 a.m. – 12:00 p.m.
Location: Shelton School
15720 Hillcrest Road
Dallas, Texas 75248
Sponsor: Shelton School
Presenter: Linda Kneese, M.Ed., Outreach Coordinator of Shelton School
Contact Person: Cindy Angel
Telephone: 972-774-1772, ext. 223
Email: cangel@shelton.org
CEU Contact Hours: 4

Dyslexia Law
Date: April 26, 2008
Time: 8:00 a.m. – 2:30 p.m.
Location: Shelton School
15720 Hillcrest Road
Dallas, Texas 75248
Sponsor: Shelton School
Presenter: Linda Kneese, M.Ed., Outreach Coordinator of Shelton School
Contact Person: Cindy Angel
Telephone: 972-774-1772, ext. 223
Email: cangel@shelton.org
CEU Contact Hours: 6

Organization and Study Skills
Date: May 3, 2008
Time: 8:00 a.m. – 4:30 p.m.
Location: Shelton School
15720 Hillcrest Road
Dallas, Texas 75248
Sponsor: Shelton School
Presenter: Linda Kneese, M.Ed., Outreach Coordinator of Shelton School
Contact Person: Cindy Angel
Telephone: 972-774-1772, ext. 223
Email: cangel@shelton.org
CEU Contact Hours: 8

Overcoming Dyslexia: Translating Research into Practice
Date: May 9, 2008
Time: 9:00 a.m. – 12:00 p.m.
Location: Dell Jewish Community Center
7300 Hart Lane
Austin, TX 78731
Sponsor: Scottish Rite Learning Center of Austin
Presenter: Sally Shaywitz, M.D.
Contact Person: Linda Gladden
Email: lsgladden@aol.com
Telephone: 512-472-1231
CEU Contact Hours: 2.5

Dyslexia and English Language Learners: Identification & Assessment Issues (Day1)
Date: March 27, 2008
Time: 9:00 a.m. – 4:00 p.m.
Location: Region 13 Education Service Center
Austin, TX 78723
Sponsor: Region 13 Education Service Center
Presenter: Dr. Cris Alvarado
Contact Person: Susan Patteson
Telephone: 512-919-5401
Email: Susan.Patteson@esc13.txed.net
CEU Contact Hours: 5.5

Dyslexia and English Language Learners: Identification and Assessment Issues (Day2)
Date: March 28, 2008
Time: 9:00 a.m. – 4:00 p.m.
Location: Region 13 Education Service Center
Austin, TX 78723
Sponsor: Region 13 Education Service Center
Presenter: Dr. Cris Alvarado
Contact Person: Susan Patteson
Telephone: 512-919-5401
Email: Susan.Patteson@esc13.txed.net
CEU Contact Hours: 5.5

ALTA's 22nd Annual Conference
Date: April 12, 2008
Time: 8:00 a.m. – 4:00 p.m.
Location: Hilton - Lincoln Centre
5410 LBJ Freeway
Dallas, TX 75240
Sponsor: ALTA
Presenter: Dr. Robert Brooks
Dr. Virginia Berninger
Dr. Margaret G. McKeown
Contact Person: Judy Shimp

Telephone: 972-233-9107
Email: judy@madcrouch.com
CEU Contact Hours: 5

LET RS – Language Essentials for Teachers of Reading and Spelling –
Module 7 - Teaching Phonics, Word Study, and the Alphabetic Principle
Module 8 – Assessment for Prevention and Early Intervention
Module 9 – Teaching Beginning Spelling and Writing
Date: June 25, 26, & 27, 2008
Time: 9:00 a.m. – 4:00 p.m.
Location: Rawson-Saunders School
2600 Exposition Blvd.
Austin, TX 78703
Sponsor: Rawson-Saunders School
Presenter: Pat Sekel, Ph.D., CALT, QI
Contact Person: Jennifer Schmidt
Telephone: 713-664-7676
Email: jschmidt@neuhaus.org
CEU Contact Hours: 18

Developing Accuracy and Fluency – online class
Date: On-going
Time: A three hour online class. Participants have 2 weeks to complete the 3 hours.
Location: www.neuhaus.org
Sponsor: Neuhaus Education Center
Presenter: Mary Lou Slania, CALT
Contact Person: Jennifer Schmidt
Telephone: 713-664-7676
Email: jschmidt@neuhaus.org
CEU Contact Hours: 3

Structure of the English Language for Reading – online class
Date: On-going
Time: A three hour online class. Participants have 2 weeks to complete the 3 hours.
Location: www.neuhaus.org
Sponsor: Neuhaus Education Center
Presenter: Dr. Cris Alvarado
Contact Person: Jennifer Schmidt
Telephone: 713-664-7676
Email: jschmidt@neuhaus.org
CEU Contact Hours: 3

Multisensory Grammar (Advanced) – online class
Date: On-going
Time: A three hour online class. Participants have 2 weeks to complete the 3 hours.
Location: www.neuhaus.org
Sponsor: Neuhaus Education Center
Presenter: Dr. Cris Alvarado
Contact Person: Jennifer Schmidt
Telephone: 713-664-7676
Email: jschmidt@neuhaus.org
CEU Contact Hours: 3
Membership Renewal begins March 1st. In order to avoid a late fee all renewals are due by April 30th.

- Dues for 2008-2009 are as follows:
  CALTs/AALTs……..$75/$90 after April 30th
  QIls/IAALTs……..$100/$120 after April 30th

- Renewals must be received before May 15th for listing to be guaranteed in the 2008-2009 directory.

Want referrals? Be sure to check the referral box on your membership renewal form!

Reading Comprehension – online class
Date: On-going
Time: A three hour online class. Participants have 2 weeks to complete the 3 hours.
Location: www.neuhaus.org
Sponsor: Neuhaus Education Center
Contact Person: Jennifer Schmidt
Telephone: 713-664-7676
Email: jschmidt@neuhaus.org
CEU Contact Hours: 3

Scientific Spelling – online class
Date: On-going
Time: A three hour online class. Participants have 2 weeks to complete the 3 hours.
Location: www.neuhaus.org
Sponsor: Neuhaus Education Center
Contact Person: Jennifer Schmidt
Telephone: 713-664-7676
Email: jschmidt@neuhaus.org
CEU Contact Hours: 3

Dyslexia and Related Disorders – online class
Date: Any Date
Time: Any Time
Location: Internet - www.shelton.org
Sponsor: Shelton School
Presenter: Joyce Pickering, Hum.D., Executive Director of Shelton School and Evaluation Center
Contact Person: Cindy Angel
Telephone: 972-774-1772, ext. 223
Email: cangel@shelton.org
CEU Contact Hours: 4

The Shelton Model For Teaching Social Skills – online class
Date: Any Date
Time: Any Time
Location: Internet - www.shelton.org
Sponsor: Shelton School
Presenter: Joyce Pickering, Hum.D., Executive Director of Shelton School and Evaluation Center
Contact Person: Cindy Angel
Telephone: 972-774-1772, ext. 223
Email: cangel@shelton.org
CEU Contact Hours: 4

ALTA Events for contact hours of CEU credit are posted on our online Calendar of Events. CEU Information, a CEU Book List and a CEU Video List can be found in the ALTA 2007-2008 Directory, pages 166 -173, as well as online. Organizations wishing to sponsor events are encouraged to submit them online by completing an Event Submission Form.

For additional information regarding CEUs please contact Lisa Tyler, ALTA CEU Chairman at: ltyler@tx.rr.com
2008/2009 Proposed Slate of Officers and Directors

Each year the Nominating Committee proposes a slate for Board of Directors and Officers (see Bylaws, Article VI & VII) to the general membership at the annual meeting for election. This slate must be presented to the membership 30 days prior to the general membership meeting. As provided by our bylaws, (Article IX, Section 3, (b) (2) ), additional nominations for officers and directors may be submitted in writing and signed by three active members in good standing at least 15 days prior to the annual meeting. Any submissions should be mailed to the national office and postmarked by March 29, 2008.

At the April 12th business meeting, active ALTA members in good standing will be asked to elect the following slate of officers and directors to serve a two-year term. At the February 13, 2008 board meeting the current BOD unanimously affirmed the following slate:

OFFICERS
President: Michelle Bufkin, MPA, CALT, QI
Executive Vice-President: Helen Macik, M. Ed., CALT, QI
Vice President, Public Relations: Joyce Pickering, MA, SLP/CCC, CALT, QI, Hum. D.
Vice President, Programs: Paula Farish, M. Ed., CALT
Vice President, Long Range Planning: Judith Birsh, Ed. D., CALT, QI
Secretary: Sherry Malphurs, BA, CALT
Treasurer: Katy Farmer, MS, CALT
Historian: Nancy Coffman, MS, CALT, QI
*PROVISO - The position of Vice President Public Relations is contingent on the anticipated vacancy created by Helen Macik being elected to the position of Executive Vice President and is for a one-year term.

BOARD OF DIRECTORS
Suzanne Carreker, M.S., CALT, QI (serving a second term)
Kay Byrd, B.A., CALT, QI (serving a second term)
Lynne Fitzhugh, Ph.D., CALT (serving a second term)
Margie Gillis, Ed.D., SLP/CCC, CALT
Judy Echols, J.D., CALT
Kathleen Carlsen, M.Ed., CALT, QI

The officers and directors completing their terms and moving off the board are:
Jeanine Phillips, Secretary
Mary Lou Slania, Treasurer
Melanie Royal, Historian
Sandra Dillon, BOD
Elsa Cardenas-Hagan, BOD
Linda Stringer, BOD

The 2008 Nominating Committee members are:
Suzanne Carreker, chair
Kay Byrd
Kathleen Carlsen
Helen Macik
Jeanine Phillips
**Hillier School**

*Est. 1968*

“Equipment children with learning differences, academically and spiritually.”

- 1-6 teacher/student ratio
- Multi-sensory teaching techniques

**FOR MORE INFORMATION:**
214-525-6600  www.hillierschool.org
davielee.giles@hppc.org

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**Calendar**


**JUNE**  Southwest Multisensory Training Center, Allen, TX 972/359-6646. Take Flight Introductory Course, June 9-20, 8:30 am to 4 pm; Take Flight Advanced Course, June 9-20, 8:30 AM to 4 PM.

**MARCH-JULY**  Texas Scottish Rite Learning Center, Austin, TX, 512/472-1231. Workshop: Bringing the Essential Components of Reading to Early Childhood with Alice Marsel, MA, CALT, QI, March 28, 2008; Workshop: Dealing with Dysgraphia with Dr. Dilip Karnik, April 22, 2008; Workshop: Overcoming Dyslexia with Dr. Sally and Dr. Bennett Shaywitz, May 9, 2008; Workshop: Vocabulary Development with Alice Marsel, MA, CALT, and QI, May 16, 2008; Summer Fundamentals, June 8-20 and June 23-July 3, 2008; Take Flight Intro Training, July 7-25, 2008; Take Flight Advanced Training, July, 2008.

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**Scottish Rite Learning Center of Austin, Inc.**

Providing Quality Programs for...

- **Students** - an intensive Orton-Gillingham based curriculum to students diagnosed with dyslexia, ages seven through twelve, at no charge to the family through the generosity of the Scottish Rite Masons.
- **Therapists** - the required courses and workshops for educators to become Certified Academic Language Therapists at an IMSLEC/ALTA accredited center.
- **Parents** - psycho-educational evaluations administered by licensed psychologists and Speech/Language/Literacy evaluations for 4-6 year olds performed by a speech/language pathologist.
- **The Community** - Workshops and referral/resource services for parents and professionals.

Check out our WEBSITE for details about all of our programs

www.ScottishRiteLearningCenter.org

For additional information contact:
Linda Gladden, Executive Director
Email: lgladden@scottishritelearningcenter.org
Phone: (512) 472-1231 • FAX: (512) 326-1877
Milestones

WELCOME, NEW CALT MEMBERS: Dianna Anderson, Holly Cable, Marie Koethe, Diane Milner, Renee Newsom, Victoria Pando, Diana Roche, Vicki Ross, Helen Sherrill, Anne Slane, Kay Warneke, Charlotte Wheeler and Jeanette Wyatt.

WELCOME, NEW AALT MEMBER: Konowahinekapu Mamiya, India Middleton, Rhiannon Norris-Robinson, Marie Ostermann and Shannon Wall.

The SOSET team (pictured are Karen Avrit, Linda Kneese and Missy Schraeder, with honoree Carol Stoner and Beverly Dooley) visited Southwest Multisensory Training Center for a reaccreditation visit. Intro Completion certificates were passed out while the team was visiting.

Karen Sykes received the Southwest Multisensory Training Center’s “Lynda Laird Memorial Award” in November, given by instructors to the trainee who makes an extra effort, is respectful to staff and peers, and makes a difference in the area that he or she is practicing. Pictured are Karen Sykes, Beverly Dooley, Peggy Brooks, Sarah Lewis, and Maureen Barrett.

DIRECTORY CORRECTION

The following members requested that the referral symbol, a telephone, appear beside their names in the 2007-2008 ALTA directory. Unfortunately, the referral symbol was not included in the Qualified Instructor portion of the directory. We will correct that oversight in the next volume of the directory. Please make a note that these Qualified Instructors are accepting referrals:

Edith Hogan • Ruth Ann Jewell • Linda Sullivan

FAIRHILL SCHOOL AND DIAGNOSTIC ASSESSMENT CENTER
Fairhill School 16150 Preston Rd.
Dallas, Texas 75248
972-233-1026

Grades one through twelve, fully accredited co-educational day school for students with learning differences.

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• Warm, Supportive Atmosphere
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Email: fairhill@fairhill.org
Summer at Fairhill
Grades 1 - 8 June 9 - 27
Grades 9 - 12 June 4 - July 1

*Fairhill School is an independent non-sectarian, co-educational institution open to qualified candidates of any race, color or national origin.