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8 March 2021

Dear Senator Brian Campion,

Thank you for your concern about Vermont children's literacy progress. I am hoping that the Senate will take up S.75 and pass it out of Committee this week. Is there anything I can provide to help move S.75?

### **I. Concern about "evidence-based"**

1. In reviewing the current poor literacy outcomes for Vermont kids, the Senate Education Committee recognizes the need for significant change in literacy instruction. As a tutor, I see this need, too. I work with too many children identified with reading problems far too late. Therefore, I am glad to see S.75 introduced for consideration this year.

However, I have a concern with the wording "evidence-based." In continuing to look at effective literacy laws and professional articles, I now recognize that the phrase "evidence-based" is not adequate to change current instruction methods.

2. In UVM professor Juliet Halladay's January 29<sup>th</sup> testimony she explained the problem with calling research (or a reading program) evidence-based. Some people think evidence-based means randomized control trials, while other people think anecdotal observations count as evidence. They are not the same.

3. There is a reason that medicine no longer relies on medical doctors' anecdotal observations. The strongest evidence comes from randomized control trials. The National Reading Panel (NRP) reviewed randomized control trials to make their recommendations.

4. The attached [Reading of Science white paper](#) notes, "Since the report of the NRP [National Reading Panel], none of its findings have been refuted and the evidence has been corroborated and expanded upon" [PDF p. 6, Booklet p. 9]. Will Vermont legislators change to language following this evidence?

The white paper also states that effective instruction must be "explicit and systematic," going on to define both explicit and systematic [PDF p. 7, Booklet p. 10]. [Structured literacy](#) is based on explicit and systematic instruction. **Removing the term "structured literacy" from the Senate Education Committee bill has effectively removed any requirement to implement reading instruction based on the recommendations of the National Reading Panel.** Current teaching practices can continue, and will fail to teach children to read.

The reading improvement shown at Williamstown Elementary School shows Vermont a path toward universal reading success. Williamstown teachers have been changing to explicit and systematic structured literacy instruction. Others have testified about this.

To improve literacy outcomes, consider using the term “**explicit and systematic structured literacy.**”

## **II. Problem with Advisory Council on Literacy**

1. Of the 18 members, only three adult members represent parents and students with disabilities.
2. There is no one from the developmental psychology, cognitive neuropsychology or developmental linguistics research fields to representing current reading research. **Consider including certified literacy experts.** (I can provide you with a list of certifying organizations.)
3. Who on the Council are the literacy experts? Of the thirteen members from the professional organizations, most are from administrators’ organizations. They may be former teachers, but they lack training in the science of reading. If these professional organizations know the solution to our current poor literacy outcomes, why have they not already implemented their solution?

These professional organization already have a voice at the Agency of Education and in the legislation. Parents want more voice in their children’s education. **Consider reducing the size of the Advisory Council so parents’ voices can be heard.**

## **III. Three Requirements for Improving Reading Outcomes**

Improving our reading outcomes requires three components:

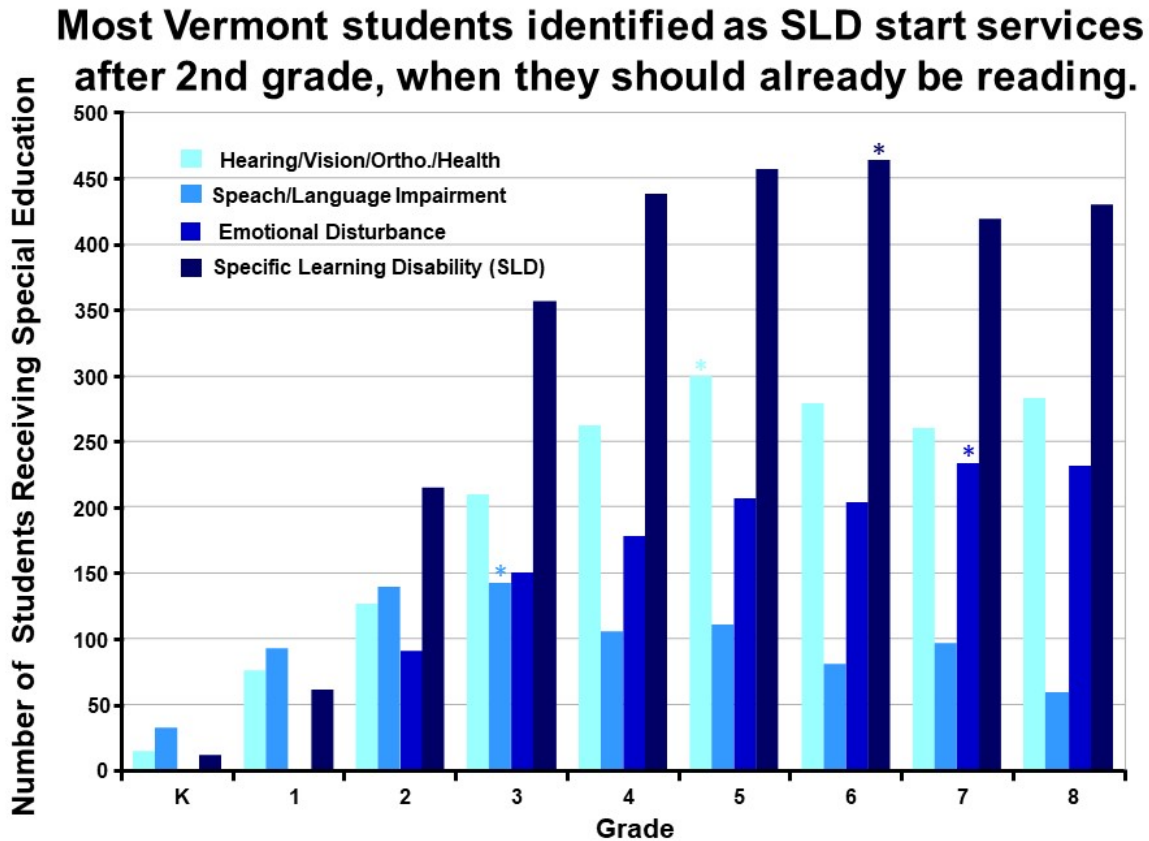
1. Early universal screening/assessments incorporated into a multi-tiered system of support (MTSS),
2. Curriculum based on explicit and systematic structured literacy and
3. Teacher training and professional development in the science of reading so teachers can effectively implement screenings and structured literacy curriculum.

The National Council on Teacher Quality’s “*[The Four Pillars to Reading Success](#)*” has specific recommendations for universal screeners and teacher preparation programs. The International Dyslexia Association (IDA) has a “*[Knowledge and Practice Standards for Teachers of Reading](#)*” to guide teacher professional development. **Consider including references to these documents into the Education Committee’s bill.**

## **IV. Importance of Early Universal Screening**

1. The Reading of Science white paper notes, “Early instruction matters; a prevention-oriented approach is more effective than intervention” [PDF p. 7, Booklet p. 10].

2. The largest disability group is students with a specific learning disability (SLD). 80-85% of students with a SLD have an impairment in reading (dyslexia). However, the majority of them are not getting support from special education until third, fourth and fifth grades. Please see the graph below.



*Data source: Vermont Agency of Education, 2019*

Currently, both Child Find and a multi-tiered system of support (MTSS) are failing to identify even the most deficit students with SLD early – when explicit systematic structured literacy instruction is most effective!

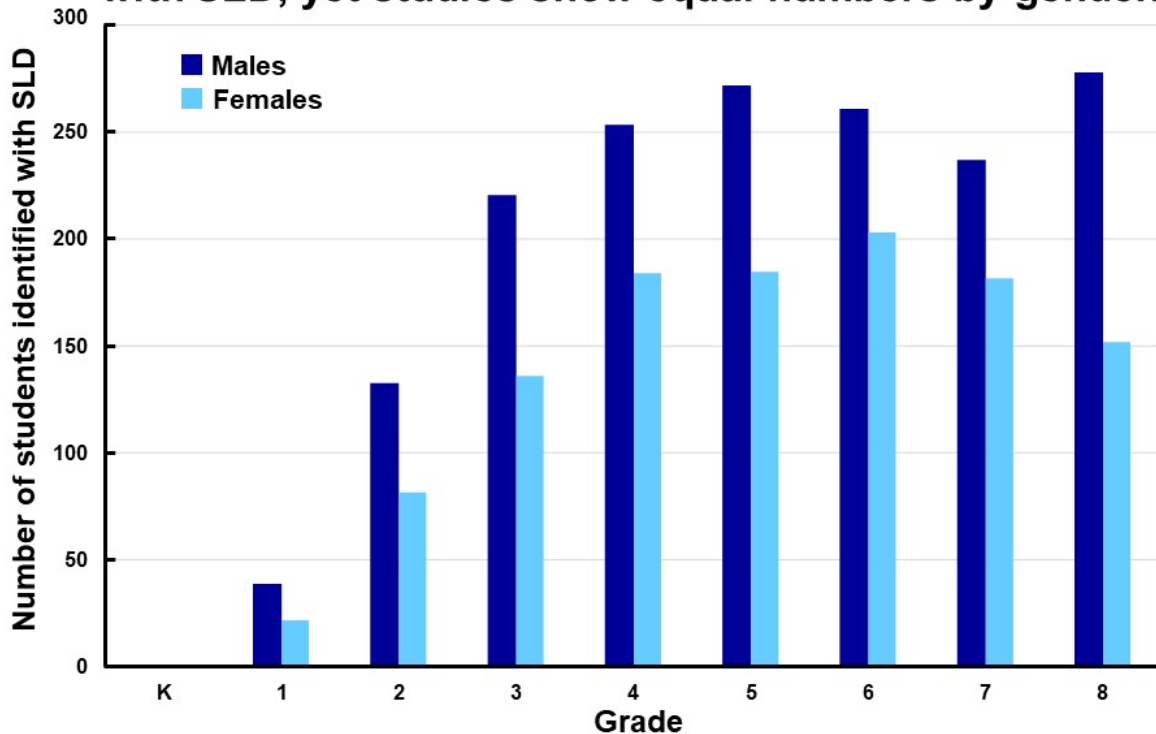
Note that the number of students with a Speech and Language disability peaks in second and third grades (marked with an asterisk). Yet the number of students with SLD does not peak until fifth and sixth grades (marked with an asterisk)! Why are so many students with SLD not receiving support until later grades?

What if students with SLD were identified and provided services in kindergarten through second grade, before they fell behind their peers?

**This data illustrates the importance of implementing universal screening for dyslexia in kindergarten, first and second grades as required by S.75.** By catching those with possible reading problems early, this screening bill will improve Vermont’s literacy outcomes and save money.

3. However universal screening is not only a question of early identification, it's also a question of equity. The bar graph below shows that more male than female children with SLD are getting special education services. Yet, studies find no significant difference in the prevalence of dyslexia between male and female children (Ref: See Figure 1, p. 148 in *Dyslexia (specific reading disability)*. Shaywitz SE, Shaywitz BA. *Pediatr Rev* 24(5):147-153, 2003).

### Vermont identifies more male than female students with SLD, yet studies show equal numbers by gender.



Data source: Vermont Agency of Education, 2019

Objective universal screening tests will help reduce the bias in the identification of children with SLD.

4. How can we help our children if the current educational system is not even identifying their reading problem? How can we treat a patient with cancer without first identifying and labeling the problem? If a child is told by their classroom teacher that they are “lazy”, is told to “try harder” by their support teacher and is called “stupid” or “dumb” by their peers, wouldn’t they prefer the label of “dyslexia,” joining the ranks of Richard Branson, Whoopi Goldberg and Charles Schwab? Wouldn’t they like to name the problem and know they can be helped with explicit and systematic structured literacy?

The first step in helping our children is passing S.75. Will you vote S.75 out of the Education Committee?

I am available to discuss my concerns and any concerns you or the Senate Education Committee may have about literacy. My telephone number is (802) 223-5738 and my email address is [tutoringgm@gmail.com](mailto:tutoringgm@gmail.com).

Thank you.

Sincerely,

Cynthia (Cindy) Gardner-Morse, M.Ed.  
Concerned Citizen and Literacy Tutor