CALIFORNIA STATE UNIVERSITY, NORTHRIDGE

A WORKSHOP FOR PARENTS OF CHILDREN WITH LEARNING DISABILITIES

A Graduate Project submitted in partial fulfillment of the requirements

For the degree of

Master of Arts in Education, Educational Psychology

by

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ABSTRACT

A WORKSHOP FOR PARENTS OF CHILDREN WITH LEARNING DISABILITIES

by

Amy E. Klein

Master of Arts in Education, Educational Psychology

Nearly 3 million school–age children, receiving special education services in public schools across America are identified as having a specific learning disability. Struggling to cope with the demands of school and everyday life, far too many of these children lose motivation and confidence in their ability to succeed. All children need support and intervention, but it is especially critical for those with learning disabilities. Many well-meaning parents are unprepared to help.

This project proposes a workshop for parents of children with learning disabilities that will provide a forum in which parents can acquire relevant information about learning disabilities, interventions and accommodations, communication and collaboration skills, and the IEP process. Instructional materials will be provided to facilitate parent involvement and student success.
CHAPTER ONE

Introduction

Parental Needs and Involvement in
Helping Children with Learning Disabilities Achieve Success

*Train a child according to his way; even when he is old, he will not depart from it.*

-Proverbs

Parenting is a tremendous privilege and an awesome responsibility. Given that children do not come into the world with a “How-to” guide, educating our young charges is a profession that requires research and training (Brooks, 2001; Wolbe, 1999). For parents of children with learning disabilities, ensuring their educational needs are met entails even greater involvement and commitment.

Learning Disabilities: A Definition

Commonly identified in early elementary grades a learning disability is a neurologically-based disorder of one or more of the cognitive abilities necessary for learning, typically involving memory and attention, and the acquisition of skills in reading, writing, and math, (IDEA, 2004). Empirical studies of children with learning disabilities reveal unanticipated, underachievement among learners with average or above average IQ, and a significant inconsistency between ability and academic performance (Stage & Milne, 1996; Büttner and Hasselhorn, 2011). Federal educational standards,
under the Individuals with Disabilities Education Act of 2004 (IDEA, 2004), define criteria for determining if a child has a specific learning disability:

• The child does not achieve adequately for the child's age or fails to meet State-approved grade-level standards in one or more of the following areas, when provided with learning experiences and instruction appropriate for the child's age or State-approved grade-level standards:

  Oral expression
  Listening comprehension
  Written expression
  Basic reading skills
  Reading fluency skills
  Reading comprehension
  Mathematics calculation
  Mathematics problem solving

• The child does not make sufficient progress to meet age or State-approved grade-level standards in one or more of the areas identified in 34 CFR 300.309(a)(1) when using a process based on the child's response to scientific, research-based intervention; or the child exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, State-approved grade-level standards, or intellectual development, that is determined by the group to be relevant to the identification of a specific learning
disability, using appropriate assessments, consistent with 34 CFR 300.304 and 300.305; and the group determines that its findings under 34 CFR 300.309(a)(1) and (2) are not primarily the result of:

A visual, hearing, or motor disability;
Mental retardation;
Emotional disturbance;
Cultural factors;
Environmental or economic disadvantage; or
Limited English proficiency

• To ensure that underachievement in a child suspected of having a specific learning disability is not due to lack of appropriate instruction in reading or math, the [evaluating] group must consider, as part of the evaluation described in 34 CFR 300.304 through 300.306:

Data that demonstrate that prior to, or as a part of, the referral process, the child was provided appropriate instruction in regular education settings, delivered by qualified personnel; and
Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction, which was provided to the child's parents.
The diverse symptoms of learning disabilities pose lifelong challenges, affecting development, academic attainment, family and social relationships, and the confidence in one’s ability to succeed (Raskind, Goldberg, Higgins, & Herman, 2002). Although some of these factors are evident in typical development, a cluster of symptoms characteristically presents in a child with learning disabilities, and challenges remain throughout the lifespan, (Smith & Adams, 2006). Without intervention, children with learning disabilities often fail to meet age level expectations and educational demands. Poor self-image, diminished motivation, and school failure put students with learning disabilities at a particularly high risk for dropping out of school (Chapman, 1988).

In a longitudinal study funded by the Department of Education, statistics show high school completion among youth with learning disabilities at only 75%, signaling the need for effective intervention (NCES, 2009; Marder, 1992). Although school dropout rates have decreased over the past 20 years, it still remains an important national issue. Failing to graduate from high school has been associated with many negative effects. Examples include lower income, higher unemployment, and poor health (Williams, L. and Riccomini, P. J., 2006; NECS, 2009). In addition, adults who have dropped out of high school make up greater percentages in prisons and of death row inmates (NCES, 2001). Amid factors which contribute to high school dropout rates, academic failure stands out as a primary cause (Kemp, 2006).

Government Legislation

An estimated 4-7% of school-age children in the United States are identified as having learning disabilities, and of public school students who receive special education,
more than fifty percent have problems in educational attainment (NECS, 2009; Torgesen, 2004). Since the 1960’s the Department of Education has established legal requirements and provided funding to identify, evaluate, and support the educational needs of disadvantaged children (U.S. Dept of Education, 2007). In a national effort to promote school success for all, federal law mandates provision for special education and relevant services to children with disabilities, including learning disabilities under The Individuals with Disabilities Education Act of 2004 (IDEA, 2004). Additionally, Title I Part A, of the Elementary and Secondary Education Act, remains one of the pillars of educational legislation for students with disabilities, and support for families of children served under the legislation (ESEA, 2002).

The IEP and Parent Involvement

A fundamental component of special education services involves designing an Individualized Education Plan (IEP), the mandate of interventions and accommodations in special education. The express intent of the IEP is to give students with disabilities the opportunity to achieve a high-quality education, meet regulated academic standards, and show proficiency on state academic testing (IDEA, 2004).

Development of an IEP is based on a student’s diagnosed disabilities, as well as individual strengths and weaknesses. This personal profile forms the framework for providing needed accommodations and implementing intervention strategies. Participants in designing an IEP include school staff and professional personnel. Under the IDEA, an IEP must provide parents information about their child’s present academic performance, annual goals and measurable objectives, special education and related services, (such as
behavior management, language needs, assistive technology, classroom accommodations) interaction with nondisabled children, participation in achievement testing, details about when, where, and how often services will be provided, and if applicable, transition service needs (IDEA, 2004; Department. of Education, 2010; CHADD, 2012).

Parents may feel intimidated, uncomfortable, and unprepared in IEP meetings where technical terms are used in discussion primarily about a child’s weaknesses and educational needs, but it is precisely at these meetings that parental perspective is most needed (Howie-Davies & McKenzie, 2007; Hornby & Lafaele, 2011). Parents can offer insights of a child’s strengths and interests, family dynamics and culture (Diliberto & Brewer, 2012). These qualities are not always observed in the school setting, and play a key factor in mapping out strategies for school success (Hess, 2006). Among the specifications for special education services, guidelines are articulated and funds allocated based on the undisputed correlation between family participation and educational success. These laws emphasize the critical role of families in partnering with schools to improve educational practices, promote mutual accountability, and assist children with disabilities in reaching age-level, academic goals (Henderson and Berla, 1994).

Parent Reaction and Need for support

Raising children is wonderful and rewarding, and at the same time difficult and demanding, but the challenges of parenting a child with a learning disability may increase many fold (Harry, 2011). When parents discover their child has a learning disability, the initial reaction is typically confusion, sadness and guilt (Howie-Davies & McKenzie,
Coping with their own mixed feelings, parents are often uncertain as to how to help their disadvantaged child. It is precisely at this time that support, information and training are most critically needed. Establishing a relationship and open communication with the team of educators, administrators and therapists involved in a child’s education, learning technical terminology, and scheduling a child’s therapy or tutoring sessions around school and extra-curricular activities, which requires organized planning and effective management skills, are key components in successful outcomes (Kemp, Smith, & Segal, 2012).

Parent Role

It is naturally a parent’s responsibility to oversee a child’s education and assist in academic achievement. In the complex structure of government policy, child advocacy is a parent’s essential legal right, and the key to student success (Hess, 2006; Henderson 1994), however, navigating the road of special education, typically paved with difficult obstacles, presents challenges for parents who often feel overwhelmed and unprepared (Howie-Davies & McKenzie, 2007). Legislation clearly addresses the need for parent awareness, training and support (ESEA, 2002).

Need for Parent Training

A parent is usually in the best position to advocate for a child. Knowing their child’s strengths, interests and challenges enable parents to collaborate with a team of educators and professionals in developing and carrying out interventions, and accommodations necessary for academic success and advancement (LDA, 2000).
Without learning fundamental strategies in how to address a child’s individual needs, and understanding educational rights, as well as effective communication skills, many parents feel intimidated and discouraged, rather than informed and empowered when requesting services or interacting with the IEP team (Green, et al., 2007; Cutter, Jaffe-Gill & de Benedictis, 2008).

Informed Parenting

Resources for parents seeking to help children with learning disabilities succeed academically are available and accessible in articles and books on the subject, and by perusing the internet for websites offering much relevant information. However, this requires navigating acuity, research skills and a large time commitment, as there is no single website with comprehensive recommendations. Additionally, there does not exist a tool to assist parents in managing a child’s educational experience. A variety of organizing planners focus on managing time, family chores, budgets, and menus, which are helpful, but fail to address the specific educational needs of children with learning disabilities (ex. The Mom Planner, Whomi, Mom Agenda, The Organized Parent).

Conclusion

Raising and educating a child with learning disabilities is a process that is multifaceted and complex (Harry, 2011). By understanding a child’s unique learning profile, parents can leverage strengths and interests to help compensate for delays or deficiencies. Child advocacy services abound, yet, even a parent who avails himself of these outside options, still needs to remain the primary voice for the child (LDA, 2009). It
is the parent who typically knows the child best, and it is ultimately the parent who is responsible to guarantee the child’s educational needs are met. In addition, developing a strong home-school connection requires parents to be effective in communicating and collaborating with educational team of teachers, administrators, doctors and therapists (Henderson & Berla, 1994). Further, understanding the IEP process, educational terms, and maintaining organized documentation of the educational development of a child with learning disabilities is critical to ensure a successful school experience (Henderson, 1994, Mattingly 2002).

Project Proposal

This culminating graduate project puts forth a four-part workshop for parents of children with learning disabilities, aimed at increasing awareness about learning differences, interventions and accommodations, success factors, communication skills, and the IEP process. Sessions will occur once a week, for 2 1/2 hours. Instructional materials will be provided to facilitate parent involvement and student achievement. A child specific binder will be developed by participants over the course of the workshop, culminating in an individualized final product at the end of the last session as a resource to assist parents in helping their child with learning disabilities attain academic goals and life success.

Terminology (See APPENDIX I Glossary)
CHAPTER TWO

Review of Relevant Literature

Overview

Parenting children with learning disabilities is a monumental responsibility that requires committed involvement, a collaborative effort, and supportive services (Howie-Davies & McKenzie, 2007). Parents must appreciate their vital role in helping their disadvantaged child acquire the knowledge and skills necessary for a successful future, a multi-faceted task which is facilitated by a strong partnership between home and school. This literature review will examine research on learning disabilities, educational attainment practices, and parent involvement.

Learning Disabilities

Extensive research in the field of learning disabilities points to the significant discrepancy between ability and performance and varied range of cognitive deficits (ex. Frostig, 1968; Torgesen, 1986; Shaywitz, 1992; Morris, et al., 1998; Brier, et al., 2003; Swanson, 2010). The incidence of learning disabilities is present across cultures, gender roles, social economic status, and religious belief systems (Björnsdóttir & Traustodóttir, 2010). As all children grow, they must constantly integrate new information and learn increasingly complex concepts and skills, supported by a range of developing cognitive processes (Piaget, 1954). Learning disabilities appear as weak functioning of cognitive constructs in the way an individual receives, understands, and processes information perceived through the senses, and expresses that input through verbal, non-verbal and
written communication (IDEA, 2004; Schools Attuned, 2004). Difficulty in identifying, 
interpreting, understanding, and ordering letters, words, numbers, and objects rely on 
efficient memory facility, and commonly affect academic areas of language and reading, 
writing, and mathematics, and attention controls (Medwetsky, 2006; Kavale, et al., 
2009).

Memory

Memory, the brain’s ability to perceive, hold, and manipulate presented 
information, increases in capacity and utility throughout the lifespan, but the demand for 
operative memory function is especially critical during the school years (Sigelman, 
2012). Effective learning depends on three pillars of memory, short term memory (STM) 
the temporary holding tank for new information, (about two seconds in length), long-term 
memory (LTM) the mind’s elaborate and intricate data storage system where knowledge 
is retained and available over long periods of time, and working memory (WM) the 
connector between short-term and long term memory. Working memory serves as a 
surface where pieces of information can be temporally placed in order for the mind to fit 
elements together as a whole concept (Sigelman, 2012). The inability to store and access 
information may also indicate trouble with long term memory, in which linking 
different pieces of data, such as categorizing information, making associations, 
recognizing patterns, following rules of language, and steps in mathematical calculations. 
In research of math-related challenges, poor semantic, procedural or visual-spatial 
memory have been correlated with a compromised ability to store and recall basic math 
facts (Geary, 2000).
In addition to addressing deficiencies in analytical, calculation, and numeracy, disabilities involving math can reflect deficits in language processing. Following step-by-step instructions, sequencing, and organization in solving math problems rely heavily on language acuity, and attention controls (Vellutino, 1996).

Deficient memory functioning has been found to be related to and often co-occurs with reading, language processing disorders, and math disabilities (Miller & Blasik, 2010; Maerlender, 2010). Problems may arise in registering, using, storing, and ascertaining saliency of new information. While a deficit in short-term memory interferes with the auditory faculty to retain and learn new information (Gathercole, et al, 2008; Maerlender, 2010), trouble with balancing prior information and processing or applying new material may indicate a disability in one’s active working memory (Montgomery, et al., 2010). Completing tasks involving multiple steps, sequencing, and relating parts to the whole, have been empirically shown to be significantly compromised by deficits in short term and active working memory (Swanson, et al., 2004).

Research-based interventions to remediate working memory dysfunctions include exposure to multiple forms of mental representation, such as writing, verbalizing, and visualizing (Parente et al., 1999), as well as repetitious drill to promote automatization (Fazio, 1996; Kail, 1990). Visual aids, such as graphic organizers, detailed written instructions, rules, basic facts, and number lines can mitigate demands on students with WM deficiencies (Quail, Williams, & Leitao, 2009). Previewing, grouping similar items, breaking down large tasks into smaller parts, and use of mnemonics offer further support (Gathercole & Alloway, 2008).
Reading and Language

Reading is the most foundational skill acquired during the school age years, and one of the most important predictors of school success, as it supports most other areas of academics (Carroll, 2003; Buttner & Hasselhorn, 2011). The U.S. Department of Education, National Center for Education Statistics (2004, 2009), cites the incidence of learning disabilities among school aged children at about 5%, based on the number of children served under the IDEA legislation, and of that number, an alarming 80% struggle to achieve age-level expectations in reading (Shaywitz, 2004). According to the National Assessment of Educational Progress, about 12% of school age children have trouble mastering the challenges of reading (NCES, 2009).

Learning to read is founded on the ability to master skills of alphabetic language. Phonemic awareness, the understanding that words are made up of the connection between alphabetic symbols and the sounds they make, is the starting point. Through the use of phonemics, symbols are joined to create and recognize words, and pulled apart to decode unfamiliar words (Shanahan et al., 2010).

Essential elements involved in acquiring reading skills include effective development in phonological processes, semantics, syntax, orthography, the understanding of word meanings, phrases and rules of sentence structure (Perfetti, 2003; Apel, 2011). Fluency is promoted through modeling and repeated phonemic practice, which creates analytical representations of words in the brain, allowing the reader to focus on content and understanding (Shaywitz, 2004).

Comprehension in reading is the ability to make sense of written, textual language. It is thought to involve higher order cognition, which includes locating and
understanding main ideas, the ability to make inferences, and evaluate what has been read (Gersten & Fuchs 2001). Strong readers show fluency in reading, rapid and accurate recognition of words, essential to reading comprehension (Nathan & Stanovich, 1991).

Elements indicated in reading disabilities are thought to reflect deficient skills in phonological awareness, recognizing and decoding visual symbols, and translating them into meaningful words, sentences and paragraphs, automaticity, fluency, vocabulary and visual perception, and working memory (Vellutino, et al 2004, 2005; Johnson, 2010; Steele & Watkins, 2010). In their comprehensive work analyzing Dyslexia, Shaywitz and Shaywitz describe factors contributing to reading disabilities, such as deficiencies in phonological awareness and processing, syntax, and memory functions (Shaywitz & Shaywitz, 2004). Research in the neurological processes of reading acquisition has progressed our understanding of reading disorders and reading achievement. Through explicit instruction of the building blocks of reading, alphabetic and phonemic awareness, phonics, vocabulary, and strategies for fluent reading and comprehension, all children can become successful readers (Shaywitz, 2004).

Writing

Language development involves reading as a receptive skill, as well as the expressive skill of writing (Durdella, 2001). Mastering the ability to write allows for the conveyance of knowledge, ideas, values, and purpose. It is also a skill fundamental to school success, as student learning is predominately evaluated through writing (Graham, 2004). Developing writing skills requires the ability to learn rule-based elements of grammar, while developing the mechanics of writing. Children with learning disabilities
tend to show deficits in the ability to plan, organize, evaluate and revise written work, and length and content are commonly insufficient, (Graham and Harris, 2003; Gersten and Baker, 2001). Highly structured, direct instruction is fundamental to teaching elements of writing to struggling students, and on-going review and practice is necessary to maintain skills over time (Lienemann, 2006).

Due to the heterogeneity of students with learning disabilities, empirical research is inconsistent with regard to the effectiveness of accommodations. However, customized academic support correlates to improved achievement, and is mandated by federal legislation (IDEA, 2004; Fletcher, et al., 2006; Orr, Bachtnan, & Hamming, 2009). For students diagnosed with language-based disorders, presentation and response alternatives include shortened assignments, a reduced course load, copies of lecture notes from teachers or classmates, audio recordings of lectures, large print, word processor use, designated quiet work and testing space with minimal distractions, extended or untimed allowance for test taking, scheduled breaks during class work and tests, and oral assessments (Lindstrom, 2007; Wise, 20010; Cahalan, 2010).

Math

Mathematical competency, number sense and numerical fluency, understanding numerical representation, and the ability to mentally manipulate numbers, analyze relationships, and make comparisons are expected outcomes of general elementary education (Gersten & Chard, 1999). For students having difficulty acquiring math skills, trouble remembering basic math facts and computation errors are common. Requiring skills of abstract thinking and higher order cognition, math disability, reflects deficits in
the facility to conceptualize numerical digits, understand number patterns, compute numbers using mathematical operations, logically organize objects, tell time, understand the concept of measurement, use money, and estimate quantities (Geary, et al, 2012; Wadlington, 2008).

Weak math learners require early assessment and focused intervention to strengthen skill areas in basic math facts and concepts, number sense, and an awareness of fundamental math patterns (Johnson, et al., 2010; Locuniak, 2008). Accommodations in math instruction and assessment are made available to students with math disabilities in order to allow them to bypass disabilities and demonstrate conceptual knowledge (Elliott, Braden, & White, 2001). Based on a student’s unique needs, accommodations may include modified environments, one-on-one instruction or working in small groups, varied test administration and response format, which may be reduced level of assignment difficulty or reading level, peer tutoring, oral or dictated assessment, or use of a word processor, and flexible timing requirements, extending due dates, eliminating or extending timed test (Elbaum, 2007).

Attention

The ability to control mental energy, self-regulate behavior, and maintain focused attention are skills intrinsic to successfully learning fundamentals of reading, writing and mathematical concepts (Graham, 1992; Harris, 1982). As children develop, their ability to perceptively and cognitively sustain attention generally improves, allowing them to manage increases in perceptual, behavioral, and academic expectations (Sigelman, 2012). Although actual numbers may be higher, based on individual assessments and parent
reports, according to the National Center for Disease Control, about 3-7% of school age
children are diagnosed with Attention Deficit Hyperactivity Disorder (CDC, 2011).

Inattention, impulsivity and hyperactivity are the hallmarks of attention disorders. Problems with attention are evident in high distractibility and restlessness, trouble following directions, task completion, and inhibiting urges (Sigelman, 2012). Empirically supported strategies for academic intervention of attention deficits include direct, individualized instruction, peer tutoring and technology-assisted instruction. Furthermore, a supportive, long-term, team approach is most effective throughout the school years, requiring ongoing, commitment and communication among parents, teachers, physicians, and educational professionals. Multiple, evidence-based treatment and strategies, combining behavior interventions and psycho-stimulant medication may be indicated to optimize academic outcomes for attention based disabilities (Swanson, et al., 2001; Du Paul and Weyandt, 2006).

Appropriate academic supportive services are provided for through Section 504 of the Rehabilitation Act of 1973, and IDEA, 2004 to ensure the educational needs of students with disabilities are met (IDEA, 2004). Accommodations for students with ADHD include modifications to instructional strategies, learning environments, and assignment and assessment requirements (McKinley and Stormont, 2008).

Predictors of Success

In conjunction with academic intervention, strengths-based research has made significant contributions in the area of educational attainment (Carlson, et al., 2010; Scorgie, 2010). In a 20-year longitudinal study examining successful individual with
learning disabilities, several shared qualities were documented, (Raskind, Goldberg, Higgins & Herman, 1999, 2002, 2009).

*Self-Awareness:* Participants, identified as successful, exhibited a greater degree of self-awareness than “unsuccessful” subjects. They understood their weaknesses in the context of their strengths.

*Proactivity:* The successful people were actively involved in family and community activities, and possessed an internal locus of control, attributing success to their own efforts, as well as taking responsibility for negative consequences of their choices.

*Perseverance:* Successful individuals in the study were ambitious, and persistent in the face of obstacles. They were able to learn from failure and achieve their goals.

*Goal Setting:* Successful qualities included setting achievable goals, and taking practical steps to reach their aim.

*Presence and Use of Effective Support Systems:* Actively seeking guidance and accepting encouragement and support were common attributes among successful persons in the study.

*Emotional Stability:* The ability to develop effective coping strategies, with optimism, characterized the successful group.

The results of the Raskind study points to these identified qualities as significant predictors of success among individuals with learning disabilities. A program with specific activities has been effective in developing these attributes, though a systematic method of behavioral strategies (Raskind, et al., 2009).
Motivation

Student hope and effort are considered by educators to be important factors related to learning and achievement. Stipek, et al. (1992) conducted several studies to understand the relation between these constructs and achievement motivation, particularly within the academically vulnerable population of students with learning disabilities (LD). The effects of mastery goal orientation and LD status among 6th-through 10th-grade students were under consideration in this research. Specifically, the moderating effect of mastery goal orientation was investigated to offer a clearer understanding of the academic resilience of students. The investigation incorporated the achievement emotion of hope with achievement goal theory and extended its scope to the population of students with LD. Participants in a suburban public school district completed questionnaires measuring mastery goal orientation, hope, and effort within their social studies classes at the beginning and end of a school marking period.

Findings revealed significant main effects for LD status and mastery goal orientation on hope. Students with LD reported lower levels of hope than non-LD students and high mastery students reported higher levels of hope than low mastery students. A significant interaction effect between LD status and mastery goal orientation was found for the female group. For this group, low mastery students with LD had significantly lower levels of hope than low mastery students without LD. For males, however, the interaction was in the opposite direction. A significant main effect for mastery goal orientation on effort was reported, whereby high mastery students reported higher levels of intended effort investment than low mastery students. There was a main effect for LD status on effort for the female group. Gender and the interaction effect
between gender and mastery goal orientation had a significant impact on effort. Studies in attribution theory and achievement motivation illustrate that awareness of performance success or failure, and the expected external responses of approval or disapproval are already well established by early childhood (Stipek, Recchia, and McClintic, 1992, Dweck, et al, 1983, 2008).

Although children with learning disabilities may not be diagnosed until grade school, when academic demands highlight deficient skill areas, diminished achievement motivation, helpless orientation, and a tendency to focus on performance rather than mastery may have been previously learned and reinforced by repeated experiences of failure and shame (Linnenbrink, and Pintrich, 2002). For both male and female students, the connection between achievement focused students and enhanced achievement is clearly correlated. Learning experiences that promote attribution and students’ self-perception of competency create a cycle of self-motivation (Whisler 1991; Cleary and Zimmerman, 2004). Implications of orientation studies illustrate that motivated students develop the internal construct of attribution and mastery goals, qualities necessary for continued learning once children leave the classroom (Banks and Woolfson, 2008).

Extensive work by Gottfried and her colleagues have built the foundation for our understanding of academic intrinsic motivation. Studying the impact of home environment on academic achievement, their research has shown that a richly stimulating environment where autonomy and self-determination are encouraged is a positive predictor for motivation (Fleming and Gottfried, 1998). Gottfried has also explored the impact of parental motivational methodology on intrinsic motivation in young children, and found parenting practices either promote or reduce motivation, depending on whether
they focus on intrinsic or extrinsic motivation practices (Gottfried, Fleming, and Gottfried, 1994). The significance of the results was greatly increased by discovering that early academic intrinsic motivation is a strong predictor of motivation and success as children age. Additionally, findings provide substantiated data verifying the positive correlation between intrinsic motivation, and home-based interaction and activities which stress self-determination, curiosity, persistence and academic excellence.

**Autonomy**

Self-determination, the ability to make autonomous life choices, is a key aspect of developmental and educational goals for all students in general and particularly for those with learning disabilities (Wehmeyer, et al, 2012; Konrad, 2007; Deci, et al., 1991). The importance of self-determination is supported by numerous studies (ex. Ryan and Deci, 2000; Deci, et al., 1991; Konrad, et al., 2007; Sharonfield, Sarver, and Shaw, 2003), factors most relevant in helping students acquire self-determination include exposure to self-determined role models, explicit self-determination skill instruction, opportunities for autonomous decision making, good communication skills and, significant relationships, which are affirming, supportive, and stable (Powers, 1997; Field, Martin, Miller, Ward, and Wehmeyer ,1998).

Research by Sarver (2000) correlates the academic performance of students with learning disabilities and their levels of self-determination. In investigating adult students with learning disabilities, Sarver and Shaw (2003) found that survey response, with regard to factors perceived to be most significantly related to academic success among learning disabled students included, autonomous acceptance of responsibility for goal
planning, execution, and achievement; the ability to be creative and flexible in problem solving, especially in addressing abilities and disabilities in learning settings; and persistence as a key aspect influencing success, noting a general belief that students with learning disabilities had to stay with a task longer than others to succeed, (Sharonfield, Sarver, and Shaw, 2003).

In a program for managers aimed at developing autonomous motivation in employees, Stone, Deci, and Ryan point out the importance of “satisfying needs for autonomy, competence and relatedness”, and propose six effective elements:

1. Initiate supportive problem solving through open-ended questions and discussion.
2. Engage in active and reflective listening, and acknowledge employee perspective.
3. Clarify expectations and offer options in learning.
4. Offer honest, non-critical feedback, facilitating learning from mistakes and failures.
5. Reduce extrinsic controls, such as reward and competition.
6. Arrange learning activities that develop strengths, and offer opportunities to share employee knowledge in areas of competence.

Insights, brought out by the Stone article are relevant to children with learning disabilities in demonstrating that positive outcomes result from applying principles of autonomous motivation. The paper cites a 2004 study involving the Kansas City school district, in which district wide changes included improving instruction and student learning, complemented by implementing practical applications to build self-
determination, significantly raised achievement and graduation rates throughout Kansas City schools (Gambone, Klem, Sumers, Akey, and Sipe, 2004). Relevant research clearly implies that by promoting self-determination, learning is enhanced, as students gain autonomous control of their lives and acquire the life skills to become involved adults in society (DV, 1991; Konrad, et al., 2007; Field, Martin, Miller, Ward, and Wehmeyer, 1998).

Research on person-centered planning points out the importance of establishing long and short-term goals, while considering an individual’s particular strengths, affinities, and challenges. Including learner input in designing educational vision and support in meeting objectives has been associated with greater student responsibility and increased academic motivation (Measan, et al., 2010). Students with learning disabilities often face many academic challenges in their school years, and although they are at a greater risk for low self-esteem than non-disabled peers (Serafica & Harway, 1997; Chapman, 1988), research investigating student reaction to diagnosis, when the learning disability is explained in clear, understandable terms that demystify the disability, show an increase in self-esteem (MacMaster, Donovan, and MacIntyre, 2002).

Talking with Children about Their Personal Profile

Parents can help children understand and accept the uniqueness of their minds’ individual make up, by exploring with a child individual strengths and interests, as well as academic hurdles. In this way, children are able to understand what gets in the way of learning and what they can do to overcome or circumvent their challenges (Levin, 2002). With optimism and empowerment as goals, this practice provides significant relief, and a
protective barrier against unrealistic, global self-criticism, so common among individuals with learning disabilities (Schools Attuned, 2004).

Educator and author, Richard Lavoie points out the critical role of parents in “demystifying” learning disabilities, an open, exploratory process, in which children gain understanding and acceptance of learning differences and challenges. By sensitively acknowledging a child’s struggle with daily tasks, offering constant encouragement and support, gauging a child’s level of understanding, and sharing personal roadblocks, parents can lay an effective foundation for a child’s self-determination, self-advocacy, and intrinsic motivation (Lavoie, 2007).

At the Churchill school in St. Louis, Missouri a Demystification Conference is held annually, with honest, upfront discussion about individual abilities and disabilities. Students educated in the optimistic environment that emphasizes what students do best and ways to leverage strengths to overcome weak areas, have discovered that learning differences do not reflect or limit their intelligence, competence, and talent, (Elfrink, 2008). Among relationships most influential in acquiring self-determination and affecting self-esteem, parents are naturally, most significant (Ward, 1991).

Recommendations for discussions about a child’s personal profile from the Schools Attuned (2004) educational management program include the following:

- Eliminate stigma by explaining that everyone has areas of competence and challenge.
- Identify and Discuss student strengths and interests
- Have open, honest and informative discussions about weaknesses.
- Emphasize opportunities and promote optimism.
• Help students gain metacognitive skills through direct instruction in learning strategies
• Encourage the use of a mentor and supportive guidance.
• Avoid public criticism and support self-esteem and by highlighting strengths.

Resilience

Most parents strive to instill in their children a sense of resilience, internal strength to handle life trials and tribulations with competence and success (Brooks and Goldstein, 2001). In their work exploring resilience in children, Brooks and Goldstein focus on attributes inherent a parenting approach which fosters resiliency. They point out the importance of modeling and teaching empathy, responsibility, discipline, effective communication, and maintaining a positive mindset, but mostly loving children and making them feel important and valued. Furthermore, they emphasize that by helping children accept individual differences, discover natural talents, find ways to strengthen and display those talents, and set realistic goals, parents are often the catalyst for increased motivation, self-determination, self-esteem and resilience, key factors in positive life outcomes (Brooks and Goldstein, 2001; Ginott, 1965; Kelleman, 2001).

Parent Reaction and Need for Support

Raising Children is wonderful and rewarding, and at the same time difficult and demanding, but the challenges of parenting a child with a learning disability may increase many fold. When parents discover their child has a learning disability, the initial reaction is typically confusion, guilt, and disappointment in the fact that one’s child is not normal
(Dyson, 1996; Howie-Davies & McKenzie). Coping with their own mixed feelings, parents are often uncertain as to how to help their child. It is precisely at this time that parents most critically need support, information, and training (Howie-Davies). Assessments, diagnoses, and educational management require cooperative effort and strategic planning. (Dyson, 1996). Overwhelmed, parents must learn to champion for their child, as they make their way through the special education system.

In exploring emotional stress and coping strategies among parents of children with learning disabilities, Kenny and McGilloway, (2007), expose two predominant areas of parental anxiety: emotional response to the diagnosis and lack of information and skills necessary to help their child. In accordance with other studies, their research places emphasis on the critical importance of assisting parents by gaining accurate and appropriate information about learning disabilities, developing coping strategies, and collaboration skills in educational planning. Additionally, parent-to-parent opportunities to share similar experiences provide emotional support, (Dyson, 2010; George & Kidd, 2011; Johnson & Duffet, 2002; Judge, 1998).

For parents working hard to raise healthy, well-adjusted, and successful children, this supportive approach is essential. Parents benefit from realistic disclosure of limitations in the context of a strengths-based focus (Howie-Davies & McKenzie). Much can be done to facilitate academic achievement and life success for children with learning disabilities, and research indicates the positive effect of programs that support parents through encouragement, assistance in understanding their child’s profile, parental responsibilities and rights, developing effective communication, and gaining parenting skills. In addition to mitigating anxiety and distress, parents learn to help children
concentrate on their abilities, using them to strengthen disabilities, a cornerstone in efforts to ensure a successful outcome. (Cunningham, 1994; Dyson, 2010; Baker, et al, 2002).

Parents as Natural Advocates for Their Children

Although the link between family involvement and academic achievement is well established, many parents still underestimate their impact, and rely on the school to ensure a child’s educational needs are met (Hess, 2006; Epstein & Salinas, 2004). As with all aspects of raising children with disabilities, active participation is crucial, especially in managing a child’s education. Effective educational advocacy is built on understanding a child’s strengths, challenges, and interests. Parents are in the unique role to facilitate constructive change by emphasizing a child’s individual talents and abilities. This not only helps professionals view the child holistically, but is vital in determining necessary accommodations and interventions (Geltner, 2008). Other strategies necessary for successful advocacy include knowing the legislative regulations, qualifications, and student rights for special education services. Although there are basic federal standards, states vary in their criteria for eligibility and services, (NCLD, 2009; CCLD, 2000)

The IEP

A fundamental component of special education services involves designing an Individualized Education Program, the mandate of interventions and accommodations. The express intent of the IEP is to give students with disabilities the opportunity to achieve high-quality education, meet regulated academic standards, and show proficiency
on state academic testing, (IDEA, 2004). Special education guidelines are indicated in the Individuals with Disabilities Education Act, IDEA, requiring eligibility evaluation, development of an IEP, relevant services provided, and annual review of the educational (IDEA, 2004). As mandated by law an IEP must provide information about the student and the program designed to meet his individual educational needs, including:

- Present levels of educational performance
- Annual Goals or benchmarks
- Special education and related services
- Participation with non-disabled children
- Participation in state and district-wide achievement tests
- Dates and Places [where services will be provided]
- Transition service needs
- Method of assessing progress


The process of creating an IEP brings together, parents, teachers, school administrators, related support personnel, and students in a team approach to improve the academic outcomes for children with disabilities (CEC, 2011). At an IEP planning meeting, participants review a student’s individual needs, against the backdrop of his unique learning profile of strengths, weaknesses (Feinberg, 2011). Using abilities and interests to leverage a student’s learning challenges, a document is produced mapping out educational objectives, including appropriate accommodations, modifications and interventions that support achievement of IEP goals, (CCLD, 2000).
Once the IEP is written, parents receive a copy to review and sign, but at any time may disagree with the services provided and call for the IEP team to reconvene to discuss concerns for their child (IDEA, 2000). Parental participation is an integral component of successfully carrying out services to a student provided for in the IEP, as they can offer insights into a child’s family dynamics and culture, qualities not always observed in the school setting, yet may be a salient factor in mapping out strategies for school success, (Hess, 2006). It is often a parent who is in the primary position to advocate for their child (CCLD, 2000). Knowing a child’s strengths, interests and challenges enable parents to collaborate with a team of educators and professionals in developing and carrying out interventions and accommodations necessary for academic success and advancement (LDA, 2000).

Without learning effective communication skills and fundamental strategies in how to address a child’s individual needs, as well as understanding educational rights, many parents feel intimidated and discouraged, rather than informed and empowered when requesting services or interacting with the IEP team (Green, et al, 2007; Segal, Cutter, Jaffe-Gill, and deBenedictis, 2008; Nespo, Hicks, and Geltner, 2008). Successful collaboration to facilitate a child’s school success depends heavily on parents who come to the table with a positive attitude while they firmly, but respectfully petition for their child’s individualized instruction, keeping in mind an appreciation for each team member’s efforts in their child’s behalf (Howie-Davies, McKenzie).

Findings from the 2010 National Center for Research on Evaluation, Standards, and Student Testing report cite communication and collaboration as critical skills for success in the 21st century. The report brings out the hallmarks of effective
communication: exchange of ideas, interests, and concerns, clarification, ability to listen for understanding, decreases mistakes, misunderstandings, and conflict, and fosters healthy, mutually supportive, and productive relationships. Based on related research (Roschelle & Teasley, 1995) the authors of CRESST defined collaboration as “building and effectively utilizing relationships and informal networks to achieve a common goal...It enables people to build on each other’s ideas and prior knowledge, resulting in innovations...[and] can foster learning and productivity.” (CRESST, 2010). Effective communication and collaboration clearly form the foundation upon which parent involvement and the successful implementation of an IEP stands.

Need for Parent Education

Parent training offers strategies, support, and resources which can raise parental self-esteem and self-efficacy, aiding in effective child rearing (Henderson, 2004). Parent training is also strongly correlated to higher student academic achievement (Vernon, 2002). Parent education is considered one of the foremost methods of promoting student success when used in conjunction with effective behavior and academic support, skill building and high academic expectations (Biglan, et al, 2004; Zins, et al, 2004).

As adult learners, parents have acquired knowledge and life experience. They are typically self-directed and goal oriented. Malcolm Knowles, the pioneer of the field of adult learning, identifies essential elements to ensure success in an adult learning forum. He points out that, participants must recognize relevancy of, and need for information presented, as well as feel motivated to learn. New information and skills must be reinforced through encouragement as well as affective and behavioral change. Newly
learned information and skills will be retained by ensuring material is clearly understood and practiced.

The parent training workshop presents participants with a strengths-based format for increasing awareness, gaining critical skills, and improving motivation for parent involvement, and incorporates didactic, experiential and team-oriented components that are essential to successful adult learning programs (Knowles, 1973; Kolb and Kolb, 2012). Given the diversity of parenting, communication and educational experience and expertise among participants, those with less content knowledge can learn from interactions with their more experienced peers. An added value to this approach is the relationship-building that occurs throughout the two-day training program. Workshop outcome is evidenced through participant evaluations distributed at the beginning and conclusion of the program.

Conclusion

As a child’s advocate, parents must learn how to assist a child in plotting an effective course through the school years and beyond. This includes, providing a child with learning opportunities outside of the school environment, cultivating the value of education, in addition to acquiring the ability to advocating for a child, and developing an open and effective relationship between home and school (Mueller, 2009; Nespor & Hicks, 2010).

A clear, on-going dialogue between home and school best facilitates the academic success of a child receiving special education services (Cheatham, Hart, Malian, and McDonald, 2012.) Keeping accurate and updated educational records, such as
assessments, a portfolio of school work, and correspondence with teachers, administrators or other educational professionals is critical in understanding a child’s unique profile and learning needs (CCLD, 2000). Scheduled meetings require more preparation than informal communication. Information, questions and all topics of discussion are more easily tackled when put into writing. Listening for understanding and showing respect, at the same time, being assertive and persistent, work in a child’s favor when advocating for services. A strengths and solution oriented approach keeps communication positive and helps maintain the focus on improving a child’s educational experience (Nespor, 2008).

Learning disabilities pose lifelong challenges, and, parents are in a unique position to help children with LD address academic needs (NCLD, 2009). Awareness of a child’s abilities, disabilities, and interests, using effective communication skills, and having knowledge of the IEP process are tools which can assist parents in working within the school system to set their child on the path of educational and life success (Feinberg, 2011).
CHAPTER THREE

Workshop Development

I. Instructional Goals and Objectives

Through lectures and activities, parents who will participate in this workshop will gain skills and strategies, and develop a personalized organizer/binder to facilitate educational success for their child with learning disabilities.

A. Cognitive Objectives

1. Learners will increase their awareness of their child’s abilities, disabilities, and interests.

2. They will learn to how to use a child’s strengths and interests, to help compensate for delays or deficiencies through accommodations and interventions.

3. Participants will learn effective strategies in communicating and collaborating with an educational team of teachers, administrators, doctors and therapists, and improve their understanding the IEP process, educational terms, and how to maintain organized documentation of the educational development of a child with learning disabilities.

B. Affective Objectives

1. Through workshop activities and interaction with other parents and caregivers of children with learning disabilities, participants will improve feelings about their role in supporting the disadvantaged child.
2. Through improved knowledge of educational terms, and the development of a comprehensive record of a child’s personal and educational profile and needs, as well as access to educational resources, learners will feel increased confidence in interfacing with professional personnel.

3. Through participation in the workshop, learners will develop a positive attitude towards and stronger involvement in their child’s educational experience.

C. Psychomotor Objective

Through developing and using the organizer/binder, learners will
- easily access child’s records as needed
- easily access resource material as needed
- effectively monitor child’s educational progress

II. Target Audience

A. Learners: Parents/Caregivers of children with learning disabilities

B. Learner characteristics: Multi-cultural, wide SES range, motivated to help child with disabilities, autonomous and self-determined, coming with accumulated knowledge and life experiences, goal-oriented, and seeking relevant and practical strategies and skills.

C. Prior Knowledge: Learners should have a working knowledge of the English language, and awareness that the child has learning challenges.

D. Preferences of learners: Workshop activities will include visual, auditory, and tactile stimulus.
E. **Attitudes of learners will include.**

a. Attitudes toward content: learners who want to improve effectiveness in facilitating a child’s educational attainment.

b. Attitudes toward delivery system: learners will enjoy workshop lectures, activities and interaction with other parents/caregivers.

c. Attitudes toward learning environment: light refreshments, tables to spread out learning materials and adequate lighting will help learners feel relaxed and comfortable.

F. **Motivation:** Learners will feel motivated to learn strategies to facilitate educational success for their children.

G. **New behavioral outcomes:** Greater awareness of child’s abilities, disabilities, and interests; improved ability to support child through organization and discipline strategies, accommodations, and interventions; increased knowledge of IEP process, educational terms, and parent role; ease of access to online resources.

H. **Learning Constraints:** Stigma, time commitment.

I. **Delivery options/learning environment:** Workshop format in a school or community auditorium, conference room, or private home; table space, workshop material, presentation board or easel, light refreshments.

J. **Project completion deadline:** August, 2012.
III. Design

A. The organizer/binder developed in the workshop will include eight sections.

1. History and Records
   - Assessments, report cards, annual evaluations
   - Portfolio of work samples

2. Child’s personal profile
   - Strengths
   - Interests

3. Learning Supports
   - Goals
   - Accommodations

4. Communication
   - Principles of communication
   - Demystifying Disabilities

5. The IEP Process
   - IEP Overview

6. Calendar & Contacts

7. Online Resources

8. Glossary
IV. Facilitator Qualifications

Workshop facilitators must be adequately trained in education, special education, or educational psychology. Facilitators will participate in a training program that will cover the workshop curriculum, learning outcomes, and delivery method. Facilitators must be able to present the workshop material, lead discussions, and promote meaningful involvement among workshop participants. One facilitator would be required for each workshop presentation.

V. Evaluation

Evaluation of workshop effectiveness will include a pre-workshop questionnaire distributed at the beginning of the workshop to examine prior knowledge, and a post-workshop questionnaire to provide feedback from the participants at the conclusion of the workshop. Follow-up questionnaires will be distributed via e-mail to workshop participants to check for sustained learning.
CHAPTER FOUR
A Workshop for Parents of Children with Learning Disabilities

Introduction

To support and assist parents in helping their learning disabled children achieve academic and life success, I have developed this workshop to provide information, skills and strategies in an environment that promotes increased parent involvement. The format of the workshop is predominantly interactive. Lectures foster open discussion, activities are hands-on and experiential, and learning is group and self-directed.
Workshop Curricula

Schedule

Session One: Awareness

00:30-00:45  Arrival and registration
00:45-01:15  Welcome, Introductions, and Present Knowledge

Assessment

01:15-02:00  Presentation: Learning Disabilities Awareness
02:00-02:30  Activity: Personal Profile Awareness
02:30-02:45  Homework Assignment: Child Observation/Profile
02:45-02:55  Q & A
02:55-03:00  Brief introduction to Session Two

Session One Content

The first session of the workshop explains the format of an experiential and supportive learning environment, the schedule of the sessions, and expected workshop outcomes. In addition, ground rules of mutual respect are established to protect the privacy and dignity of each group member (see appendix A). Prior knowledge of workshop content is evaluated through a preliminary assessment administered after introductions, to provide baseline information on key skill competencies in the areas of learning disabilities, parent involvement, communication, and IEP collaboration (See APPENDIX H).

The presentation of Session One is mainly lecture with discussion encouraged by instructor. Instructor will facilitate group definition of learning disabilities, written on
large sheet of newsprint to be displayed throughout workshop. Instructor will define
compartmentalization as the ability to view difficulties as only one part of oneself and to
resist being defined by one’s limitations. Instructor will point out the opportunity to build
self-esteem by respecting, accepting, and nurturing a child’s uniqueness and intrinsic
value. Support for parents in raising LD children will be discussed and presenter will
facilitate group generated list of parental needs.

Key aspects of parent involvement and its impact on a child’s education will be
brought out, including personal development as a natural outgrowth of raising a child.
This will segue into the critical importance of awareness, knowing one’s child in terms of
strengths, interests, and challenges. The concept of leveraging interests to strengthen
weaknesses will be explored. Instructor concludes presentation by highlighting the need
for acceptance, respect, and nurture of a child’s intrinsic value and individuality as it
impacts development, interpersonal relationships, and career choice.

Session One activity: Instructor will facilitate participants in completing Personal
Profile worksheets to identify individual strengths, interests, and challenges (see
Appendix B).

Instructor will explain the homework: Child Observation and Profile Assignment:
This entails observing a child’s affinities, showing interest in the child’s interests, and
structuring time to help a child develop interests. Instructor will distribute child profile
worksheets (See APPENDIX B) to be completed based on child observation, and
returned next session along with educational records of child to begin creating resource
binder.
Instructor will check for understanding and clarify any questions. Instructor will conclude session with a brief preview of Session Two: Learning Supports.

Session Two: Learning Supports

- **09:30-09:45** Welcome and Review of Session One
- **09:45-10:00** Review of Awareness Homework Assignment
- **10:00-10:15** Presentation: Records and Resources
- **10:15-10:30** Activity Creating Resource Binder
- **10:30-11:00** Presentation: Learning Supports
- **11:00-11:30** Activity: Developing Goals
- **11:30-11:45** Homework Assignment Goals Worksheet
- **11:45-11:55** Q & A
- **11:55-12:00** Brief Introduction to Session Three

Session Two Content

Instructor will welcome participants to Session Two and review material from first session. Review of Child Profile and Observation assignment. Instructor will initiate a group discussion about observation assignment and insights participants discovered about their children’s strengths and interests. Questions, comments and issues will be addressed.

Instructor will introduce the need for an organized system to maintain records of a child’s comprehensive growth, including cognitive, developmental, educational, and medical information. Instructor will distribute binders to participants, and explain the
multiple tabbed sections of the binder: History and Records, Personal Profile, Team Building, Communication, IEP Information and Strategies, and Resources.

Participants will be asked to file their child’s educational information they were requested to bring, into the History and Records section of the binder, as well as the completed profile worksheet behind the Personal Profile tab. Instructor will walk around, offering assistance and answering questions.

Instructor will introduce session topic: Learning Supports, and define the terms: proactivity, the ability to take active initiative of personal behavior and life choices, and assumption of responsibility for the positive and negative resulting outcomes; goal-setting, developing realistic goals and making a game plan to achieve goals; perseverance, overcoming challenges to stay with goals, learning from adversity, and knowing when to reevaluate and change goals.

Using large sheets of newsprint, instructor will facilitate group in identifying areas of: personal responsibility, active roles in family, community, and the world at large. Instructor will emphasize the importance of helping children identify individual responsibilities, roles and goals.

The activity of Session Two involves instructor facilitating group development of a goal, mapping out steps to achieve a goal, prioritizing steps toward goal. Instructor will point out the importance of evaluating whether goals are realistically attainable.

Instructor will discuss perseverance and facilitate group generation of effective alternatives to giving up on attainable goals. Instructor will ask for personal examples of sticking with a goal in the face of adversity.

Instructor will distribute goal setting practice worksheets (see APPENDIX D),
and explain homework assignment to complete for child, or engage child in completing the worksheet, depending on child’s ability.

Instructor will check for understanding and clarify any questions. Instructor will conclude with a brief preview of Session Three: Communication and Collaboration

Session Three: Building a Team: Communication, Collaboration, and Demystification

- 00:00-00:15 Welcome and Review of Session Two
- 00:15-00:30 Review of Goals Homework Assignment
- 00:30-01:15 Presentation: Communication, Collaboration, and Demystification
- 01:15-01:35 Activity: Communication/Demystifying
- 01:35-01:45 Homework Assignment: Demystifying Your Child’s LD
- 01:45-01:55 Q & A
- 01:55-02:00 Brief Overview of Session Four

Session Three Content

Instructor will introduce multifaceted concept of communication, as a basic human need to be heard and understood, and describes effective communication as listening with the intent to connect, understand, and support, skills that always precede advice. Instructor will emphasize that effective communication builds trust and acceptance. Instructor explains the skills of listening: naming feelings, and acknowledging and accepting challenges.
Instructor will define collaboration as people, teaming up to build mutually supportive relationships in achieving group objectives, promoting learning, productivity and innovation. Instructor will explain essential principles of communication: active listening, accepting feelings, providing feedback, validate feelings, expressing empathy, modeling optimism, building trust, demonstrating respect.

Instructor will discuss the importance of an effective support system in successful learning and development. Instructor will facilitate generating group list of typically trusted and supportive individuals in one’s life.

Instructor will define the term Demystify as a way to validate feelings and help children understand their unique cognitive makeup, and point out key features of demystifying a child’s learning disabilities: eliminate stigma by explaining that everyone has areas of competence and challenge; identify and discuss student strengths and interests; have open, honest and informative discussions about weaknesses; emphasize opportunities to develop strengths, and interests; help students gain metacognitive skills through direct instruction in learning strategies; encourage the use of a mentor and supportive guidance; avoid public criticism and support self-esteem by highlighting strengths; promote optimism.

Instructor will facilitate group activity: participants will pair up and take turns sharing a memory of a stressful event. Participants will practice the following skills: listening for understanding, acknowledging and naming feelings, identifying individuals who could offer support, and demystifying personal challenges.

Instructor will distribute Demystify Your Child worksheets (see APPENDIX E) and explain that homework involves active listing and a demystifying discussion with
child, (age and ability of child permitting). Instructor will check for understanding and clarify any questions. Instructor will conclude with a brief preview of Session Four: Understanding the IEP Process.

I. Session Four: Understanding the IEP Process

09:30-09:45 Welcome and Review of Session Three
09:45-10:00 Review of Demystifying Homework Assignment
10:00-10:45 Presentation: The IEP Process
10:45-11:25 Activity: Mock IEP Meeting
11:25-11:40 Discussion: The IEP Experience
11:40-11:50 Resources and Wrap-Up
11:50-12:00 Post-Workshop Evaluation

Session Four Content

Instructor will welcome group to the last session of the workshop. Instructor will review communication and collaboration concepts and skills discussed in session three. Questions, comments, and issues will be addressed.

Instructor will facilitate discussion of Demystifying assignment, and encourage sharing of participants’ experience and observations.

Instructor will introduce Session Four topic: The IEP Process. Instructor will distribute the following handouts: IEP Overview, Preparing for IEP Meetings, IEP Parent Checklist, (See APPENDIX E). Instructor will ask participants to file handouts in binder, behind IEP tab. Instructor will explain steps of the IEP process, checking for
understanding and clarifying questions. Instructor will emphasize the importance of preparing for an IEP meeting and cover topics relevant to meeting preparation, checking for understanding and clarifying questions. Instructor will discuss the importance of effective communication in participating in IEP meetings. Instructor will refer participants to glossary in the back of their binder, and discuss terms commonly used in IEP meetings, checking for understanding and clarifying questions.

   Instructor will introduce activity: A Mock IEP meeting. Instructor will ask for volunteers in participating in mock meeting: teachers, administrators, educational professionals, parents, and child. Instructor will facilitate mock IEP meeting, offering strategies and feedback. Instructor will facilitate group critique and discussion. Participants will have the opportunity to share personal IEP meeting experiences. Instructor will clarify questions about the IEP process.

   Instructor will demonstrate accessing on-line LD resources. Instructor will summarize material covered in the workshop, and encourage discussion to clarify any questions. Instructor will administer posttest evaluation (see APPENDIX J), and circulate among participants to check binders for complete content and appropriate placement of handouts. This completes the workshop.
SUMMARY, RECOMMENDATIONS, AND CONCLUSIONS

Summary

This educational workshop was developed to assist parents of children with learning disabilities to support their disadvantaged child in achieving academically and developing critical life skills. Parents need to be aware of their child’s unique profile of strengths, interests, and challenges, as well as understand the IEP process, available to individuals with disabilities.

The curricula include lectures, activities and discussions. Material content covers educational practices and management, focusing on presenting relevant information and effective communication skills in order to foster strong parent-child relationships and home-school collaboration. The format of the workshops is participatory in nature, as parents put together a binder of resources, individualized to assist their learning disabled child. The workshops is geared primarily to parents, as they are typically a child’s most significant caregivers with the main responsibility of educating their offspring.

Recommendations

Parents in general should be better informed and actively involved in a child’s educational experience. Many parents feel education is the responsibility of the schools. However, underfunding, large classes, and overwhelmed staff necessitates parent involvement today more than ever before. Education is a collaborative effort between home and school. Teachers must also be well trained and knowledgeable about promoting academic success among learning disabled children and benefit from on-going
staff development in this area, as well as encouraging parent involvement, but it is a topic beyond the scope of this project. Therefore, a different workshop could be developed specifically for educators.

Conclusion

Four decades of research clearly show the advantageous inclusion of parents in a child’s education, however, many parents still feel out of their league when interfacing with professionals making significant decisions for the success or failure of their child’s academic career, and life choices. Armed with knowledge, skills, and strategies gained in the TOOLS workshop, parents are empowered to make a critical difference in the life of their children, especially those diagnosed with learning disabilities.
REFERENCES


APPENDIX A

Workshop Ground Rules

1. All personal information shared in workshop sessions will remain confidential.

2. No participant will evaluate, interpret or judge the motives or behavior of another participant.

3. No participant will discuss another participant in his/her absence.

4. No participant will impose unsolicited advice on another participant.

Note: These ground rules do not exclude sharing of personal experience and/or strategies when sought out by another participant, but it is important to bear in mind, what may be effective for one person, may not work for another.

Source: Faber and Mazlish (1995). How to Talk so Kids Will Listen Group Workshop Kit
## Personal Profile Worksheets

### Identifying Strengths

Please put an X in the boxes that describe your child’s unique qualities.

<table>
<thead>
<tr>
<th>Observed Strengths &amp; Skills</th>
<th>Often</th>
<th>Sometimes</th>
<th>Seldom</th>
<th>Not sure</th>
</tr>
</thead>
<tbody>
<tr>
<td>PS1 Demonstrates affection</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PS2 Is sensitive and kind towards others’ hurt or happiness</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PS3 Enjoys new &amp; different experiences</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>PS4 Easily gets involved in activities</td>
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<tr>
<td>PS5 Likes new activities</td>
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<tr>
<td>PS6 Easy temperament/Easy to live with</td>
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<tr>
<td>PS7 Is organized</td>
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<tr>
<td>PS8 Is aware of own strengths</td>
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<tr>
<td>PS9 Is aware of own weaknesses</td>
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<tr>
<td>PS10 Generally appears happy</td>
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<tr>
<td>SS1 Easily accepts &amp; follows rules</td>
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<td>SS2 Friendly</td>
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<tr>
<td>SS3 Easily makes new friends</td>
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<tr>
<td>SS4 Plays happily with other children</td>
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<tr>
<td>SS5 Easily shares &amp; cooperates</td>
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<tr>
<td>SS6 Demonstrates patience with others</td>
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<tr>
<td>SS7 Is able to play gently with younger children &amp; pets</td>
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<tr>
<td>SS8 Easily takes turns</td>
<td></td>
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<tr>
<td>SS9 Is easily accepted by others</td>
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<tr>
<td></td>
<td>Is honest &amp; dependable</td>
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<tr>
<td>CS1 Seeks out help for challenges</td>
<td></td>
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<tr>
<td>CS2 Maintains mutually supportive peer relationships</td>
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<tr>
<td>CS3 Generally handles difficulties with a positive perspective</td>
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<tr>
<td>CS4 Compromises with ease</td>
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<tr>
<td>CS5 Accepts minor bumps &amp; bruises</td>
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<tr>
<td>CS6 Able to forgive &amp; move on</td>
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<tr>
<td>CS7 Bounces back from disappointments</td>
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<tr>
<td>CS8 Generally positive</td>
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</tbody>
</table>

Adapted from School’s Attuned, (2004)
Please put an X in the boxes that describe your child’s unique qualities.

<table>
<thead>
<tr>
<th>Abilities &amp; Skills</th>
<th>Often</th>
<th>Sometimes</th>
<th>Seldom</th>
<th>Not sure</th>
</tr>
</thead>
<tbody>
<tr>
<td>NA1 Understands verbal directions</td>
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<tr>
<td>NA2 Understands humor/jokes/puns</td>
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<tr>
<td>NA3 Understands stories</td>
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<tr>
<td>NA4 Understands idioms</td>
<td></td>
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<tr>
<td>NA5 Speaks clearly &amp; is understood by others</td>
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<tr>
<td>NA6 Can tell stories &amp; is descriptive</td>
<td></td>
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<tr>
<td>NA7 Remembers phone numbers</td>
<td></td>
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<tr>
<td>NA8 Can tell time</td>
<td></td>
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<tr>
<td>NA9 Knows right from left</td>
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<tr>
<td>NA10 Can catch/throw a ball</td>
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<tr>
<td>NA11 Good at sports (list sports skills on back)</td>
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<tr>
<td>NA12 Runs fast</td>
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<tr>
<td>NA13 Good balance</td>
<td></td>
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<tr>
<td>NA14 Can build</td>
<td></td>
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<tr>
<td>NA15 Can draw/paint</td>
<td></td>
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<tr>
<td>NA16 Uses creativity/imagination</td>
<td></td>
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<tr>
<td>NA17 Can sing</td>
<td></td>
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<tr>
<td>NA18 Is a good problem solver</td>
<td></td>
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<tr>
<td>NA19 Can fix things</td>
<td></td>
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<tr>
<td>AS1 Reads quickly/accurately</td>
<td></td>
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<tr>
<td>SS2 Can sound out new words</td>
<td></td>
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<tr>
<td>SS3 Understands what has been read</td>
<td></td>
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<tr>
<td>SS4 Writes quickly &amp; legibly</td>
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<tr>
<td>SS5 Expresses self effectively through writing</td>
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<tr>
<td>SS6 Easily learns and remembers new vocabulary words</td>
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<tr>
<td>SS7 Strong speller</td>
<td></td>
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<tr>
<td>SS8 Completes homework</td>
<td></td>
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<tr>
<td>SS9 Knows how &amp; what to study for tests</td>
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<tr>
<td>SS10 Strong memory for school work</td>
<td></td>
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</tr>
</tbody>
</table>

Add other strong skills below

Adapted from Schools Attuned (2004)
# Identifying Interests

Please put an X in the boxes that describe your child’s interests.

<table>
<thead>
<tr>
<th>Observed interests</th>
<th>Strong interest</th>
<th>Moderate interest</th>
<th>No interest</th>
<th>Not sure</th>
</tr>
</thead>
<tbody>
<tr>
<td>NI1 Bike riding</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>NI2 Sport(s)</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>NI3 Dancing</td>
<td></td>
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<tr>
<td>NI4 Swimming</td>
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<tr>
<td>NI5 Hiking</td>
<td></td>
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<tr>
<td>NI6 Singing</td>
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<tr>
<td>NI7 Fishing/hunting</td>
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<tr>
<td>NI8 Playing a musical instrument</td>
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<tr>
<td>NI9 Listening to music</td>
<td></td>
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<tr>
<td>NI10 Painting/Drawing</td>
<td></td>
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<tr>
<td>NI11 Other arts &amp; crafts/sewing</td>
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<tr>
<td>NI12 Building models, Lego, etc.</td>
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<tr>
<td>NI13 Board/electronic games</td>
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<tr>
<td>NI14 Easily uses a computer</td>
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<tr>
<td>NI15 Writing stories/poetry</td>
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<tr>
<td>NI16 Imaginative play</td>
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<tr>
<td>NI17 Reading</td>
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<tr>
<td>NI18 Animals/pets</td>
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<tr>
<td>NI19 Cars</td>
<td></td>
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<tr>
<td>AI1 Learning new things in school</td>
<td></td>
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<tr>
<td>AI2 Reading</td>
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<tr>
<td>AI3 Writing</td>
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<tr>
<td>AI4 Math</td>
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<tr>
<td>AI5 Science</td>
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<tr>
<td>AI6 History</td>
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<td>AI7 Health</td>
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<td>AI8 Physical Education</td>
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<tr>
<td>AI9 School projects</td>
<td></td>
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<tr>
<td>AI10 School friends</td>
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<tr>
<td>AI11 Relationship with teachers</td>
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</tbody>
</table>

List other strong interests below

Adapted from School’s Attuned, (2004)
APPENDIX C

Principles of Communication

- Listen for feelings, name feelings
- Acknowledge your own feelings
- Understand the person, his values, priorities, strengths, challenges, and needs.
- In relationships, the small things can be the big things—be kind, courteous and considerate.
- From the beginning, take the time to clarify mutually agreed upon roles, goals, and expectations.
- Be honest, respectful, and keep commitments. The trust that results is the glue in a relationship.
- Mistakes happen. People are forgiving when we have the courage to admit it and sincerely apologize.

Source: Between Parent and Child by Dr. Haim Ginot
## APPENDIX D

Reaching Potential
Setting and Achieving Goals

<table>
<thead>
<tr>
<th>I Am Here Abilities/Interests</th>
<th>My Goals</th>
<th>Achieving Goals</th>
<th>Obstacles to Goals</th>
<th>Overcoming Obstacles</th>
</tr>
</thead>
<tbody>
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</table>
1. Observation- Get to know your children by watching their behavior and social interactions.

2. Show empathy-Active listening, without judgment. This lets a child know you understand their challenges. Remember validating the difficulty; reduces anxiety, despair, helplessness, and withdrawal.

3. Stigma- Explain that everyone has strengths and weaknesses, even top students, brilliant achievers, and scholars. Albert Einstein didn’t speak until he was four, Whoopie Goldberg is dyslexic, Thomas Edison was thought to be a slow learner, weak in mathematics, unable to focus, and struggled with words and speech.
4. Explore and Discover strengths and interests-observe child, increase self-awareness.

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

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__________________________________________________________________

5. Discuss weaknesses and challenges-Be concrete, describe the disability and how it can interfere with learning and other activities.

__________________________________________________________________

__________________________________________________________________

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6. Use graphic and analytic examples like trying to take notes when the teacher talks faster than a child can write.

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________
7. Model Optimism - Record and discuss a child’s successes.

8. Give examples of other’s improvement and growth. Read inspiring books, such as, *The Little Engine That Could*. Share personal experiences. Children enjoy hearing stories of how their parents struggled and handled obstacles.

9. Chart progress-Create a portfolio of school work samples and photos of successful projects.

10. Take a team approach-identify allies, mentors, and build an effective support system.

   My child’s team:

11. Protect your child from humiliation-Avoid criticism in public even in front of siblings or other family members, and don’t put a child on the spot with a task that highlights areas of weakness.

Overview of the steps involved in creating an IEP

Step 1. Child is identified as possibly needing special education and related services. A school professional or parent can ask for an evaluation. Parental consent is needed before the child may be evaluated.

Step 2. Child is evaluated. If the parents disagree with the evaluation, they have the right to take their child for an Independent Educational Evaluation (IEE). They can ask that the school system pay for this IEE.

Step 3. Eligibility is decided by a group of qualified professionals and the parents look at the child's evaluation results. Together, they decide if the child has a disability as defined by IDEA. Parents may ask for a hearing to challenge the eligibility decision.

Step 4. Child is found eligible for special education services. The IEP team must meet to write an IEP for the child within 30 calendar days after the child is determined eligible.

Step 5. IEP meeting is scheduled by school staff. If parents need an interpreter they must request one. The parents may invite people to the meeting who have knowledge or special expertise about their child.

Step 6. IEP meeting is held and the IEP is written by the IEP team. The child begins to receive services as soon as possible after the meeting if the parents give their consent. Parents have rights and can challenge the IEP determinations. If this occurs they can (1) Try to reach an agreement with school officials, (2) Request mediation or a due process hearing, or (3) File a complaint with the state education agency.

Step 7. The school is responsible for making sure services are provided as written in the IEP. Parents are given a copy of the IEP. Each of the child's teachers and service providers has
access to the IEP and knows his or her specific responsibilities for carrying out the IEP. This includes the accommodations, modifications, and supports that must be provided to the child, in keeping with the IEP.

Step 8. Progress is measured and reported to parents. The child's progress toward the annual goals is measured, as stated in the IEP. Parents are regularly informed of their child's progress and whether that progress is enough for the child to achieve the goals by the end of the year. These progress reports must be given to parents with the same frequency that regular progress reports are issued to nondisabled children's parents.

Step 9. IEP is reviewed at least once a year or more often if requested by the parents or school. If necessary, the IEP is revised. Parents, as team members, must be invited to attend these meetings. Parents can make suggestions for changes, and can agree or disagree with the IEP goals and with the placement. Parents have rights if they do not agree with the revised IEP and placement: 1) They can try to reach an agreement with school officials (2) Request additional testing or an independent evaluation (3) Request mediation or a due process hearing, or (3) File a complaint with the state education agency.

Step 10. Child is reevaluated at least every three years. However, the child must be reevaluated more often if conditions warrant or if the child's parent or teacher asks for a new evaluation.

What type of information is included in an IEP?

According to the IDEA, your child's IEP must include specific statements about your child. Your child's IEP will contain the following information:

- Present levels of achievement and educational performance. This statement describes how your child is currently doing in school. This includes how your child’s disability affects his or her involvement and progress in the general curriculum.

- Annual goals. The IEP must state annual goals for your child, meaning what you and the school team think he or she can reasonably accomplish in a year. The goals must relate to meeting the needs that result from your child’s disability.
They must also help your son or daughter be involved in and progress in the general curriculum.

- Special education and related services to be provided. The IEP must list the special education and related services to be provided to your child. This includes supplementary aids and services (such as a communication device). It also includes changes to the program or supports for school personnel that will be provided for your child.

- Participation with nondisabled children. How much of the school day will your child be educated separately from nondisabled children or not participate in extracurricular or other nonacademic activities such as lunch or clubs? The IEP must include an explanation that answers this question.

- Participation in state and district-wide assessments. Your state and district probably give tests of student achievement to children in certain grades or age groups. In order to participate in these tests, your child may need individual modifications or changes in how the tests are administered. The IEP team must decide what modifications your child needs and list them in the IEP. If your child will not be taking these tests, the IEP must include a statement as to why the tests are not appropriate for your child and how your child will be tested instead.

- Dates and location. The IEP must state (a) when services and modifications will begin (b) how often they will be provided (c) where they will be provided, and (d) how long they will last.

- Transition goals and services. No later than when your child is 16, the IEP must include measurable postsecondary goals related to training, education, employment, and (when appropriate) independent living skills. Also included are the transition services needed to help your child reach those goals, including what your child should study.

- Measuring progress. The IEP must state how school personnel will measure your child’s progress toward the annual goals. It must also state how you, as parents, will be informed regularly of your child’s progress and whether that progress is enough to enable your child to achieve his or her goals by the end of the year.

Source: IEP Process Guide helpguide.org
APPENDIX G

Individualized Education Program (IEP) Sample Form

Student Name __________________________________________________________

Date of Meeting to Develop or Review IEP _________________________________

Note: For each student with a disability beginning at age 14 (or younger, if appropriate), a statement of the student's transition service needs must be included under the applicable parts of the IEP. The statement must focus on the courses the student needs to take to reach his or her post-school goals.

Statement of Transition Service Needs--34 CFR §300.347(b)(1)

"The IEP must include...[f]or each student with a disability beginning at age 14 (or younger, if determined appropriate by the IEP team), and updated annually, a statement of the transition service needs of the student under the applicable components of the student's IEP that focuses on the student's courses of study (such as participation in advanced-placement courses or a vocational education program);"

Present Levels of Educational Performance

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Statement of Present Levels of Educational Performance--34 CFR §300.347(a)(1)

"The IEP for each child with a disability must include . . . a statement of the child's present levels of educational performance, including

"(i) How the child's disability affects the child's involvement and progress in the general curriculum (i.e., the same curriculum as for nondisabled children); or

"(ii) For preschool children, as appropriate, how the disability affects the child's participation in appropriate activities;"
Measurable Annual Goals (Including Benchmarks or Short-Term Objectives)
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Statement of Measurable Annual Goals, Including Benchmarks or Short-Term Objectives--34 CFR §300.347(a)(2)

"The IEP for each child with a disability must include . . . a statement of measurable annual goals, including benchmarks or short-term objectives, related to

"(i) Meeting the child's needs that result from the child's disability to enable the child to be involved in and progress in the general curriculum (i.e., the same curriculum as for nondisabled children), or for preschool children, as appropriate, to participate in appropriate activities; and

"(ii) Meeting each of the child's other educational needs that result from the child's disability;"

Special Education and Related Services
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

• Start Date______________________________
• Location______________________________
• Frequency______________________________
• Duration______________________________

Supplementary Aids and Services
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

• Start Date______________________________
• Location______________________________
• Frequency______________________________
• Duration______________________________
Program Modifications or Supports for School Personnel

• Start Date ________________________________
• Location __________________________________
• Frequency ________________________________
• Duration ________________________________

Statement of the Special Education and Related Services, Supplementary Aids and Services, Program Modifications, and Supports For School Personnel--34 CFR §300.347(a)(3)

"The IEP for each child with a disability must include... a statement of the special education and related services and supplementary aids and services to be provided to the child, or on behalf of the child, and a statement of the program modifications or supports for school personnel that will be provided for the child

"(i) To advance appropriately toward attaining the annual goals;

"(ii) To be involved and progress in the general curriculum in accordance with 34 CFR §300.347(a)(1) and to participate in extracurricular and other nonacademic activities; and

" (iii) To be educated and participate with other children with disabilities and nondisabled children in the activities described in this section;"

--ALSO--

Beginning Date, Frequency, Location, and Duration of Services and Modifications--34 CFR §300.347(a)(6)

"The IEP for each child with a disability must include . . . the projected date for the beginning of the services and modifications described in 34 CFR §300.347(a)(3), and the anticipated frequency, location, and duration of those services and modifications;"

Explanation of Extent, if Any, to Which Child Will Not Participate with Nondisabled Children
Explanation of Extent, if Any, to Which Child Will Not Participate with Nondisabled Children 34 CFR §300.347(a)(4)

"The IEP for each child with a disability must include . . . an explanation of the extent, if any, to which the child will not participate with nondisabled children in the regular class and in the activities described in 34 CFR §300.347(a)(3);

Administration of State and District-wide Assessments of Student Achievement

Any Individual Modifications In Administration Needed For Child To Participate In State Or District-wide Assessment(s)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Statement Of Any Individual Modifications in Administration of State or District-wide Assessments 34--CFR §300.347(a)(5)(i)

"The IEP for each child with a disability must include . . . a statement of any individual modifications in the administration of State or district-wide assessments of student achievement that are needed in order for the child to participate in the assessment;"

If IEP Team Determines That Child Will Not Participate In A Particular State Or District-Wide Assessment

- Why isn't the assessment appropriate for the child?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

- How will the child be assessed?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

If Child Will Not Participate in State or District-wide Assessment--34 CFR §300.347(a)(5)(ii)

"If the IEP team determines that a child with a disability will not participate in a particular State or district-wide assessment of student achievement (or part of an assessment), the IEP must include a statement of

"(A) Why that assessment is not appropriate for the child; and
"(B) How the child will be assessed;"

How Child's Progress Toward Annual Goals Will Be Measured

How Child's Progress Will Be Measured--34 CFR §300.347(a)(7)(i)

"The IEP for each child with a disability must include . . .

a statement of how the child's progress toward the annual goals described in 34 CFR §300.347(a)(2) will be measured;"

How Child's Parents Will Be Regularly Informed Of Child's Progress Toward Annual Goals And Extent To Which Child's Progress Is Sufficient To Meet Goals By End of Year

How Parents Will Be Informed of Their Child's Progress--34 CFR §300.347(a)(7)(ii)

"The IEP for each child with a disability must include . . . a statement of how the child's parents will be regularly informed (through such means as periodic report cards), at least as often as parents are informed of their nondisabled children's progress, of

"(A) Their child's progress toward the annual goals; and

"(B) The extent to which that progress is sufficient to enable the child to achieve the goals by the end of the year."

(Beginning at age 16 or younger if determined appropriate by IEP team)

Statement of Needed Transition Services, Including, If Appropriate, Statement Of Interagency Responsibilities Or Any Needed Linkages
Statement of Needed Transition Services--34 CFR §300.347(b)(2)

"The IEP must include . . . for each student with a disability beginning at age 16 (or younger, if determined appropriate by the IEP team), a statement of needed transition services for the student, including, if appropriate, a statement of the interagency responsibilities or any needed linkages."

Definition of "Transition Services"--34 CFR §300.29

"(a) As used in [Part B], "transition services" means a coordinated set of activities for a student with a disability that:

"(1) Is designed within an outcome-oriented process, that promotes movement from school to post-school activities, including post-secondary education, vocational training, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation;

"(2) Is based on the individual student's needs, taking into account the student's preferences and interests; and

"(3) Includes: (i) Instruction; (ii) Related services; (iii) Community experiences; (iv) The development of employment and other post-school adult living objectives; and (v) If appropriate, acquisition of daily living skills and functional vocational evaluation.

"(b) Transition services for students with disabilities may be special education, if provided as specially designed instruction or related services, if required to assist a student with a disability to benefit from special education."

(In a state that transfers rights to the student at the age of majority, the following information must be included beginning at least one year before the student reaches the age of majority)

The student has been informed of the rights under Part B of IDEA, if any, that will transfer to the student on reaching the age of majority. Yes [box to check]

Age of Majority--34 CFR §300.347(c)

"In a State that transfers rights at the age majority, beginning at least one year before a student reaches the age of majority under State law, the student's IEP must include a statement that the student has been informed of his or her rights under Part B of the Act, if any, that will transfer to the student on reaching the age of majority, consistent with 34 CFR §300.517." Adapted from U. S. Department of Education (2007)
APPENDIX H

Online Resources

- All Kinds of Minds-A great resource for learning and school success
  http://www.allkindsofminds.org/
  Parent Toolkit - All Kinds of Minds
  http://www.allkindsofminds.org/parent-toolkit
  A Parent's Guide to Tutors and Tutoring:
  http://www.allkindsofminds.org/resources
  A Note to Parents and Other Caregivers - All Kinds of Minds
  http://www.allkindsofminds.org/a-note-to-parents

- Beach Center on Disabilities
  www.beachcenter.org

- CHADD, Children and Adults with Attention Deficit/Hyperactivity Disorder
  http://www.chadd.org/
  CHADD Live | Especially for Parents
  http://www.chadd.org/AM/Template.cfm?Section=Especially_For_Parents

- Frostig Center; Helping Children with Learning Disabilities
  http://www.frostig.org/index.html

- Great Schools-articles, worksheets, and more
  www.greatschools.org

- LD OnLine: The world's leading website on learning disabilities
  http://www.ldonline.org/

- The Best Disabled Online Resources Providing Services for the Disabled Community.
• Top Resource Sites for Learning Disabilities
  http://education-portal.com/articles/Top_Resource_Sites_for_Learning_Disabilities.html

• Free Teaching Resources for Special Education
  http://www.senteacher.org/

• Online Activities for Autistic Children, Students with Learning Disabilities & Other Special Needs Kids
  http://www.kidzui.com/special_needs

• National Dissemination Center for Children with Disabilities-A wealth of resources
  http://nichcy.org/disability/specific/ld

• Lindamood-Bell® Learning Centers
  www.lindamoodbell.com/

• The National Center for Learning Disabilities
  http://www.nclld.org

• Team of Advocates for Special Kids (TASK)
  http://www.taskca.org/
APPENDIX I
Glossary

Academic Achievement Standards:
Academic achievement standards refer to the expected performance of students on measures of academic achievement; for instance, "all students will score at least 76% correct on the district-developed performance-based assessment." Also known as performance standards.

Accommodation (For Students with Disabilities)
Techniques and materials that allow individuals with LD to complete school or work tasks with greater ease and effectiveness. Examples include spellcheckers, tape recorders, and expanded time for completing assignments.

Adequate Yearly Progress (AYP)
An individual state's measure of yearly progress toward achieving state academic standards. "Adequate Yearly Progress" is the minimum level of improvement that states, school districts and schools must achieve each year.

Americans With Disabilities Act (ADA)
A federal law that gives civil rights protections to individuals with disabilities similar to those provided to individuals on the basis of race, color, sex, national origin, age, and religion. It guarantees equal opportunity for individuals with disabilities in public accommodations, employment, transportation, state and local government services, and telecommunications.

Assessment
Assessment is a broad term used to describe the gathering of information about student performance in a particular area. See also formative assessment and summative assessment.

Assistive Technology
Equipment that enhances the ability of students and employees to be more efficient and successful.

Attention Deficit / Hyperactivity Disorder (ADHD)
Any of a range of behavioral disorders in children characterized by symptoms that include poor concentration, an inability to focus on tasks, difficulty in paying attention, and impulsivity. A person can be predominantly inattentive (often referred to as ADD), predominantly hyperactive-impulsive, or a combination of these two.

Auditory Processing Disorder (APD)
An inability to accurately process and interpret sound information. Students with APD often do not recognize subtle differences between sounds in words.

Authentic Assessment
Authentic assessment uses multiple forms of evaluation that reflect student learning, achievement, motivation, and attitudes on classroom activities. Examples of authentic assessment include performance assessment, portfolios, and student self-assessment.

Automaticity
Automaticity is a general term that refers to any skilled and complex behavior that can be performed rather easily with little attention, effort, or conscious awareness. These skills become automatic after extended periods of training. With practice and good instruction, students become automatic at word recognition, that is, retrieving words from memory, and are able to focus attention on constructing meaning from the text, rather than decoding.

Behavior Intervention Plan (BIP)
A plan that includes positive strategies, program modifications, and supplementary aids and supports that address a student's disruptive behaviors and allows the child to be educated in the least restrictive environment (LRE).

Central Auditory Processing Disorder (CAPD)
A disorder that occurs when the ear and the brain do not coordinate fully. A CAPD is a physical hearing impairment, but one which does not show up as a hearing loss on routine screenings or an audiogram. Instead, it affects the hearing system beyond the ear, whose job it is to separate a meaningful message from non-essential background sound and deliver that information with good clarity to the intellectual centers of the brain (the central nervous system).

Dyscalculia
A severe difficulty in understanding and using symbols or functions needed for success in mathematics.

Dysgraphia
A severe difficulty in producing handwriting that is legible and written at an age-appropriate speed.

Dyslexia
A language-based disability that affects both oral and written language. It may also be referred to as reading disability, reading difference, or reading disorder.

Dysnomia
A marked difficulty in remembering names or recalling words needed for oral or written language.
Dyspraxia
A severe difficulty in performing drawing, writing, buttoning, and other tasks requiring fine motor skill, or in sequencing the necessary movements.

Formal Assessment
The process of gathering information using standardized, published tests or instruments in conjunction with specific administration and interpretation procedures, and used to make general instructional decisions.

Formative Assessment
Formative assessments are designed to evaluate students on a frequent basis so that adjustments can be made in instruction to help them reach target achievement goals. Individualized Education Program (IEP).

Graphic Organizers
Text, diagram or other pictorial device that summarizes and illustrates interrelationships among concepts in a text. Graphic organizers are often known as maps, webs, graphs, charts, frames, or clusters. I

Independent Educational Evaluation (IEE)
An evaluation conducted by a qualified examiner, who is not employed by the school district at the public's expense.

Individualized Education Program (IEP)
A plan outlining special education and related services specifically designed to meet the unique educational needs of a student with a disability. For more information, go to LD Topics: IEPs.

Individualized Transition Plan (ITP)
A plan developed by the IEP team to help accomplish the student goals for the transition from high school into adulthood.

Individuals With Disabilities Education Act (IDEA)
The Individuals with Disabilities Education Act is the law that guarantees all children with disabilities access to a free and appropriate public education. For more information, go to IDEA 2004.

Informal Assessment
The process of collecting information to make specific instructional decisions, using procedures largely designed by teachers and based on the current instructional situation.
Intelligence Quotient (IQ)
A measure of someone's intelligence as indicated by an intelligence test, where an average score is 100. An IQ score is the ratio of a person's mental age to his chronological age multiplied by 100.

Learning Disability (LD)
A disorder that affects people's ability to either interpret what they see and hear or to link information from different parts of the brain. It may also be referred to as a learning disorder or a learning difference.

Least Restrictive Environment (LRE)
A learning plan that provides the most possible time in the regular classroom setting.

Mainstream
"Mainstream" is a term that refers to the ordinary classroom that almost all children attend. Accommodations may be made for children with disabilities or who are English language learners, as part of the general educational program.

Metacognition
Metacognition is the process of "thinking about thinking." For example, good readers use metacognition before reading when they clarify their purpose for reading and preview the text.

No Child Left Behind (NCLB)
The No Child Left Behind Act of 2001 is the most recent reauthorization of the Elementary and Secondary Education act of 1965. The act contains President George W. Bush's four basic education reform principles: stronger accountability for results, increased flexibility and local control, expanded options for parents, and an emphasis on teaching methods based on scientifically-based research.

Nonverbal Learning Disability
A neurological disorder which originates in the right hemisphere of the brain. Reception of nonverbal or performance-based information governed by this hemisphere is impaired in varying degrees, causing problems with visual-spatial, intuitive, organizational, evaluative, and holistic processing functions.

Receptive Language
The aspect of spoken language that includes listening, and the aspect of written language that includes reading.

Response To Intervention (RTI)
Response to Intervention is a process whereby local education agencies (LEAs) document a child's response to scientific, research-based intervention using a tiered approach. In contrast to the discrepancy criterion model, RTI provides early
intervention for students experiencing difficulty learning to read. RTI was authorized for use in December 2004 as part of the Individuals with Disabilities Education Act (IDEA).

Special Education (SPED)
Services offered to children who possess one or more of the following disabilities: specific learning disabilities, speech or language impairments, mental retardation, emotional disturbance, multiple disabilities, hearing impairments, orthopedic impairments, visual impairments, autism, combined deafness and blindness, traumatic brain injury, and other health impairments.

Specific Learning Disability (SLD)
The official term used in federal legislation to refer to difficulty in certain areas of learning, rather than in all areas of learning. Synonymous with learning disabilities.

Summative Assessment
Summative assessment is generally carried out at the end of a course or project. In an educational setting, summative assessments are typically used to assign students a course grade.

Transition
Commonly used to refer to the change from secondary school to postsecondary programs, work, and independent living typical of young adults. Also used to describe other periods of major change such as from early childhood to school or from more specialized to mainstreamed settings.

Working Memory
The ability to store and manage information in one's mind for a short period of time. In one test of working memory a person listens to random numbers and then repeats them. The average adult can hold 7 numbers in their working memory. Working memory is sometimes called Short-term memory.

Source: ldonline.org Glossary
Pre-Workshop Questionnaire and Evaluation

We would like to know your thoughts on the information that will be presented in the workshop. By completing and turning in this questionnaire you will be providing information that will be used to evaluate and modify the workshop. The information you provide is confidential.

Name_________________________________________ Date____________________

We would like to know a little about your understanding of the specific information you will be learning in the workshop. Please read each statement and circle the letter that you feel best completes or reflects the statement.

A.) Learning disabilities involve
   a) Memory
   b) Language & Reading
   c) Writing
   d) Math
   e) Attention
   f) All of the above
   g) None of the above
   h) I don’t know
B.) Children with LD
   a) Have strengths and interests
   b) Can never sit still
   c) May have reading problems
   d) None of the above
   e) I don’t know

C.) Proactive means
   a) Hyperactive
   b) Taking initiative
   c) Professional athletics
   d) Personal responsibility
   e) I don’t know

D.) Achieving one’s goals involves
   a) Priorities
   b) Planning
   c) Discipline
   d) Perseverance
   e) I don’t know
E.) Communication is important
   a) In family relationships
   b) Friendships
   c) At school
   d) At work
   e) All of the above
   f) I don’t know

F.) Collaboration means working with others.
   a) True
   b) False

G.) An IEP includes
   a) A child’s level of performance
   b) Annual goals
   c) Special Education services
   d) Accommodations
   e) I don’t know
Post-Workshop Questionnaire and Evaluation

We would like to know your thoughts on the workshop you just attended. By completing and turning in this questionnaire you will be providing information that will be used to evaluate and modify the workshop. The information you provide is confidential.

Name ___________________________________________ Date ____________________

We would like to know a little about your understanding of the specific information you learned in the workshop. Please read each statement and circle all of the letters that you feel best completes or reflects the statement.

A.) Learning Disabilities involve

a) Memory
b) Language & Reading
c) Writing
d) Math
e) Attention
f) All of the above
g) None of the above
h) I don’t know
B.) Children with LD
   a) Have strengths and interests
   b) Can never sit still
   c) May have reading problems
   d) None of the above
   e) I don’t know

C.) Proactive means
   a) Hyperactive
   b) Taking initiative
   c) Professional athletics
   d) Personal responsibility
   e) I don’t know

D.) Achieving one’s goals involves
   a) Priorities
   b) Planning
   c) Discipline
   d) Perseverance
   e) I don’t know
E.) Communication is important
   a) In family relationships
   b) Friendships
   c) At school
   d) At work
   e) All of the above
   f) I don’t know

F.) Collaboration means working with others.
   a) True
   b) False

G.) An IEP includes
   a) A child’s level of performance
   b) Annual goals
   c) Special Education services
   d) Accommodations
   e) I don’t know
Please indicate your opinion on the following statements

Strongly Agree  Agree  Somewhat Agree  Somewhat Disagree  Disagree  Strongly Disagree

A.) I learned something new in this workshop.___________________________

B.) I learned something I will probably use in my relationship with my child.________

C.) The presenter knew a lot about the topics covered in the workshop.____________

D.) This workshop provided me with knowledge about my role in facilitating my child’s academic success___________________________

E.) The workshop provided me with knowledge about my role in facilitating my child’s life success._____________________________

H.) The information in the handouts was clear and easy to understand.______________

I.) The presentation was clear.______________________________

J.) The presentation was well organized._______________________________

K.) The instructor encouraged questions and discussion._____________________

L.) Overall, the workshop was a good use of my time._______________________

Thank you for your help!