

early intervention to support their accelerative learning and response to instruction, the number of children identified as LD can be reduced to only 1-1.5 percent.

For over 25 years in the United States, Reading Recovery has operated as an RtI approach. Professionally trained and developed Reading Recovery teachers design instruction tailored precisely to the child, delivered daily and one-on-one, in support of the literacy learning of the most at-risk children (Clay, 2005a; 2005b). While many children respond quite well to whole group and small group instruction, evidence has shown that the lowest performing learners provided with the Reading Recovery intervention are able to make accelerative progress and continue learning with their peers in the classroom without further intervention or placement in special education for literacy difficulties—a considerable cost savings to districts.

Because teaching the most struggling learners is very challenging, schools that implement Reading Recovery not only respond to their lowest performing young learners' literacy learning needs, but also to the professional development needs of their teachers. Reading Recovery teachers receive intensive initial training in literacy assessment, theory, and instruction which they apply immediately in their work with children selected for the intervention and continue to apply as they further their learning through the professional development opportunities provided at their regional Reading Recovery site. This continuous professional learning support not only informs their work with identified RR children but also benefits their instruction of the other struggling learners that they serve in their instructional roles in the other part of their teaching day.

Literacy Lessons® Training for Special Educators

In recognition of the benefits to teachers and students, several Michigan schools have requested that special education teachers and other specialist teachers have access to Reading Recovery training without the requirement of teaching a full load of students (4 slots of Reading Recovery children; minimum of 8 students each year) as required by Reading Recovery Standards in the United States (2008). This training model, Literacy Lessons®, allows special education teachers in a school to participate in the Reading Recovery training course without having to restructure their school work load. These teachers are introduced to the complex literacy processing model that informs Reading Recovery in order to support the learning of children

who need long-term specialist help (Konstantellou & Lose, in press). Districts that are interested in learning more about Literacy Lessons training are invited to contact the Reading Recovery Center of Michigan.

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Reading Recovery Center of Michigan

School of Education and Human Services
Room 217 Pawley Hall, Oakland University
Rochester, Michigan 48309-4494
(248) 370-3057
www.oakland.edu/readingrecovery

Reading Recovery Staff

Dr. Mary K. Lose, Associate Professor, Director and Trainer
Dr. Robert M. Schwartz, Professor and Trainer
Joan Henderson, Assistant to the Director

This report was prepared by Mary K. Lose.

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Reading Recovery® in Michigan 2008-2009

An Oakland University Executive Summary



Introduction

Reading Recovery® is a program of professional development for teachers: university faculty train and professionally develop teacher leaders who in turn develop teachers to work with first grade children having extreme difficulty learning to read and write. Reading Recovery was developed by literacy researcher and developmental psychologist, Dr. Marie Clay at the University of Auckland in New Zealand. Since its establishment in the United States, Reading Recovery has served nearly 2 million children. Oakland University is one of only 22 universities in the United States to serve as a Reading Recovery university training center. Since its establishment in Michigan in 1991, Reading Recovery has trained over 1,100 teachers who have served almost 91,500 Michigan first graders.

Reading Recovery

Reading Recovery is based on the research of Dr. Marie Clay. The not-for-profit collaborative effort among schools and universities trains teachers to work with the lowest-performing first graders. Children are identified for service based upon their scores on the six tasks of An Observation Survey of Early Literacy Achievement (Clay, 2002) with the lowest children selected for service first. Reading Recovery teachers use the assessment information and sensitive observation to design individual literacy lessons that are responsive to each child's skills and abilities. Children meet with their Reading Recovery teacher for 30-minute lessons each day for an average of 12-20 weeks. The goal is to accelerate children's progress to within-average levels in reading and writing in a short period of time so that they can benefit from good classroom instruction (Schwartz, 2005). Researchers attribute this accelerative progress to the instructional activities provided in the one-to-one responsive instruction by teachers who have participated in Reading Recovery's professional development. Reading Recovery also serves as a pre-referral option to identify children who need longer-term specialist support (Jones, et al., 2005).

Reading Recovery in Michigan, 2008-2009

During the 2008-2009 school year, 3,903 students were taught by 453 Reading Recovery teachers (47 of whom were in-training) at 344 schools in 105 districts. When they were not teaching Reading Recovery, these teachers also taught 19,261 additional students – an average of 42.5 students – in their other half-day roles as classroom, special education, Title I reading, and bilingual/ESL teachers. Reading Recovery teachers received professional development from 25

teacher leaders who themselves received professional development from Reading Recovery faculty at the Reading Recovery Center of Michigan at Oakland University.

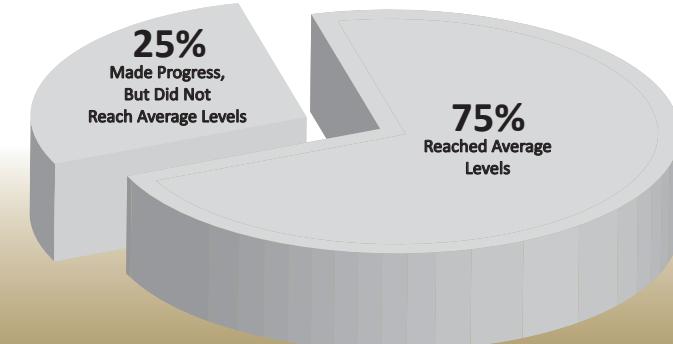
Reading Recovery Demographics

Reading Recovery children in Michigan represented a diverse population: 58% were male; 56% received a free or reduced lunch; 13% had some disability; 71% were White, 16% Black, 6% Hispanic, 1% Asian, 1% Native American, and 5% other races. In terms of language spoken in the home, 86% were native speakers of English with 7% Arabic, 4% Spanish, and 3% speakers of a language other than English. Twenty-two percent of Reading Recovery schools had between 20-50% minority student enrollment and 12% had more than 50% minority student enrollment.

Results

3,903 students were enrolled in Reading Recovery in Michigan in 2008-2009. A full Reading Recovery intervention lasts up to 20 weeks. Thirty-one percent of students received interventions that lasted between 10-14 weeks, 23% between 15-19 weeks, and 28% of the interventions lasted 20 weeks total. Not all of the students

Figure 1 Outcomes for Children with Complete Reading Recovery Interventions



Reading Recovery® in Michigan 2008-2009

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Empirical Support for Reading Recovery

An independent review of the experimental research on Reading Recovery by the What Works Clearinghouse (WWC), a branch of the United States Department of Education (USDE) Institute of Education Sciences (IES), established that Reading Recovery is an effective intervention based on scientific research. Of the 170 Beginning Reading programs reviewed, only Reading Recovery was found to have positive effects across all four of the literacy domains: alphabetic, fluency, reading comprehension, and general reading achievement. See <http://www.ies.ed.gov/ncee/wwc/>.

The Need for Improvement in Access

Reading Recovery has a strong track record of preventing literacy failure for many first graders. Results support the investment of resources for this prevention effort. Yet, Michigan is still far from providing Reading Recovery to all the children who need it. Many of the participating districts experience the impact of low coverage. Almost five out of six students in Michigan who need Reading Recovery do not have access to the intervention. Ideally, 20% of the state's first graders should have access. Policy makers and all who are concerned about closing the achievement gap and leaving no child behind could achieve greater equity by providing the intervention to the 23,190 first graders that could benefit from Reading Recovery.

who were enrolled received a full intervention; their interventions were incomplete due to a slot opening up for their lessons late in the year (16%, N=616), because they moved (3%, N=122), and for other reasons (2%, N=79).

Of the 3,083 students who received a complete intervention (about 30-35 hours of instruction total), 75% reached average performance levels in reading and writing and 785 (25%) made progress but not sufficient enough to reach average performance levels. These students were recommended for follow-up support in the classroom or additional intensive intervention (see Figure 1).

Effect of Reading Recovery on Reading Achievement

Figure 2 demonstrates the effect of Reading Recovery instruction on the reading achievement of the lowest performing literacy learners in first grade and compares their progress to the Random Sample of their peers and the Low Random Sample

of children in schools with Reading Recovery.

Random Sample (RS) Children – The light gold dashed line at the top shows the Random Sample's progress on text reading at three points in time. These students start the year at a higher text reading level and make progress throughout the year. **Reading Recovery (RR) Children served in the fall semester – The solid gold line** shows the progress of Reading Recovery children who were selected during the fall semester for Reading Recovery service. Initially the lowest-performing children, they catch up to the Random Sample by mid-year when their Reading Recovery lessons end and continue to maintain their progress.

Reading Recovery (RR) Children served at mid-year – The solid black line shows the progress of Reading Recovery children selected for service at mid-year when slots by Reading Recovery children served in the fall become available. Although these children made some progress in the fall without Reading Recovery, they are behind their Random Sample peers at mid-year.

Provided with Reading Recovery however, these children make accelerative progress, reduce the gap between themselves and the Random Sample and achieve within-average performance levels by year's end. **Low Random Sample (RS) Children – The dashed gray line** at the bottom shows the progress of the Low Random Sample. These students who did not receive Reading Recovery were low at the beginning of the school year and

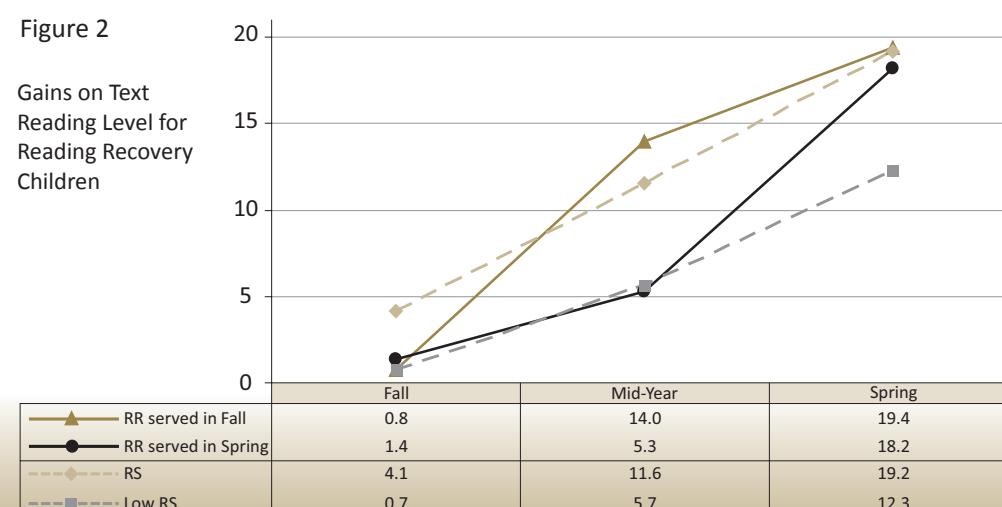
remain low throughout the year. While they made some progress throughout the year, it is not enough to reduce the achievement gap. Had they been able to receive Reading Recovery, it is likely they would have achieved accelerative progress and reached within-average performance levels. These findings confirm Juel's (1988) research which showed that children who were low-performing in literacy in first grade are very likely to remain low-performing in fourth grade. However, provided with contingent, responsive teaching by specially trained and professionally developed teachers, even the lowest-performing children can make accelerative progress, benefit from good classroom instruction, and continue learning with their peers (McEneaney, et al., 2006).

intensive interventions and tiers or layers of support can be provided within a comprehensive approach to literacy instruction at the first sign of a child's difficulty.

Response to Intervention

The IDEA attempts to ensure that schools achieve the following (Lose, 2007; 2008):

- Provide early identification and intervention for all children struggling with literacy learning.
- Develop ways to appropriately identify and intervene on behalf of children with LD.
- Provide effective, intensive, evidence-based early intervening services.
- Monitor each child's progress using data-based documentation.
- Accelerate children's reading progress to meet annual yearly progress (AYP) criteria.
- Create a multi-tiered problem-solving team to support comprehensive literacy efforts.
- Provide the highest quality of professional development for teachers of low achievers.



Reading Recovery: An Evidence-Based Approach to RtI

In her seminal article, *Learning to be Learning Disabled*, published over 20 years ago, Marie Clay (1987) gave validity to support the idea that many children labeled LD are in fact instructionally challenged through a series of unfortunate experiences either before, or very early, in their formal schooling. However, provided an appropriate