

Advice on Non-Teaching Interventions

Learning difficulties and dyslexia in particular seem to attract unusual forms of treatment. Parents of pupils with dyslexia who are anxious and frustrated by their child's difficulty in learning are likely to be vulnerable to new and different 'treatments'.

In contrast to unproven therapies, there is evidence that early diagnosis of dyslexia, followed by appropriate specialist teaching will enable children with dyslexia to succeed. Teaching is time-consuming, repetitious and often tedious, but when appropriate teaching as an intervention begins early in life and has the moral and pragmatic support of the home and the school, it is successful. On the other hand, if scientific evidence can prove the value of an alternative therapy AND subsequent independent research work replicates the results, both teachers and parents may be tempted to include non-teaching therapies as a part of a pupil's intervention programmes. To date, there is no quick fix, no magic pill and no universal panacea that will provide a cure, and the consensus is that direct teaching remains the optimum way of improving literacy skills. However, it is important, at the same time, to remain open-minded about new ideas.

Training of specific skills such as reading or spelling is not the focus of these therapies. Rather than treating symptoms, they attempt to ameliorate the underlying conditions. What the therapy consists of then is dependant on a theory of cause. As there are numerous causal theories, there is a wide variety of non-teaching therapies

When considering alternative treatments, remember that research has shown that many things can influence performance incidentally. Subjective effects should not be mistaken for, or confused with, objective improvements in meaningful reading skills which would need to take place in addition to any placebo effects. It must also be remembered that if some individuals experience some form of idiosyncratic 'improvements', this does not mean that this will generalise to all children with dyslexia.

The only real way to determine the worth of these treatments is to become better acquainted with some of the methods of scientific investigation and consider the range of subjective effects such as

- placebo effects, wherein an individual experiences change simply because they believe that they are receiving an effective treatment;
- Hawthorne effects, which state that for every change in circumstances there will be some change in behaviour;
- attentional effects, wherein subjects react favourably to a treatment just because they are the centre of a lot of attention;
- motivational effects, which are the result of an individual trying much harder just because they have been singled out for a new treatment and made to feel special.

Guidelines

Watch out for any promoted method or product that costs a lot of money and promises an easy or quick 'cure'. Any method or product should be considered controversial and suspect if it uses:

1. Promises of a "cure" or promises of specific amounts of progress by utilising the technique. The only thing more difficult than a diagnosis for a child with dyslexia is a prognosis. Be suspicious of anyone who promises that the dyslexia will "go away" or who commits to a specific, measurable amount of progress during a specific amount of time (e.g., "Your child is guaranteed to make one year's progress in the first six months").
2. Case histories and/or testimonials as the sole evidence of the technique's effectiveness. Be concerned if the only 'proof' is the personal testimony of parents or their children. There should be scientific research available if the method works. True scientists will present validated research to demonstrate the effectiveness of their approach (e.g., "We used this approach with 300 pupils in Dublin, 420 pupils in Belfast, and 220 pupils in Cork. The results of our research was . . . etc.").

The alternative therapies considered controversial have little independent research to support their theories. Therefore, they attempt to dazzle you with case histories (e.g., "John O'Brien made two years progress in twenty 10-minute sessions using our software!") or Testimonials ("Teacher Amanda Browne, says 'Phoolproof Phonics is the BEST!'") Remember. . case histories cannot be replicated and therefore are of limited value and reliability. Real research can be independently replicated

1. Misrepresentations of Cause-and-Effect. These therapies want 100% of the "credit" for any progress that the child makes during the period of the therapy. For example, "Billy Jones made two years progress in reading in the six months that he listened to our Easy Reading Tapes." Perhaps the progress was related to other factors which occurred during those six months (e.g. a new teacher, increased motivation, maturity, cumulative effect of previous reading approaches etc.). What is the cause-and-effect? The claims of the method or product should not exceed the research results.
1. Claims of medical and/or educational conspiracy. Controversial alternative therapies will often claim that the medical or educational "establishment" is attempting to discredit their breakthrough therapy because they fear the competition. Does this really make sense? If there were a simple answer to dyslexia, wouldn't everyone welcome and embrace it? Parents and professionals must become knowledgeable consumers regarding appropriate and effective approaches for their children. Simple answers simply don't work! Remember the wise advice: "For every complex problem, there is a simple solution which is convenient, basic, succinct, direct, brief . . . and wrong!"

Before signing any contract, agreeing to any treatment or purchasing any product that sounds too good to be true, ask to see the independent research papers that support the provider's claims. Also ask for local references. Talk to professionals in the field about the method. If it sounds too good to be true, it probably is. The only proven solution to dealing effectively with a child's learning problem is a lot of hard work by the parents, the teachers and the child.

'Caveat emptor' Remember, there has been little if any scientific testing of most of these therapies, and the few available reviews are quite mixed. In addition, leading mainstream critics of alternative therapy warn that the more exotic types are highly susceptible to quackery. Most of these treatments are unlikely to cause harm unless they are used as substitutes for proven therapies. However, they

may not be very helpful either. Because therapists are well-meaning and caring does not mean that the therapy actually does what is claimed.

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