



Tutoring, Treatment, or “Wait and See”?

By Linda Balsiger, M.S., CCC-SLP

What is the best course of action when children are behind in school? The answer varies, depending on the nature of the problem. Options include tutoring, professional treatment, or taking a “wait-and-see” approach. How can parents make this important decision and ensure their child is on the road to academic success? Let’s take a look at each of these options.

Tutoring: Tutoring is an educational service that provides 1:1 instruction and homework support for children who are behind in one or more academic subjects. It is similar to teaching, and approaches and materials are usually similar to those used in the classroom. Many former or current teachers work in the tutoring field, and it is advisable to seek a tutor who has current state certification. Tutors typically do not have the qualifications or certification needed to diagnose or treat learning or language disorders.

Treatment: Treatment is for children who have learning disabilities or disorders. These children are not just “behind”, but suffer from a recognized diagnosable learning disability. Examples include dyslexia, disorders of reading fluency or comprehension, and disorders of spelling or written expression. Disorders of reading, writing, and spelling are language-based learning disabilities, and children with these disorders don’t respond to standard instruction in the same way that other children do. They need explicit, intensive, multi-sensory instruction that is structured, systematic, and cumulative. Treatment for language-based learning disabilities is provided by a certified speech-language pathologist or other learning disabilities specialist.

Treatment involves remediation of identified skill deficits. The focus is on strengthening the underlying processing skills needed for success. For example, a person with dyslexia may have deficits in one or more of the following areas: phonological awareness, phonological memory, visual memory, auditory memory, rapid naming, or word retrieval. A person with a spelling disorder may be deficient in visual memory, visual sequential memory, phonological awareness/memory, or phonemic sequencing and encoding. These skills are directly addressed in isolation, as well as in the context of their application to reading or spelling.

Treatment is individually designed for each client. The process begins at the level needed to fill in gaps in skills, and proceeds systematically. Continuous monitoring and performance tracking ensures that treatment is delivered within a child’s “zone of proximal development”. Research shows that optimal learning occurs within this zone - where the work is neither too difficult nor too easy. Difficulty level and treatment targets are increased systematically based upon performance in each session.



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Wait and See: Some parents wonder if they should just wait and see if their child catches up over the course of a school year. If a child is just behind, it may well resolve itself over time. However, children with learning disabilities such as dyslexia rarely “catch up” without professional 1:1 intervention. Early intervention for these children is crucial. First and second grade is a critical time for skill acquisition, because in third grade the focus switches from “learning to read” to “reading to learn”. Research shows that most children whose reading skills are below grade level in third grade rarely ever catch up and read at grade level. Another major shift occurs in sixth grade, when the workload increases dramatically. Children who can read but have poor reading fluency (speed + accuracy) are overwhelmed by the academic workload once they enter middle school.

How to know what to do? If you suspect your child has a learning disability, an evaluation by a qualified professional is recommended. This will determine whether your child has a diagnosable learning disorder, or is just behind other children in their grade. If they are only behind, tutoring is appropriate. If they have a diagnosable disorder, treatment by a speech-language pathologist or qualified learning specialist is needed. This person should have specialized training and experience in evidence-based methods for the treatment of learning disabilities.

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