

EDUHEM 2018
VIII International conference on intercultural education and
International conference on transcultural health: THE
VALUE OF EDUCATION AND HEALTH FOR A GLOBAL,
TRANSCULTURAL WORLD

THE SITUATION OF DYSLEXIC CHILDREN IN ROMANIAN
INCLUSIVE SCHOOLS

Cristina Dumitru Tabacaru (a)*

*Corresponding author

(a) University of Pitesti, Eugen Doaga street, 11, Pitesti, Romania

*Email: cristinadummitru@gmail.com

Abstract

The article aims to present the situation of dyslexic children in Romania and the support available not only for them in schools but also for teachers and parents. The research was done under European project, MOOC DYS, with the financial support of European Commission. Dyslexia is not yet a recognised learning disorders by teachers, hence not approached accordingly in the learning environment. That is the main reason that a lot of children with dyslexia are not identified and there are many situations in which parents realize too late the difficulties their children are facing. In line with this issues, dyslexic children face other barriers including the lack of opportunities to engage in learning, extracurricular and social activities with their peers. Hence they are the most vulnerable students to drop-out school, as well as they are the students that Romanian educational system is losing on the way. The main conclusions regarding what should be done are: lack of background, experiences (everything is new to schools, teachers, parents); gap in knowledge, skills, attitudes (commitment, motivation, will) to perform on a working standard; failing in performing due to lack of support mechanism, techniques, or motivations.

© 2019 Published by Future Academy www.FutureAcademy.org.UK

Keywords: Assessment, dyslexia, inclusive learning environment, support.



1. Introduction

In Romania, it was only in January 2016 that the Education Law was supplemented with a provision targeting people with learning disabilities. Before that the DYS children were not recognised as a distinct disability. Most of the time. They were considered lazy, unmotivated, rebels, and they were vulnerable to the drop-out phenomena. So the situation of DYS people is very new to Romanian educational field and hence to parents, teachers, therapists and other professionals. Under the Law 6/2016 for the completion of the National Education Law no.1 / 2011, regarding the education of people with learning disabilities, it is for the first time recognized by the Romanian education legislation the existence of the category of dyslexic, dysgraphic, dyscalculic children. The Order 3124/2017 on the approval of Methodology to provide support for students with learning disabilities regulates appropriate assessment procedures for the detection of dyslexia, dysgraphia, dysorthography and dyscalculia, as well as the type of intervention to provide personalized and individualised learning for them. In the Romanian law there is no such disorder as dyspraxia or dysphasia, under the spectrum of learning disorders, although it is recognised that the majority of dyslexics have characteristics of dyspraxia. We are talking about a category of children who have been in a shadow of decades for too many things, both among the teachers and the community they belong to. Before that the DYS children were not recognised as a distinct disability. So the situation of DYS people is very new to Romanian educational field and hence to parents, teachers, therapists and other professionals.

2. Assessment and diagnosis process of learning disorders in Romania

In Romania the main problem is that there is no screening at the beginning of the 1st grade for all children (important period as main objective of the child activity is learning, learning to read and write), hence the difficulties of each one cannot be identified by the specialists. Children are tested by a speech therapist, but not specifically for dyslexia. That is the main reason that a lot of children with DYS are not identified and there are many situations in which parents realize too late the difficulties their children are facing. On average, in a year, specialists see 650 children in schools and 75 children in the office (according to a research done within a project of *Asociația Română pentru Copii Dislexici, Târgu Mureș* branch, funded by *OMV in 2011*, <http://dislexic.ro/>) The study showed that about every 6 child that requested an evaluation has dyslexia. This may mean that diagnosis is more accurate than in previous years, or that the number of dyslexic children is on the rise.

In Romania, currently, detecting, examining children with symptoms or predisposition to dyslexia, or other lexical-graphic disorder comes under the competence of speech therapists. Parents, educators, teachers are, however, those who spend the most of their time with children, having the chance to better observe the behaviour and performance of their children. Being aware of this, they can quickly turn to the help of the speech therapist, thus contributing to early detection and provision of therapeutic intervention appropriate to the child (Hall, 2009) Most often the consequences of dyslexia impact on the education of the child in a very overt way. The child will display slow learning, development which is different from most other children. There are a number of educational interventions that can be useful in helping the dyslexic individual. Some of these are direct treatments, while others involve providing accommodations to the learning environment (Łodygowska, Chęć, & Samochowiec, 2017).

With regard to assessment and diagnose instruments, the institution with some background and various actions in this field is The Laboratory of Interdisciplinary Research of Inter-Individual Differences in Learning under the University of Babeş-Bolyai, Cluj. Through some projects like Effects of spelling on phonological processing ability on writing: a comparison between Romanian and French speakers; The role of screening the callous unemotional (CU) traits in scientifically based educational practices for young children with / without intellectual disability; Working memory deficiency in specific learning disorders in mathematics some assessment tools of reading skills were developed and/or adapted:

- **MT-2. Reading Tests MT-2** (Cornoldi & Colpo, 2011) - Prof. univ. PHD. Adrian Roşan, principal investigator
- **DDE-2 Evaluation Dyslexia and Development Disgraphia Battery** - DDE-2 (Sartori, Job, & Tressoldi, 2007) - Prof. univ. PHD. Adrian Roşan, principal investigator

The instruments mentioned above are in the process of validation and testing and they are not used in mainstream schools yet.

Assessment and evaluation procedures are undertaken under the Order 3124/2017 on the approval of Methodology to provide support for students with learning disabilities. It regulates appropriate assessment procedures for the detection of dyslexia, dysgraphia, dysorthography and dyscalculia, as well as the type of intervention to provide personalized and individualised learning for them. The countries models of the present methodology were Italy and France. According to the national law students affected by learning disabilities can acquire general and specific skills required by the national curriculum.

Children with learning disabilities in Romania receive two types of assessment: in order to diagnose pupils with learning disabilities in Romania, there are some steps to undertake:

- a) Psycho-pedagogical assessment which is mandatory and is undertaken to establish the level of school performance of the child according to national curriculum; to determine the impact of the functional deficit in following areas: reading, writing or mathematical calculus; to identify appropriate learning strategies in order to support students learning; to identify students' resources.

The aim of psycho-pedagogical assessment is for an early detection of learning disabilities and usually is made by the classroom teacher on the basis of methodological tools for identifying students at risk of being diagnosed with specific learning disabilities, according to Annex no. 1 of the above-mentioned Order.

To be able to efficiently determine students at risk of having DYS, there is an urgent need to prepare and equip teachers with necessary information, tools, strategies, methods to recognise, identify and support DYS students.

- b) Complex evaluation which is performed by specialists (psychologists / teachers, school counsellors, speech therapists, doctors, etc.) accredited according to the law, in order to establish the diagnosis. The complex evaluation is performed using various methods and psychometric instruments (tests, samples, questionnaires, scales, etc.), standardized and validated according to the legislation in force. The evaluation process of assessing students for DYS detection includes:

- *Psychological evaluation* - involves the assessment of the neuro-cognitive functioning profile (IQ: verbal, non-verbal, total), behavioural, emotional and motivational-affective profile, as well as

adaptive working skills. The psychological evaluation may include as well as attention assessment, investigation of memory, sensory-motor and visual-space functions, language, skills of phonological processing and other cognitive functions involved in the learning process.

- *Speech and language evaluation* - involves the evaluation of **oral language** (phonological, lexical-semantic, morpho-syntactic and pragmatic components), **written language**: *reading* (accuracy expressed by number and type of errors, fluency in reading and understanding of the text read), *writing* (grapho-motor, visual and spatial component of the writing, spelling, punctuation, types of errors in writing and their frequency), *numbers and calculus* (reading and writing of numbers, correspondence between number and quantity, numerical sense, non-symbolic quantitative comparisons, accuracy and fluency in calculation operations, both in algorithm execution and in updating automated results, use and understanding of mathematical language, mathematical reasoning).
- *Medical evaluation* is performed, as appropriate, for differential diagnosis: psychiatric and neurological assessment, ophthalmic evaluation, otorhinolaryngology assessment.

The complex evaluation is carried out in accordance with the provisions of the ICD10 and DSM5 diagnosis manuals and determine the type of specific learning disorder as well as the level of severity (light, moderate, severe). The diagnosis of dyslexia, respectively the diagnosis of dysgraphia, is usually established in 2nd grade, after students have learned all the letters. The diagnosis of dyscalculia is usually sets in class III. Children diagnosed with one of DYS disorders receive a diagnostic certificate, specifying the level / degree of severity. Reassessments are carried out annually, in order to reevaluate the degree of severity of Dys disorder and to adapt the intervention, as well as to avoid situations of granting dispensing and compensating tools for wrongly diagnosed children.

3. Statistics regarding DYS problem

There are no official statistical data with regard to the number of children with Dys in Romania. There are, however, a few regional researches (Cluj, Bucharest) done within a Doctoral Research (Barth, 2008). *Intervention programs for children with learning difficulties* (Fernani et al., 2013) and a project Go to reading (Adlof, Scoggins, Brazendale, Babb, & Petscher, 2017) which suggest that about 4 out of 10 children surveyed by a specialist are dyslexic. Of these, 40% are between 5 and 8 years old, and 60% of them between 9 and 11 years. At the same time, the interviewed teachers said that they had on average 3 dyslexic children in a class. The percentage of dyslexic children in European countries may vary from 6 to 10%. Romania is probably in between the percentage of European statistics. In almost every class there is at least one dyslexic.

4. Problem Statement

The study was done to evaluate the situation of dyslexic children in Romanian schools. Dyslexia is not yet a recognised learning disorders by teachers, hence not approached accordingly in the learning environment. That is the main reason that a lot of children with dyslexia are not identified and there are many situations in which parents realize too late the difficulties their children are facing (Pierangelo &

Giuliani, 2008). In line with this issues, dyslexic children face other barriers including the lack of opportunities to engage in learning, extracurricular and social activities with their peers. Hence they are the most vulnerable students to drop-out school, as well as they are the students that Romanian educational system is losing on the way.

5. Research Questions

In 2017, Ministry of Education formally recognized the condition of dyslexia for the first time and has subsequently developed a law and a definition of the condition of DYS. The aim of this article is to answer to the implications for learning, teaching and support for students, teachers and parents. There are a number of educational interventions that can be useful in helping the dyslexic individual. Some of these are direct treatments, while others involve providing accommodations to the learning environment. The present research identified the support and resources already available and point out the needs to be still addressed.

6. Purpose of the Study

The article aims to present the situation of dyslexic children in Romania and the support available for them in schools but also the support for teachers and parents. Goal of the research accomplished in the period of October 2017 – February 2018 was to evaluate the efficiency of practices and support available for children with DYS in Romania. In order to achieve the goal, we were guided by the following objectives:

- Selection of methodological investigative tool
- Sample research forming
- Qualitative and quantitate analysis of obtained results in order to identify the following steps to undertake to facilitate the inclusion of DYS students in learning environment

7. Research Methods

In order to answer to research questions, we begun with studying what has already be done in the DYS field by other researchers, institutions, organisations.

In order to have a complete registration of obtained data we asked the opinion of respondents (primary teachers and parents of children with DYS) with regards to what information they have with regard with what DYS is, what are the educational needs of students with DYS, where they can find support and resources to facilitate the inclusion of a DYS child. Also, we were interested in the opinion of stakeholders that can influence producing changes in the smoothing the process of implementation of The Law. Methodological investigatory tool used during the research consisted of different methods: classical methods of social investigation. For this reason, were elaborated some questionnaires, addressed to teachers working with DYS students, parents of children with DYS, school managers, representatives of Local Public Authorities, county department of education. In order to complete the obtained information with the help of questionnaires we appealed to observation as a method of research, to study the reality of DYS students in educational and learning environment. So, to achieve the proposed research objectives, we have used as working methods: observation, interview, and SPSS Program for data analysis.

8. Findings

In the opinion of the majority of interviewed teachers, dyslexic children need more attention than other children. More than 70% of teachers have noticed that their dyslexic students experience frustration or fear, and the majority of specialists believe that lack of specific teaching methods and lack of therapeutic programs can lead to self-isolation, low self-esteem, and dyslexic child discrimination over time. 80% of the interviewed parents said that they tried to contact a speech and language therapy for their dyslexic child but there are insufficient services available and the average time offered is one hour per week which is definitely insufficient. once a week. The main reasons identified during interviews, for this situation are lack of money, lack of time and insufficient information among parents, as the study shows. The findings show that by therapy 60% of dyslexic children from the sample significantly improve reading disorder and quality of life until the end of the primary school. But although 68% of specialists recommend more hours of therapy (higher than once a week), only 43% of them say that dyslexics even do therapy a few times a week. The findings show that 63% of the dyslexic children have, in addition to reading disorder (dyslexia), writing disorders (disgraphia) and 45% and calculus disorders (dyscalculia).

Although, there are a lot of schools in Romania that are not equipped with information and necessary tools to include DYS students. In our country the first national research on dyslexia was carried out by the Romanian Association for Dyslexic Children (ARCD) and OMV. The study was conducted to find out the incidence of this disorder in Romania and among children up to 11 years old. At the same time, it aimed at identifying the difficulties encountered by parents, teachers and specialists in finding the best solutions to support them, thus helping the dyslexic children in Romania. Among the population there was an incidence of 25 cases per 10,000 households, as only 15.5% of Romanians heard of dyslexia. This study has managed to capture the reality we face in the therapy of dyslexic children. Because of this, the study revealed the urgent need to train Romanian specialists and develop standardized tests to diagnose dyslexia. Many parents do not know they have dyslexic children, or children are not diagnosed, although they have all the symptoms of this disorder.

Although, there is a law which allows children to benefit from several measures to support their learning, the actual situation in schools is far from being effective. Parents don't have information on how to have access to that, teachers don't have information and specific training on how to make accessible their teaching and how to efficiently and effectively include the Dys child in the learning. Besides, school activities, Dys children are in need to see a therapist which could help him/her overcome some DYS difficulties. Those after school therapeutic programs are not available for parents unless parents would find a private therapist and even so there is a shortage of good therapists for Dys students. Every Dys child should benefit from a specific therapy through which he/she could manage to compensate DYS issues.

With regard to teacher training, they need to be provided with necessary information on the specificity of learning disabilities; with knowledge of the characteristics of each specific learning disorder; the main tools the school can use for early detection and warning of the risk of DYS; educational and didactic strategies for development and compensatory aid; how to manage a class with pupils with DYS; appropriate forms of verification and grading; ways of applying the teaching and educational measures provided in the PEP; forms of guidance and support for the follow-up of studies; ways of collaborating of teachers with student's family and other professionals.

9. Conclusion

The main conclusions of the research are to address the issue of lack of background and experiences of schools, teachers and parents, to reduce the gap in knowledge, skills, attitudes of professionals working with DYS students, to develop support mechanism, techniques, or motivations. The findings of the research allowed us to draw some recommendation with regard to things to be done like developing screening and detecting children at risk of DYS instruments, elaborate prevention and early intervention services for DYS children, develop of national assessment tools for diagnosing of DYS children, invest in the school infrastructure and facilities for DYS students, to train teachers (knowledge, skills, attitudes, building the gap between existing and required competencies), to organise therapeutic services for DYS students aiming specific difficulties due to learning disorders (speech and language therapy, psychomotricity etc., to develop resources centres within schools for DYS students and a network of Support teachers responsible with the elaboration of PEP and adapting the learning according to the needs of students, to offer training and support services for parents.

References

- Adlof, S. M., Scoggins, J., Brazendale, A., Babb, S., & Petscher, Y. (2017). Identifying children at risk for language impairment or dyslexia with group-administered measures. *Journal of Speech, Language, and Hearing Research, 60*(12), 3507-3522.
- Anexă la Omen (2017). *Metodologia pentru asigurarea suportului necesar elevilor cu tulburări de învățare*. Bucurest, Edu.ro. Retirved from: https://www.edu.ro/sites/default/files/Anexa%20OMEN%20nr%203124_TSI.pdf
- Barth, R. P. (2008). The move to evidence-based practice: How well does it fit child welfare services? *Journal of Public Child Welfare, 2*(2), 145-171.
- Cornoldi, C., & Colpo, M. (2011). *Prove di Lettura MT-2 per la Scuola Primaria*. Firenze: Giunti OS.
- Fernani, D. C. G. L., Prado, M. T. A., Fell, R. F., Dos Reis, N. L., Bofi, T. C., Ribeiro, E. B., & de Mello Monteiro, C. B. (2013). Motor intervention in children with school learning difficulties. *Journal of Human Growth and Development, 23*(2), 209-214.
- Hall, W. (2009). *Dyslexia in the Primary Classroom*. Glasgow: Learning matters.
- Łodygowska, E., Chęć, M., & Samochowiec, A. (2017). Academic motivation in children with dyslexia. *The journal of Educational Research, 110*(5), 575-580.
- Pierangelo, R., & Giuliani, G. (2008). *Teaching Students With Learning Disabilities. A Step-by-Step Guide for Educators*. California: Corwin Press.
- Sartori, G., Job, R., & Tressoldi, P. E. (2007). DDE-2. *Batteria per la valutazione della dislessia e della disortografia evolutiva (Battery for the assessment of developmental dyslexia and dysorthographia)*. Firenze: Giunti OS.