



— Dr. Astrid Kopp-Duller

— Livia R. Pailer-Duller

Dyslexia

DYSCALCULIA!?

The importance of pedagogical-didactic assistance in cases of dyslexia, dyscalculia, and other problems in reading, writing, and doing arithmetic.



Astrid Kopp-Duller

Livia R. Pailer-Duller

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For people with dyslexia:

There are short side notes printed in boldface on the lateral margins of the pages in this book that summarize the text beside them. People with reading difficulties should find this helpful as they work their way through the book.

Our gratitude goes to...

⇒ The hundreds of children who struggle with difficulties in reading, writing, or doing arithmetic with whom we had the opportunity to work, whose suffering at school touched us, and whose skills deserve our admiration.

⇒ Lena and Alexander, who try with all their might to master their reading and writing difficulties in order to meet school requirements, who have never given up, and who have learned to muster much understanding and tolerance towards their fellow human beings in order to forgive them so much injustice.

⇒ And to all the people who have contributed so this book could take its present form.

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© 2010 **Dyslexia Research Center USA**

442 S. Tamiami Trail
Osprey FL 34229-0374
USA

Email: office@dyslexia-research-center.com

Internet: www.dyslexia-research-center.com

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Mario Engel, Manfred Pailer

Photographs: Livia R. Pailer-Duller, Manfred Pailer

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Preface

The book entitled “**The Dyslexic Person**” first appeared more than ten years ago. It fundamentally provided a general overview of the problems of people who are unable to learn how to read, write, and do arithmetic, for various reasons, by means of common educational methods. This work, widely distributed in a great number of countries all over the world, has contributed decisively to a better understanding of the problems of people who have difficulties in reading, writing, or doing arithmetic.

The main emphasis of this book lies on the description of the support at a pedagogical-didactic level by means of a scientifically proven method, which is the result of many years of empirical research. This book clearly and logically shows the often neglected, and even underestimated importance of pedagogical-didactic support by experts in the pedagogical area in the case of difficulties in reading, writing, or doing arithmetic.

Another emphasis of this book is the description of a very important transformation process that started a couple of years ago and still continues: namely the fact that our society has begun to recognize that difficulties in reading, writing, and doing arithmetic based on common educational methods do not automatically imply a disease, a kind of mental disability, or any form of dysfunction. Indeed, other methods are necessary in order to make up for these difficulties. This book clearly shows that analysis and support at a pedagogical-didactic level are essential and must be carried out before any other specialists are involved.

Physicians were the first to take an interest in determining why some people have difficulties in reading and writing. Of course, one might think that these difficulties should not automatically be considered a disease. However, the results of the pathologizing

which was started by physicians, and which led to the wrong interpretation that children with difficulties in reading and writing are sick, can still be felt today. Due to a possible lack of pedagogical knowledge, physicians have never considered that difficulties in reading and writing could also be the result of the lack of an adequate pedagogical methodology. Even ten years ago, hardly anyone questioned why one was sent to a doctor or a psychologist instead of a pedagogue in the case of difficulties in reading and writing, even though this should have seemed obvious. Instead, it had become natural to regard people with difficulties in reading, writing, and doing arithmetic as being sick. Teachers turned out to be partially ineffectual, while psychologists and doctors used their own therapeutic methods, often with little success.

What people failed to realize clearly enough, or too often forgot was the fact that no therapy carried out by a health professional can replace well-directed, individual training by a pedagogue in the areas of reading, writing and arithmetic!

Fortunately, reason has prevailed against past custom. People have become aware of the fact that long-lasting success can only be achieved if a person with difficulties in reading, writing, and doing arithmetic gets individual support, adapted to their special needs, from specialists in the pedagogical-didactic area. Today, there are a number of pedagogues with extensive knowledge who can help these people deal with their problems. This was not the case ten years ago. Teachers now are considered to have enough knowledge in this area to be able to provide help.

However, let us turn back to the past – to the moment when the disaster for dyslexic people began. In those times, there seemed to be an understanding of why some people dealt differently with reading and writing than the majority. Likewise, nobody would have hit upon the idea of considering these people to be

sick, particularly since these people were often noted for other remarkable skills.

People used a simple writing style then, and it was considered “normal” that people spelled the words differently, but meant the same thing. What mattered was only the fact that the reader was able to understand the content of what was being read. In fact, in earlier centuries, few people had the possibility to even learn how to read and write. This did not change until Empress Maria Theresa (1717 – 1780) established the primary school system in Greater Austria. Her aim was to enable common people to learn how to read, write, and calculate. With the introduction of spelling rules for the German language by Bartholomä Herder (1774-1839), who, in 1801, founded a publishing house and bookstore which specialized among other things in “reference works”, and by Konrad Alexander Friedrich Duden (1829-1911), who published a “Complete orthographical dictionary of the German language” in 1880, it became apparent that there were people who were not able to follow these spelling rules precisely.

The first researchers dealing with the phenomenon of dyslexia were physicians of the late 19th century. As a result, for a long period of time, people considered (and still consider) dyslexia a disease. Unfortunately, even the World Health Organization (WHO) still defines dyslexia as a disease. However, dyslexia and dyscalculia are not diseases, nor impediments, disorders, or weaknesses. In fact, people with dyslexia or dyscalculia simply cannot cope with the common school methods of learning how to read, write and calculate, but need other methods specially adapted to their individual needs.

Later, psychologists and sociologists began to show interest in the issue, further intensifying the pathologizing of dyslexia. However, the essential role of pedagogues and of the pedagogical-didactic support given to people who have problems with the so-called

“cultural techniques” has been approved in the last few years. This is most likely owing, in part, to the logical conclusion that people with dyslexia or dyscalculia can only learn to read and write with pedagogical-didactic assistance and not with any unrelated form of therapy.

In fact, in order to learn how to read, write, and do arithmetic, dyslexic people simply need individualized and special methods that exceed the common teaching methods at school. It is estimated that about 15% of the world’s population are affected by dyslexia.

People with dyslexia and dyscalculia should definitely be supported first in the pedagogical-didactic area, since only a pedagogue is fundamentally trained in teaching how to read, write and do arithmetic. A pedagogue can be beneficial even to people who have certain difficulties and thus special needs in these areas. For these reasons, researchers working in the pedagogical area have developed and optimized test procedures and methods that are adapted to the special needs of dyslexic people. Viewing these people as poor learners, as disturbed, sick, or even handicapped is quite foolhardy. This may well serve a deeper purpose in the case of psychologists and doctors, since they can only intervene when the symptomatology of a disease is in question. The formulation of the WHO (World Health Organization) as given in the ICD-10 (International Classification of Diseases), should perhaps also be interpreted in this way. With it, health professionals merely secured for themselves the exclusive right to provide therapy, a right which they understandably wish to keep. The need for a pedagogical intervention in the case of dyslexia or dyscalculia is not even mentioned!

It would be better for the ICD-11, which will replace the ICD-10 in 2011, to show clearly that this description is lacking. The

WHO should react accordingly and arrive at a more intelligent description of this problematic issue. It cannot be the case that, in the description for people with difficulties in learning how to read, write, and calculate – problems that fall under different intervention levels depending on their manifestation – the profession that is fundamentally responsible for people learning to read, write, and do arithmetic does not appear in the series of intervention levels.

The World Health Organization should by all means point out that there are difficulties in reading, writing and doing arithmetic, such as primary dyslexia and primary dyscalculia, which do not have a pathological origin and which fall exclusively in the pedagogical-didactic area of analysis and intervention; otherwise the new definition should be regarded as incomplete and, hence, as worthless.

All groups of professionals that are involved, regardless of their priorities, should respect dyslexic people, provide them the necessary support, and avoid burdening them with questions of competence, since we are dealing with human beings.

One of the reasons for the intensive research carried out in the pedagogical area is the still common procedure by health professionals of using reading, spelling and intelligence tests to determine the presence of dyslexia. However, these are instruments that fail to determine dyslexia or dyscalculia; indeed, too many have led and continue to lead to wrong diagnoses. Many IQ tests determine intelligence by testing sensory perception. Such test results are not trustworthy, since in the case of dyslexia, sensory perceptions develop differently for neurobiological reasons – this, as already emphasized, has nothing to do with one's actual intelligence. Similarly, the reading and spelling tests, also favorite instruments of psychologists to determine the presence of dyslexia, are not convincing in the case of dyslexia

or dyscalculia. The reading and writing performance of dyslexic children are not constantly deficient as is the case with children who have an acquired reading and spelling deficiency; instead, it depends on their particular disposition at the moment. This can be confirmed by countless examples. Dyslexic children can occasionally perform astonishingly well in reading and spelling tests.

The AFS-Test Procedure (AFS is short for attention, function, symptom) and the AFS-Method have already been described as milestones of pedagogical research. They constitute a significant contribution to the individual support of dyslexic people at a pedagogical-didactic level, and they contribute decisively in helping people with dyslexia and dyscalculia to learn to read, write and do arithmetic. The research results presented in this book of a long-term study of the AFS-Method offer a comprehensive view of its effectiveness.

It is very degrading for people with dyslexia or dyscalculia to always be treated by ignorant people as peculiar or, even worse, stupid.

It would be more than desirable if this newly trodden, modern path – the recognition of the necessity and importance of pedagogical-didactic support of pedagogues who are specially trained in helping people with difficulties in reading, writing and arithmetic – continues to be followed, and that dyslexic people are first supported in the pedagogical area, because in this way people can deal with the problem at its roots. Success can only begin at this point.

October 2010

- ◇ **The importance of pedagogical-didactic assistance by specialists who offer help in the pedagogical-didactic area.**
- ◇ **Success through interdisciplinary cooperation, psychologists and doctors alone cannot be effective.**
- ◇ **Well-trained pedagogues help children with their reading, writing and arithmetic difficulties.**
- ◇ **Spelling is a human invention.**
- ◇ **Historical definitions as a source of frequent misperception: difficulties in reading, writing and doing arithmetic were originally perceived as a disease.**
- ◇ **Pedagogical-didactic research makes great advances.**
- ◇ **Outdated description of the WHO in the ICD-10.**
- ◇ **Intelligence tests and reading and spelling tests cannot determine the presence of dyslexia or dyscalculia.**
- ◇ **AFS test procedure and AFS method are milestones of pedagogical research.**
- ◇ **Help at the pedagogical-didactic level in the first place.**