

Children With Reading Difficulties

How Occupational Therapy Can Help

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Reading is not simply an activity for gaining knowledge—it's a transactional activity that people engage in to perform many roles, such as student, employee or employer, and leisure participant (Rosenblatt, 2013). The reader engages with a task object, the reading medium—for example, a book, iPad, or food package. The engagement occurs in a context such as at school, home, or in the community; alone or with others. During the engagement in reading, many variables affect participation, including motivation, interest, attention, skills required to perform, familiarity with the material, preference, and self-efficacy. During the entire engagement or transaction, performance breakdown may occur. For example, at school, a child may not feel efficient in reading with a group of peers, be slow compared with others, feel a high level of anxiety, or have very short attention to structured reading.

Developers of the new edition of the *Diagnostic and Statistical Manual of Mental Disorders* (American Psychiatric Association, 2013) replaced the terms *dyslexia* and *reading disorders* with *specific learning disorders with impairments in reading* to emphasize the more global academic, occupational performance, and daily living impacts of difficulties with reading. With this general move from a skill-deficit to a performance-deficit approach to diagnosis, there is greater understanding of the need to approach and understand reading beyond skills acquisition.

Occupational therapy, with its holistic approach, can provide a distinct perspective on addressing reading. The reading specialist, classroom teacher, and speech therapist are trained in



addressing the skill of reading. Occupational therapy in reading intervention goes beyond developing reading skills with the different focus of increasing engagement in reading as an occupation, so that the child is able to use skills learned more effectively and efficiently.

How can occupational therapy practitioners help support children who struggle to read, dislike reading, and perform poorly at school? How can they ensure that their support for reading intervention is within the domain of practice? A practice model called the Occupation of Reading, developed by lead author Lenin Grajo and guided by the Theory of Occupational Adaptation (Schkade & Schultz, 1992), prescribes a multidimensional approach to reading intervention that can be implemented by practitioners today, using the five following basic steps.

1 Emphasize participation and engagement.

Let the child choose the material to read and the goals that need to be

mastered. Aim intervention toward reading as an occupation. Where and when does the child want to read? What does the child want to read—books (in print or electronically), game instructions, text messages, maps? Participation and engagement increase when goals are meaningful. Incorporate reading activities in various play, arts and crafts, and daily living tasks. The Occupation of Reading practice model assumes that when a child engages and participates in meaningful reading activities, learned reading skills are used more often, the child feels empowered to read, and reading skills get transferred and generalized to various contexts.

2 Foster self-generation of strategies.

During actual engagement in reading, do not correct. Ask; do not tell. Let the child figure out his or her mistakes. Ask questions that will let the child figure out sources of breakdown, and let the child develop corrective strategies. Ask the child to create a fun name

for the strategies he or she has explored. For example, one effective strategy often used is for the child to point at the words as he or she reads them. One child called this “silly pointer fingers.” When children form and name their own strategies, the strategies become personalized and more meaningful and are more likely to be used, compared with strategies named and taught by the practitioner (Polatajko & Mandich, 2004). Practitioners need to avoid direct instruction. School-aged children receive hours of direct instruction from teachers, tutors, and their parents. In occupational therapy for reading, the child needs to feel in control of achieving his or her goals.

3 Use various contexts.

Context provides opportunities for transferring and generalizing skills. Children read at school, at home, and in communities. Facilitate the use of academic, leisure, and functional reading in various contexts. Reading activities can include homework, reading from a computer game, or reading recipes for cooking. Allow many opportunities for practice, use of strategies, and transfer. Incorporate academic reading goals into multisensory, game-based activities. Let the child create various contexts in which reading can be routinely, naturally, and actively a part of his or her therapy and daily repertoire of activity choices.

4 Collaborate with parents and teachers.

The best way to monitor increase in participation and improvement in meaning construction in the reading process is through collaborating with parents and teachers. Ask the parents to use a journal to log and reflect on how often the child initiates and participates in reading, aside from doing homework. Children can be encouraged to keep a journal as well—about their reading but about themselves. Ask the teacher for any observations about increase and decrease in confidence and actual performance in various forms of reading. It is important in the collaboration process that parents and teachers are allowed to be creative and in control of their child/student’s progress in “their” own contexts. Practitioners should

avoid assuming the “expert” role. Teachers provide reading instruction from day one of class. Parents have been reading to their children since they were little. They are the experts of their own contexts. The therapist needs to facilitate and discover with parents and teachers various ways to monitor increases in reading engagement, particularly child-initiated reading activities.

5 Facilitate mastery and competence.

The child needs to feel an increase in mastery and competence. Adjust task difficulties. Break down tasks. Introduce small chunks of reading, and gradually progress into more complex, more meaningful activities. Small victories can become huge successes. When children feel empowered and successful, even at identifying their own mistakes, they feel responsible for their progress.

Conclusion

Occupational therapy practitioners can play an essential role in supporting the reading intervention team, teachers, and parents in helping support children who struggle to read. The advantage occupational therapy has among other professions is our understanding of the child in a holistic, multidimensional, and context-specific manner. Occupational therapy practitioners working with children with reading difficulties must not be limited to addressing visual-perceptual, cognitive, and sensory processing skills that contribute to reading challenges. Using an engagement and participation perspective—including allowing choice in reading occupations, autonomy in problem-solving reading challenges, incorporating the support of parents and others, and emphasizing mastery—can optimize the reading environment. Through these techniques, practitioners can support individual students as well as entire classrooms during reading time (American Occupational Therapy Association, 2010), contributing to individual success in relative terms and in meeting Common Core standards (www.corestandards.org).

The end result? Increased motivation and perceived feelings of self-mastery as well as greater engagement in academic,

leisure, and functional reading at school and home, and in the community. ■

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