

The Weekly Newsmagazine of Science

A Science Service Publication Volume 141, No. 19, May 9, 1992

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SCIENCE NEWS (ISSN 0036-8423) is published weekly on Saturday, except the last week in December, for \$39.50 for 1 year or \$68.00 for 2 years (foreign postage \$6.00 additional per year) by Science Service, Inc., 1719 N Street, N.W., Washington, DC 20036. Second-class postage paid at Washington, DC, and additional mailing office. POSTMASTER: Send address changes to Science News, 231 West Center Street, Marion, OH 43305. Change of address: Four to six weeks' notice is required — old and new addresses, including zip codes, must be provided.

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Editorial and Business Offices: 1719 N St., N.W., Washington, DC 20036 (202-785-2255)

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Subscription Department: 231 West Center Street, Marion, OH 43305 For new subscriptions only, call 1-800-247-2160. For customer service, call 1-800-347-6969.

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Cover: The human lung's intricate shape, as seen from this rubber cast, has amazed scientists for centuries. Recently, a mathematician and a bioengineer teamed up to model the lung's physics and physiology on a computer in order to understand where inhaled pollutants wind up. This information, they say, will help them predict the health effects of various pollutants. (Photo: Quesada/Burke Photography)



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Letters

Averting a battle

I would like to add my voice to those who have questioned the implications of the Yale Medical School-based study of dyslexia (Letters, SN: 3/14/92, p.163). The Yale study sets the stage for a battle between those who think dyslexia is a biologically based disability and those who maintain it is something children may naturally outgrow. We need to stop this conflict before it goes any farther, because the outcome could be less support for some of the nation's most troubled learners.

The study's finding that dyslexia "occurs in degrees as part of a normal continuum of reading abilities" seemed to show that the disorder diminished over time, with only 28 percent of children diagnosed as having dyslexia in the first grade so classified in the third grade. If dyslexia is the lower end of a normal range of abilities, and may diminish over time, the study could lend support to a growing

movement to curtail support programs for the learning disabled. This would be a mistake.

The work of me and my colleagues with dyslexics indicates that this learning disability, if correctly diagnosed, cannot be grown out of; it can only be strategized around. To be empowered, students need to become aware of their unique learning strengths so that they may apply them effectively while strengthening the lagging areas.

There are many causes for beginning readers' difficulties. For some students, the American schools' expectation that all children begin to decode letters on the printed page in the first grade is the real problem. About 10 percent of first graders are just not ready to recognize, label and match our alphabetical letters to their sounds, nor to write those letters so that others may read them successfully.

Was there any attempt to incorporate teachers' behavioral observations into the Yale study's diagnostic criteria? Teachers familiar with the true dyslexic usually know of a related

family history of language disorders, and notice confusion in the orientation of the presented letters reading from right to left. They are also sensitive to the failure to see and hear similarities in letters or words and the inability to pronounce unfamiliar words.

What is the place of "getting the message" in our diagnostic measures of reading? Broadening and deepening of the criteria used by the Yale researchers might well have lowered the number of children in their sampling diagnosed as dyslexic based on the criteria of standardized testing.

Though I respect the work of these researchers laboring quantitatively and urge its continuance, I hope the qualitative knowledge of practitioners will be sought to enrich their work. Such teaming, I believe, would reverse the spirit of potential battle created by this study.

Gertrude M. Webb, Director Curry College Program for Advancement of Learning Milton, Mass.

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