

AFFORDABLE RESOURCES FOR LEARNING DISABILITIES DIAGNOSIS FOR ADULTS

By Patti White

**Bridges Disabilities Manager,
Arkansas Adult Learning
Resource Center (AALRC)**

In 1992, the Department of Labor released a report, *Learning Disabled in Employment and Training Programs*, which stated that 50-80% of adults in ABE programs may have one or more specific learning disabilities, and many have never been diagnosed. As state adult education programs have tried to address this issue through a process of screening, one barrier continues to emerge nationwide, where to find affordable diagnosis for adults who fail learning disabilities' screening.

Most diagnosticians charge \$120/hour or more for a complete diagnosis, and a complete diagnosis usually takes 3-6 hours. Furthermore, if the student's goal is to pass the GED Tests and obtain a State of Florida High School diploma, the diagnosis must include all tests that are required by the GED Testing Service for completion of Form L-15, the official Accommodation Request for Learning Disabilities and/or Attention Deficit Hyperactivity Disorder. The ABE program or service provider should confirm that the diagnostician's battery of tests includes those that are required on the L-15 prior to making any referrals. Any student who is referred for a learning disabilities diagnosis and is also working towards a GED should take a copy of the L-15 with them for the diagnostician to complete.

There are several options available, but services vary from state to state. Individual eligibility for certain programs is also a factor, so be aware that referrals for diagnosis must always be addressed on an individual basis. But here are some possibilities that are worth checking out.

➤Rehabilitation Services sometimes provides LD diagnosis as part of their intake procedure. There is no charge for

the diagnosis, but in most states, persons referred to this agency must be unemployed and willing to get a job.

➤Medicaid covers LD diagnosis, so if the hospital or office will accept Medicaid, it should be covered.

➤Colleges and universities that have graduate programs in psychology sometimes do LD diagnosis on a sliding scale. The tests are conducted by graduate students and the professor signs off on the forms to verify correct procedures and conclusions.

➤State mental health centers often provide LD diagnosis, also on a sliding scale.

➤Private psychologists will sometimes provide LD diagnosis for a reduced fee or even pro bono. Be sure that he or she has experience in diagnosing adults, and not just children.

➤If the student is a TANF (Transitional Assistance for Needy Families) client with the local Human Services agency, there is often funding available if the suspected learning disability is perceived as a significant barrier to employment.

➤The Veterans Administration Upward Bound Program will sometimes provide funding for LD diagnosis for students who are also veterans.

The single best approach for finding affordable diagnosis in a particular city or region is to personally contact possible diagnosticians and agencies and discuss the referral process. Give them a copy of the L-15 if you are referring GED students who may have learning disabilities. By making personal contact, you will be able to compile a comprehensive list of affordable diagnostic services in your area and know that you are referring your student to a diagnostician who has experience working with adults.



BRIDGES SPECIAL REPORT

By Patti White

The Florida Department of Education will receive \$21,125 in FY 2001 from the Arkansas Adult Learning Resource Center to conduct the interagency Bridges to Practice training. Florida's commitment to providing appropriate and effective services for adults with learning disabilities and promoting interagency collaboration is applauded, not only by the AALRC, but also by the National Institute for Literacy (NIFL), which has made this project possible.

The funds will be used to conduct the Bridges to Practice Interagency Learning Disabilities Training under the auspices of the Division of Workforce Development, Adult Education Services. This includes the provision of materials for one train-the-trainer session, training expenses for the expansion of the existing Bridges to Practice professional development project in Florida and operational expenses for the state advisory committee. Patti White, Disabilities Project Manager for the AALRC, will conduct the train-the-trainer session in June 2001. Local training sessions are tentatively scheduled for July through September 2001.

Patti White is the Disabilities Project Manager for the Arkansas Adult Learning Resource Center, and provides training and resources to adult educators, literacy providers and other state agency personnel. She has been in the field of learning disabilities since 1994. As project director for one of the National Institute for Literacy's Bridges to Practice Hubs, she has trained approximately 1,000 service providers in how to provide effective and appropriate services for their adult students and clients who have learning disabilities. Patti has also trained 65 professionals from the southern United States to conduct the Bridges to Practice training in their own states, including three educators from Florida.

Bridges Future Training Dates:

March 30th - Broward County
May 18-19 - Miami-Dade County

The next issue of Practitioners' Points will focus on Instructional Planning.

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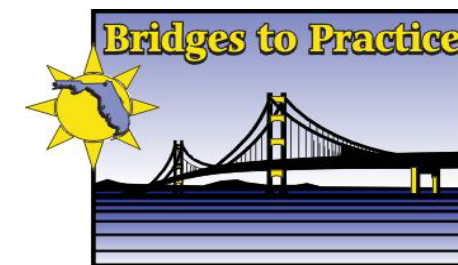
Visit our new website:
www.floridatechnet.org/bridges
for issues of Practitioners' Points and the Bridges training schedule

"Most adults with low literacy skills are likely to have learning disabilities. However, many will not seek formal diagnostic testing. Practitioners should continuously consider, at all phases of an adult's participation in a program, whether confirmation of a suspected learning disability could provide civil rights protections that might have an impact on the adult's success in life."
National Institute for Literacy

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Florida's Focus on Adults with Learning Disabilities

Assessment is an ongoing process within an educational program. Nearly all adult literacy programs administer placement tests in academic skill areas to determine the level at which to begin instruction for each student. Assessment begins at the adult learner's initial point of contact and ends when the learner has achieved his or her goals, transitions to another program or simply chooses to leave. This issue of Practitioners' Points focuses on the assessment process to identify learning disabilities, selecting screening instruments, distinguishing screening from a diagnosis, counseling the learner about screening results, the instructional process and also establishing linkages between the learner and community resources.

What is the Purpose of an Assessment?

The psychologist H. Lee Swanson describes an assessment as a "goal-directed, problem-solving process" whose goals are fourfold:

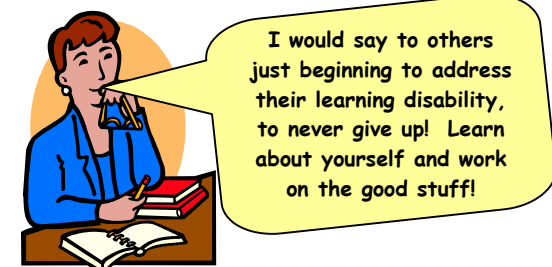
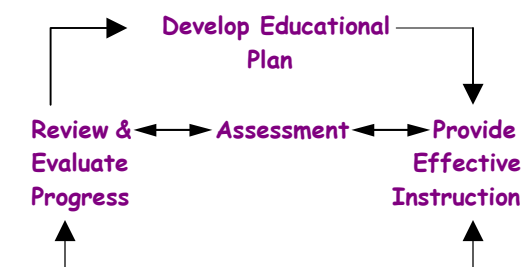
1. To develop a current profile of strengths and weaknesses in order to determine whether an individual has a disability
2. To provide placement in an appropriate classroom setting, worksite or community agency
3. To recommend supportive and appropriate interventions that include instructional skills and strategies needed for school, the workplace or activities of daily living
4. To review and evaluate progress

In order to meet these goals, information about the learner is collected at different points throughout the instructional cycle, also referred to as phases: They are:

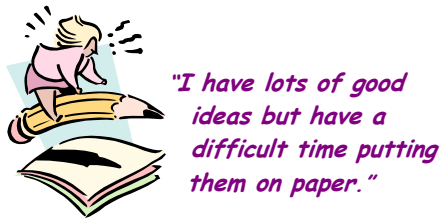
- The Intake Phase
- The Planning Phase
- The Instruction Phase
- The Review and Evaluation Phase

The sections on the following pages will describe the types of information that may be collected during each phase.

As shown below, **Assessment** is the centerpiece of the instructional cycle.



"Finding out that I was learning disabled left me with all sorts of questions about myself. Am I flawed? What does it mean that I have this label? Will I have to work extra hard, harder than all the other kids? I did and always will have to work harder to achieve the same results." ("Facing Learning Disabilities in the Adult Years," Joan Shapiro and Rebecca Rich, 1999)



"I have lots of good ideas but have a difficult time putting them on paper."

THE INTAKE PHASE

The initial information gathering is done during the Intake process, which is typically conducted by a specially trained person. In some literacy programs, the teacher, volunteer or tutor conducts the intake interview during the first meeting with the learner.

What questions should one keep in mind when collecting information about the learner?



Do the learner's goals and needs fall within the scope of services provided by the literacy program, or should the learner be more appropriately referred to another program, such as ESOL, employment readiness or GED Preparation?

What appear to be the learner's instructional needs?

What is the learner's educational and employment background?



Has the learner self-disclosed that he or she has a learning disability?

What are some types of information that can be collected to answer these questions about the learner?

demographics (sex, age, ethnic group, geographic location, etc.)

family background

previous educational experiences

current job/employment history

reasons for coming to the program

vision or hearing acuity and use of eye glasses and hearing aids

strengths, talents and abilities

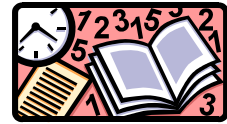
interests and needs

academic skills levels

potential obstacles to regular attendance, such as having limited transportation or child care

view of how he or she learns best

How is all this information gathered?



Informal discussion with the learner

Use of standardized tests

Interviews with the learner's family members, employers or co-workers

Before you begin gathering information, it is important that you take the time to describe to the learner the types of information that will be collected during the intake interview and explain why it is being collected.



THE PLANNING PHASE

and regularly attending class or tutoring sessions, the lesson content, materials and structure of the instruction need to match the learner's needs, interests, strengths, ability levels and preferred ways of learning. Use the intake and assessment information to help answer the following questions:

What is the best curriculum area for the learner to begin with?

What are the learning goals and objectives?

What should be taught in each unit and lesson?

What materials are most appropriate for use with this adult?

"When I found out that I had a learning disability, I was relieved. I had known that my father had dyslexia that went untreated. I came to realize that having a learning disability was all right. It meant that I wasn't stupid."

Anonymous

THE INSTRUCTION PHASE

Some of the most valuable information about a learner comes from observing him or her after instruction begins. Here the practitioner is able to answer questions such as:

What type of physical setting (lighting, noise, etc.) helps or hinders the learner?

Does the learner need a lot of feedback or is he or she comfortable working independently for short periods of time?

What kinds of pacing does the learner need?

How much reinforcement does the learner need to master a new skill?



THE REVIEW and EVALUATION PHASE

The review and evaluation of a learner's progress are done continuously throughout the cycle of instruction. It is through informal observation of the learner while engaged in a specific task as well as from more formal unit mastery tests that the practitioner and the learner gather information to help answer such questions as:

How much progress is the learner making toward the stated goal?

What instructional strategies have worked best and which need to be modified?

Have any new needs arisen since the current instructional plan was put into place?

What additional adaptations are needed in the educational plan or in instruction?



SCREENING FOR LEARNING DISABILITIES

used to shape good program decisions. However, after some time, the practitioner and learner may decide to determine the likelihood of a learning disability. It is important to note that screening alone does not identify whether a person has learning disabilities. Screening is the first step in a much longer testing process. Screening results are used to determine whether the learner should be referred for further testing which may then lead to a diagnosis of learning disabilities.

Screening instruments should be:

helpful in determining the need for further testing

inexpensive

quick to administer, score and interpret

appropriate for large numbers of people and can be administered in a group setting

narrow in purpose

able to provide a superficial assessment of several areas, such as language, motor or social skills and

usable without extensive training of staff.

VISION and HEARING SCREENINGS

Adults who struggle to see printed material or ask to have information repeated may actually have hearing or vision problems. The first step in the assessment process is to refer

these learners for vision and hearing testing. Community agencies like the Red Cross and Lions' Club may help offset the cost for these services.



INFORMED CONSENT

If your program provides screening, you must obtain informed consent from the learner. Informed consent means that the learner knows what is going to happen, who will do the screening and how the results will be used. Unlike group administration of the screening instrument, an individual administration requires a signed consent form that should contain the following:

- name of the screening test(s)
- the interval of time for screening
- who will see the results
- how the results will be used
- where the forms will be kept and for how long
- the adult's signature and date
- signature of program representative

QUESTION & ANSWER MAILBOX

Q: How are the screening results used?

A: Screening results, when used by themselves, cannot determine the presence of learning disabilities. The results are used by the program staff and the learner to decide whether the learner should be referred for further testing with a diagnostic battery that could determine a learning disability.

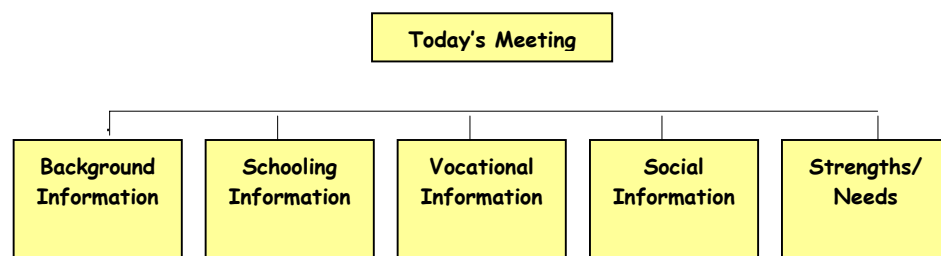
Q: Can I use tests such as the Slosson Intelligence Test, Peabody Picture Vocabulary Test and the Brigance Inventory of Essential Skills to screen for learning disabilities?

A: No, these tests were not designed as screening instruments for learning disabilities. Their purpose is to provide information about other areas of a learner's performance. Bridges trainers recommend using the Payne Learning Needs Inventory.

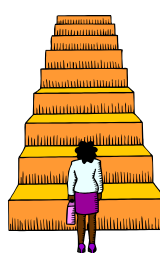
Q: Who may conduct diagnostic testing?

A: Diagnostic testing must be conducted by a licensed and qualified professional, such as a psychologist, clinician or educational diagnostician who can administer psychoeducational batteries and draw conclusions.

SAMPLE OF A GRAPHIC ORGANIZER FOR THE INTAKE INTERVIEW



This organizer provides a mental picture of the intake interview for the learner, as well as the sequence of information to be gathered. Pictures may be substituted for words if the student is a beginning reader.



Prior to the start of formal or informal testing to identify the learner's skill levels and strengths, and determine his or her needs, ask the learner about his or her **strengths** or **challenges**. Adults with learning disabilities may have come to rely on others and have developed ways to compensate for - or even take advantage of their learning disabilities. By involving the learner in the planning process, you are confirming their value and input.