In Ohio, are the Teachers of Today and Tomorrow Prepared to Teach Students with Dyslexia?

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Abstract

This study looks at the perceptions of teachers of today and tomorrow. The study examines current and future teachers’ perceptions of how prepared they are to teach students with dyslexia. The study also examines teachers’ perceptions of how dyslexia can affect a person’s self-efficacy and teachers’ perceptions of their impact on students. Undergraduate pre-service teachers, practicing general education, and special education teachers from Ohio were emailed a link to an online survey designed to answer the research question, “Are Teachers in Ohio Prepared to Teach Students with Dyslexia?” The response rate was 63% however results show that overall, teachers of today and tomorrow do not feel prepared to teach students with dyslexia. These teachers also felt that a student’s self-efficacy is affected in a negative way because of the reading disability/dyslexia. The majority of the teachers surveyed believe it is the special education teacher’s job to accommodate the needs of these students.
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In Ohio, are the Teachers of Today and Tomorrow Prepared to Teach Students with Dyslexia?

Dyslexia is a life-long learning disability that affects fifteen to twenty percent of the population and presents many challenges, one being a person’s self-efficacy (Allen, 2010). People with dyslexia struggle to read, write, spell, and even speak correctly and clearly. It starts during childhood and progresses if the issue is not identified or addressed, or if interventions are not put in place. This disability not only affects individuals’ education; it also affects their social and emotional states (Burden, 2008). People with dyslexia face problems with self-esteem, self-worth, and socializing. Understanding dyslexia helps the person to cope with the disability. Although there is no cure for dyslexia; one can strive to overcome the disadvantages and lead a normal life. As teachers of today and tomorrow in the state of Ohio how prepared are they to teach a student with dyslexia? Do they receive the training necessary to work with students with a reading disability such as dyslexia? If not, how does this affect students with this disability?

**Review of the Literature**

This review analyzes literature pertaining to dyslexia and how it affects a person’s life. In order to determine if current and future teachers are prepared to teach students with dyslexia, one needs to understand the definition, history, characteristics, behaviors, strategies, and interventions used for students diagnosed with dyslexia. This researcher also explored how dyslexia affects a person’s self-efficacy if teachers do not feel prepared to teach students with reading disabilities/dyslexia. According to Gwernan-Jones and Burden (2010), teachers’
background knowledge and attitudes can affect their ability to work with students with learning difficulties. The characteristics of dyslexia are that a person not only has a difficult time in reading, spelling, and writing but in oral expression (Williams & Lynch, 2010). Many teachers may not realize they are working with a student that has dyslexia because public schools in the United States do not use the term dyslexia (Williams & Lynch, 2010). According to Williams and Lynch (2010), public schools in the United States use the terms reading disability and learning disability because the majority of schools do not have a program that addresses dyslexia specifically.

**Definition of Dyslexia**

Dyslexia is defined as a specific learning disability (Allen, 2010). In 1968, the World Federation of Neurologists defined dyslexia as a disorder in children who, despite conventional classroom experience, fail to attain the language skills of reading, writing, and spelling. Dyslexia is neurobiological in origin and often runs in families and is characterized by difficulties with accurate and fluent word recognition or poor spelling (Allen, 2010). Dyslexia is most commonly associated with reading, writing, and spelling, but can have a negative impact on math skills, as well. According to Sagemiller (2000), there are two main types of dyslexia: verbal and non-verbal. Sagemiller explains that he has verbal dyslexia, which is when a person has trouble with (2-D) or two dimensions. He goes on to explain that a person with verbal dyslexia has problems seeing letters and words but is very talented with his or her hands. Individuals with verbal dyslexia use pictures to understand new schemas. An example is that a student with verbal dyslexia would not be able to decipher the letters “b” and “d” or “p” and “q” (Sagemiller, 2000).
There are many learning disabilities; however, dyslexia is a specific type of reading disability and is the most prevalent type of learning disability (Allen, 2010). According to Schatschneider and Torgeson (2004) and Allen (2010), brain processes have a lot to do with the disability. There are three areas of difficulty for students with dyslexia. According to Williams and Lynch (2010), examples of areas of difficulty include:

**Reading**

- Confusion over the direction letter and numbers face: b/d, p/q, p/9
- Difficulty learning that letters make sounds and that those sounds are sequenced into words: cat=[k][a][t]
- Difficulty blending sounds into words: [k][a][k] = cake
- Inefficient decoding

**Writing and Spelling**

- Confusion with vowels, especially vowel digraphs and diphthongs: *I ned my cot because its cld.*
- Difficulty hearing syllables within words and phonemes within syllables: *I was sprised at frst that I lerned all the prsdnts.*
- Difficulty visualizing the correct spelling of words: *I hav enough mony to buy a gam.*
- Does not seem to understand spelling rules or sentence structure: *You finnish the storie befor peple wil go relly.*
- Consistent confusion with homophones: *allowed/aloud, there/their/they're, grate/great*
Speaking

- May have delay in learning to talk.
- May have difficulty in rhyming.
- May have difficulty in sequencing: saying the alphabet, the days of the week or months of the year, or counting.
- May have difficulty in remembering words.
- May have difficulty pronouncing words: “aminal” for “animal”, “busgetti” for “spaghetti.” (p. 69)

It is important to note that even though this disability can affect a person’s education, it does not mean the person is unintelligent, not talented, or lacks effort. Dyslexia not only affects a person’s learning, but also his/her way of life. It can affect self-esteem, self-worth, and socialization (Glazzard, 2010). Many people with this type of disability are bullied, which can lead to high anxiety and/or depression (Burden, 2008). According to Williams and Lynch (2010), students are often reprimanded by their teachers for not trying. These students are not lazy or unmotivated, but rather have become frustrated and will do anything to avoid having to participate in reading and writing. It is important for teachers to understand strategies that will unlock the language and literacy barriers, not just have knowledge of helpful strategies (Williams & Lynch, 2010).

Dangers of Undiagnosed Dyslexia

It is important first to note that delaying a diagnosis of dyslexia can have negative long term affects. According to Schultz (2011), in 1956, not very much was known about dyslexia; therefore, students would often compensate by lashing out.
He proposed it was a way for them to be in control of something, since they could not control how they could read, write, spell, or pronounce words. Ignorance is perhaps the most painful aspect of a learning disability. According to Schultz (2011), every person with dyslexia owns a history of self-rejection and regret. The unfair treatment that one receives from his or her peers, teachers, and family by being bullied and teased can have a negative impact on one’s self-esteem (Burden, 2008). Another important item to mention that can affect students with dyslexia is the teacher’s resistance or lack of understanding regarding the existence of dyslexia. In 2010, Glazzard’s research reported the affects that teachers, peers, and parents can have on a student’s self-esteem because of the lack of understanding regarding dyslexia.

Definition of Self-Efficacy

According to Bandura (1993), self-efficacy is defined as beliefs in one’s abilities to carry out a desired course of action. Self-efficacy can be developed by four main sources of influence: mastery experiences, vicarious experiences provided by social models, social persuasion (genuine verbal boosts), and psychological and emotional reactions to specific tasks (anxiety) (Klassen & Lynch, 2007). “A definition of self-efficacy also provided by Bandura (1994), is the belief in one’s capabilities to produce designated levels of performance that influences events that affect their lives” (p. 62). It affects the way that they think, feel, and motivate themselves and behave.

Dyslexia Affects Self-Efficacy

In 2000, Zimmerman stated that “self-efficacy is considered an essential motive to learn and has been shown to be among the strongest of motivation predictors and academic settings” (p. 82). One of the developing approaches to self-
efficacy is motivation, according to Klassen and Lynch (2007), there is strong evidence that students with learning disabilities -- for instance, dyslexia -- lack motivation and therefore have more difficulties academically. Academic difficulties are linked to lower academic self-concepts and self-esteem. Constant failure and poor performance can lead students to question their intellectual abilities. Self-efficacy boosts a student’s accomplishments and well-being and decreases stress and susceptibility to depression (Glazzard, 2010). Bandura (1994) describes different ways to develop self-efficacy. The first is through mastery experiences which can be done by structuring situations that will lead to success instead of setting them up for failure. Klassen and Lynch (2007) demonstrated this through their research. In their study, many children commented that they did better in subjects in which they were interested. Their self-efficacy grew because of their interest in these subjects and they excelled.

Susan Hampshire (1982), a well-known English actress who was not formally diagnosed with dyslexia as a child, yet faced several issues. She felt she was stupid, lazy, and backwards, and lacked self-confidence. “After being diagnosed for the first time in her life, she felt she had control (p. 62).” Hampshire struggled with reading and writing, and her mother, instead of helping her academically, taught her how to play the piano and dance. Hampshire’s mother “structured a situation that brought her success” (Bandura, 1994). Her self-efficacy therefore was developed not through academics but rather through the arts.

A second approach for developing self-efficacy is social (verbal) persuasion which can have a great influence on students’ confidence. It has been demonstrated
that negative comments from teachers, peers, and parents can lower students’
confidence. Verbal persuasion is hypothesized to sustain self-efficacy when an
individual is presented with difficulties and leads to greater effort and persistence
(Klassen & Lynch, 2007). According to Bandura (1994), verbal persuasion will sustain
self-efficacy when there are difficulties to overcome. Verbal persuasion is when a
teacher, peer, or parent gives positive and structured feedback to an individual (e.g.,
“Great Job on your fact families today Chelsea”). According to Klassen and Lynch
(2007), teachers do not believe that verbal persuasion is effective. Students on the
other hand stated that they were encouraged when teachers gave them positive
feedback and that it was an important source of confidence (Klassen & Lynch).

Vicarious experiences, a third approach, can have a negative or positive affect
on self-efficacy. Children look for role models throughout life; they mimic and look up
to these models. According to Klassen and Lynch’s (2007), data showed that vicarious
experiences lowered a student’s self-efficacy. Some student’s reported feeling less
confident when others around them did better. On the other hand, when the model
failed or lacked in a certain area, the students felt more confident in their abilities.

According to Ryden (1989), there are many famous dyslexic people including
Thomas Edison, George Washington, and Albert Einstein. These important historical
figures provide role models for students with dyslexia whose experiences and
accomplishments were not hindered by their learning disabilities. This demonstrates
that learning disabilities do not intellectually restrict students or do not have to
prevent them from learning.
The final approach in developing self-efficacy is psychological and emotional reactions to specific tasks. The idea is to lessen stress reactions and change negative emotional tendencies and misunderstandings. According to Terras, Thompson, and Minnis (2009), strong self-esteem and a good understanding of dyslexia may help children avoid the difficulties of internalizing. Therefore, these children will not become withdrawn, anxious, or depressed because of their disability. By having a full understanding of their reading difficulties, they will be able to set realistic goals and experience success instead of failure resulting in positive feelings, which increase confidence and self-esteem.

**Strategies/Interventions**

**Awareness.** One of the best strategies or interventions for dealing with dyslexia is awareness (Allen, 2010; Burden & Burdett, 2007; Gwernan-Jones & Burden, 2010). Understanding dyslexia and its many roles in a person’s life with dyslexia is the best attack on the disorder. Understanding and accepting the disability may help maintain and create positive self-esteem and psycho-social adjustments as well (Allen, 2010). Since children with reading disabilities are often bullied, a social support system is another key factor (Burden, 2008). According to Burden (2008), peers have been identified as one cause of low self-esteem in children with dyslexia but these same peers can have a positive affect by being social support for a student with dyslexia (Long, MacBalin, & MacBlain, 2007). Research shows that 50% of children with disabilities have been bullied or teased due to their dyslexia (Ingesson, 2007; Pollak, 2005).
Social support should come from parents, teachers, and peers. Research has shown that strong social support leads to a more positive self-concept (Long, MacBlain, & MacBlain, 2007). Another strategy is having children work in a special unit rather than a mainstream school which has resulted in lower anxiety and depression in children with dyslexia (Glazzard, 2010).

**Phonemic awareness.** Phonemic awareness improves the growth of accurate and fluent word reading for students with dyslexia (Schateschneider & Torgesn, 2004). There are three key ways in which teaching phonemic awareness helps. First, it helps the child understand the alphabetic principle. Second, it helps by “facilitating the generation of possible words in context that are only partially sounded out” and finally, it helps children to recognize the letters that represent sounds in specific words (Schateschneider & Torgesn, p. 760).

**Resilience.** Another strategy focuses on resilience, which allows reading disabilities to be considered from a wider ecological perspective. The perspective offers a framework for future research in exploring the social aspects of reading disabilities. In classrooms, technology can be one of the best interventions (Allen, 2010; Pollack, 2005). Using audio can help students with dyslexia. By not having to read the book, students can instead listen to the words and understand the text. Computers are also helpful. Instead of writing, which takes time and often disrupts the student’s train of thought and can cause a negative emotional response, they can type or dictate. According to Williams and Lynch (2010), teachers who use multisensory instruction give students with dyslexia one of the best strategies to develop sequential and cumulative language concepts and skills. Teachers need to
utilize multisensory lessons that incorporate auditory, tactile, kinetic, and visual aspects.

Williams and Lynch (2010) also express the importance of not only using different strategies for the student with dyslexia but focus on the need to build the student’s self-image, emphasizing verbal participation and communication. When communicating with students, the teacher needs to make directions simple and brief and avoid giving multiple steps at one time. A simple strategy would be to stop, pause, and give the student time to process the lesson and what is being asked. Additionally, it is important to remember that there are no poor questions and teachers should respond to each question a student asks.

Teachers should also consider reducing the reading load in the area of verbal participation (Williams & Lynch, 2010). Teachers can give students grade on oral quiz or test instead of, or in addition to written responses and only call on a student to read if he/she volunteers. Next, teachers can allow the student to take an untimed, oral test whenever possible. Finally, Williams and Lynch (2010) suggest that to build a student’s self-image teachers could allow students to contribute to the class in the area of their special talents.

**Strategies Over the Life-Span**

Dyslexia is a disability that currently cannot be cured. Currently, the only strategy that can be used across the life-span is to develop a better understanding of the disability. The above mentioned strategies can help those with dyslexia cope with their disabilities and further enhancements in technology will provide additional accommodations. An example of the impact of technology is the font used. This
particular font, trebuchet, is dyslexia-friendly and allows individuals to be able to easily determine the difference between the letters b and d. With these strategies and interventions in place, self-efficacy can be enhanced. Through understanding and awareness of the disability, teachers, peers, and parents can promote self-efficacy. This research is designed to determine if teachers in Ohio are doing everything they can to improve the well-being of students with reading disabilities? Are teachers of today and tomorrow prepared to teach students with a reading disability/dyslexia.

**Method**

In the development of this research, several teachers were interviewed in an Appalachian County in the Southeastern region of Ohio and were asked about their experience with students having dyslexia. Several teachers said they did not believe dyslexia was a learning disability anymore and others indicated they have had many children in their classrooms with reading disabilities but did not believe they ever had a student with dyslexia. These responses led to the development of this research to determine whether teachers in Ohio understand what dyslexia is and/or if they are prepared to work with a student that has dyslexia. Undergraduate and graduate pre-service teachers from a local university and its regional campuses, special education teachers, and general education teachers from several local schools in Southeastern Ohio completed an online survey. The survey was designed to determine if teachers of today and tomorrow felt prepared to teach students with reading disabilities/dyslexia. Survey response also provided insights into whether these teachers believed that students’ self-efficacy is affected by their reading disabilities/dyslexia.
Participants

Participants from three local schools were sent an email from their school district superintendent requesting their participation in this research. Each local school consisted of elementary, middle and high school teachers. The email included a link to an online survey. The practicing teachers from local schools were general education teachers and special education teachers. Practicing teachers who took the survey taught from one to thirty plus years. Pre-service teachers at both the graduate and undergraduate levels at a local university and its regional campuses received an email requesting their participation.

A total of 63 teachers completed the survey. Eleven of the participants were undergraduate students, one teacher taught in a virtual classroom, 38 teachers taught in inclusive classroom and 14 taught in a resource room. Table 1 and Figures 1 and 2 summarize the demographics of the survey participants.

Table 1

Gender of Participants

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>Response</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Male</td>
<td>11</td>
<td>17.46%</td>
</tr>
<tr>
<td>2</td>
<td>Female</td>
<td>52</td>
<td>82.54%</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>63</td>
<td>100.00%</td>
</tr>
</tbody>
</table>
Procedures

An email list of university preservice teachers was obtained from the Office of Information Technology from the local university. The email list of 1,000 graduate and undergraduate pre-service teachers was provided without names or other identifiers. An email invitation to participate in the research was sent out to all individuals on the
email list. The email contained a link to the online survey which was developed using Qualtrics. Teachers in a local school district received the same email requesting their participation in the survey sent via their superintendents. A second request was sent out as a reminder to preservice and inservice teachers to participate in the survey. By following the link in the email and completing the survey, the participant agreed to the conditions outlined in the consent form. Once completed, survey data from each survey was aggregated through the Qualtrics survey program.

Instrument

The participants answered a twenty-five question survey, which contained both open-ended and forced-choice questions. The survey consisted of demographic questions of the participant including subject area(s) taught, county, age, highest degree completed, experience in teaching, setting (i.e., inclusive classroom, general education, resource room, special education classroom), and number students served in a typical day.

Additionally, there were several questions asking participants to rate 1) how prepared they felt in teaching a student with dyslexia, and if they felt unprepared, 2) what kind of affect that could have on a student’s self-efficacy; 3) the impact dyslexia could have on a student’s obtaining a job, and 4) what type of impact it has on their life. Lastly, participants were asked about what responsibility the felt in meeting the needs of a student with dyslexia. See appendix for the complete survey.

Results

The purpose of this study was to determine if teachers of today and tomorrow feel prepared to teach students with a reading disability/dyslexia. The researcher
also wanted to determine how they felt their reported knowledge levels would affect a student’s self-efficacy.

Quantitative Results

Demographics. The majority of the participants (n = 50) currently reside in one Southeastern Ohio County School district. Figure 3 describes the location of the participants.

Figure 3

Location of Participants by County

The ages of preservice teacher participants ranged from 18 to a seasoned teacher at the age of 62. Over half of the participants taught in the elementary level which is the level when most students are identified as having disabilities that would require special education services. The majority of the participants had either their bachelor’s or master’s degree. Specifically, 39% (n = 25) of the participants had a bachelor’s, 34% (n = 21) had a master’s degree, and 18% (n = 11) had a master’s plus thirty years’ experience. Table 2 identifies the type of classroom setting where the teachers taught.
Table 2

*Setting Where Participants Taught*

<table>
<thead>
<tr>
<th>#</th>
<th>Answer</th>
<th>Response</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Virtual Classroom</td>
<td>1</td>
<td>1.89%</td>
</tr>
<tr>
<td>2</td>
<td>Inclusive Classroom</td>
<td>38</td>
<td>71.70%</td>
</tr>
<tr>
<td>3</td>
<td>Resource Room</td>
<td>14</td>
<td>26.42%</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>53</td>
<td>100.00%</td>
</tr>
</tbody>
</table>

**Preparation.** The participants were asked how prepared they felt they were for teaching students with dyslexia. Figure 4 shows that only five percent of the participants felt they were prepared to teach students with dyslexia.

**Figure 4**

*Participants’ Perceptions of Preparedness to Teach Student with Dyslexia*
These results reflect the research that has been done on teacher’s preparedness to teach student with dyslexia. Williams and Lynch (2010), discuss how college instructors communicate that dyslexia is a special education issue and in turn the special education teacher’s see this as a general education teacher’s issue.

**Responsibility.** The participants in this survey indicated that 41% (n = 26) felt it was the special education teacher’s responsibility to accommodate the needs of a student with dyslexia. Twenty-two percent of the participants (n = 14) were not sure who should be responsible with only 23% (n = 14) believing it was the general education teacher’s responsibility. Interestingly, the majority of the participants (n = 35) stated that they have never worked with a student with dyslexia. The majority of participants were veteran teachers (57 of 63) and with prevalence rates indicating that approximately 15-20% of the general population has been identified with dyslexia (Allen, 2010), it would be very unlikely that teachers have not had a student with dyslexia in their classrooms.

**Training and impact.** The survey results indicate that 58% (n = 35) of the participants reported never receiving training in how to work with students with dyslexia and only 12% (n = 7) reported having any specific professional development related to dyslexia. The survey also indicated that 98% of the participants believed that dyslexia had a huge or some negative impact on a student’s self-efficacy. Figure 5 represents the impact that participants believe dyslexia has on a student’s self-efficacy. Teachers also shared in their extended responses that by being unprepared to teach a student with dyslexia, teachers felt it would add to that student’s self-esteem issues.
Qualitative Results

In addition to the forced-choice questions, the survey contained five open-ended questions regarding the 1) strategies teachers use in their classroom, 2) responsibilities toward the students, 3) effects of a lack of preparation, and 4) impact on a student's self-efficacy.

**Strategies.** The first question asked participants to list the resources, interventions, and strategies they have used when with working with students with dyslexia. The question was only answered by 62% of the participants. Of the 62% (n=39), half of the participants stated they did not know or were not sure what to do. A few participants mentioned items that are myths about dyslexia that included students writing letters backwards and using overlays to help with reading.

**Responsibility.** The participants were also asked what they felt their responsibility was, if any, in meeting the needs of a student with dyslexia. Sixty-two
percent (n = 39) of the participants responded to this open-ended question. The majority stated that it is their responsibility to meet the needs of their students. Teachers reported they would search the internet, talk to co-workers, empower the students to build self-esteem, and follow the students’ 504 Plan or IEP goals and objectives. A few participants stated it would be the Intervention Specialist or Title I teacher’s responsibility to meet the needs of these students.

**Preparation.** Participants were asked if they did not feel adequately prepared to work with a student with dyslexia, what affect they thought it would have on the student’s self-efficacy. Sixty-three participants responded to this open-ended question. Two participants stated this question was not applicable. The other participants indicated that not being prepared would reflect on not just the student’s self-efficacy but on their own. They also believed that if a teacher does not have confidence, it will roll over onto their students and emphasized the importance confidence is for the student as well as the teacher.

The last question asked participants what strategies/materials you use when teaching students with dyslexia. Fifty-nine percent (n = 39) of the participants responded to this question, with 10 referencing the above response to the first open-ended question and 14 stating that they did not know what strategies to use and it was not their responsibility, but the intervention specialist’s responsibility to meet those needs.
Discussion, Recommendations, and Conclusion

The purpose of this research was to determine if the teachers of today and tomorrow in Ohio felt prepared to teach students with dyslexia. After completing a review of literature, talking to colleagues at a local university, and teachers while substituting in a rural school district in Southeastern Ohio, the researcher felt that teachers in Ohio were not prepared to work with students with dyslexia or even understood that dyslexia was considered a learning disability. The results of this study seem to support the hypothesis that the teachers of today and tomorrow that participated in this study do not feel prepared to teach students with dyslexia.

Many participants stated they have never worked with a student that had dyslexia. They shared that if they would have a student with dyslexia, they would not feel prepared to meet the needs of that student. The majority responded that it was their responsibility to meet the needs of all of their students. They also indicated that by not being prepared, they believed it would have a negative effect on the student’s self-efficacy and some went as far as to say it would have a negative effect on their own self-efficacy. It is critical for teachers of today and tomorrow to understand the different types of learning disabilities that students in the classroom could have. According to McClure (2007), in order for the students with dyslexia to improve academically, it is imperative that early diagnosis and appropriate instruction be administered. McClure continues that not all students with dyslexia will qualify for special education, but they still will need some intervention because without intervention, these students can have long-term negative influences (p. 86).
This study and previous studies have shown that teachers do not feel prepared nor do they understand the true definition of dyslexia. This is very disturbing with over 15-20% of the population having been diagnosed with dyslexia (McClure, 2007). In 2010, Williams and Lynch address many of the myths of dyslexia. These myths include that dyslexia is not a visual problem; therefore, the use of visual strategies such as ocular training and working on visual perception is not successful. The reversal of letters and signs is not a sign of dyslexia. Many children under the age of seven will do this while learning to write. The strategy mentioned by the majority of participants was using overlays to improve reading skills, however, using colored overlays does not improve accuracy or reading rate.

A recommendation would be for teachers to seek professional development involving strategies to identify and intervene for not just dyslexia, but all reading disabilities. The knowledge gained could improve not only the self-efficacy of students receiving the intervention, but the self-efficacy of the teachers working with the students. Based on the findings of this study, one can conclude that ninety-four percent of the teachers who participated in this survey, both in-service and pre-service, would benefit from professional development or additional training on this subject area.

Future research on how prepared teachers are across Ohio and other states would be beneficial. It is imperative that teachers are prepared to meet the needs of all students. This includes students with special needs, as well as typically developing students in the general educational classroom. Professional development for current teachers and classes covering different disabilities that the teachers of tomorrow will
encounter in their classrooms and the strategies to use with these students is another area for research.

**Limitations**

This research was designed to gather opinions of pre-service teachers from a local university and its five regional campuses in six different counties in Southeastern Ohio, and seven local schools in one Southeastern county. However, as noted previously in Figure 2, the majority of participants were from one county which did not provide the researcher with enough information to be able determine if teachers of today and tomorrow across Ohio are prepared to teach students with dyslexia. Therefore, these findings cannot be generalized further than teachers in that county. That being said, it can be concluded that the teachers in one Southeastern County area do not feel prepared to teach students with dyslexia.
References


**Dyslexia** (10769242), 15(4), 304-327. doi:10.1002/dys.386


[ehis.ebscohost.com.proxy.library.ohiou.edu/eds/pdfviewer/pdfviewer](ehis.ebscohost.com.proxy.library.ohiou.edu/eds/pdfviewer/pdfviewer)

APPENDIX

Working with Students with Dyslexia/Reading Disability Questionnaire

1. Gender

Male
Female

2. Age

3. Race Ethnicity

African American
Asian
Bi-racial
Caucasian
Latin American
Native American/Other

4. Highest Degree Completed

Bachelor’s
Master’s
Master’s +30
PhD.
Undergraduate Freshman
Undergraduate Sophomore
Undergraduate Junior
Undergraduate Senior
5. How many years have you taught?

6. Ohio County where your district resides (If your district is in more than one county, choose the one where the majority of your students reside)

7. Setting where you teach:
   
   Virtual Classroom
   
   Inclusive Classroom
   
   Resource Room

8. Type of district where you currently work:
   
   City
   
   Exempted Village
   
   Local

9. Type of teaching position/licensure held:
   
   Special Education
   
   General Education
   
   Working towards licensure

10. Subject area(s) you currently teach (Check all that apply):
    
    Mathematics
    
    Reading
    
    Science
    
    Language Arts
    
    Social Studies
11. Grade level taught:

   Elementary

   Middle/Junior High

   High

12. Number of students are you responsible for in a typical day:

13. Number of students you have worked with in the past year that have been diagnosed with dyslexia

   # of girls

   # of boys

14. How prepared do you feel to meet the needs of a student(s) with dyslexia in your classroom, on a scale of 1-5 (1 = not at all prepared; 3 = somewhat prepared; 5 = very prepared)?

15. Please explain your rating for the previous question.

16. How great is the impact of dyslexia on a student’s self-esteem, on a scale of 1-5 (1 = huge negative impact; 3 = some negative impact; 5 = no negative impact)

17. In your school, who is responsible for accommodating the needs of a student with dyslexia? (Check all that apply)
   
   Special Education Teacher

   General Education Teacher

   Guidance Counselor

   School Psychologists

   I am

   Not Sure

   Other
18. Have you received training in dyslexia? (Check all that apply)

   Never

   Never, but heard it mentioned in undergraduate coursework

   Took specific undergraduate class

   Took dyslexia specific professional development

   Read books on dyslexia

   Surfed the internet for information

19. When teaching a child with dyslexia in my classroom, I am... (Choose one)

   By myself

   Co-Teaching

   Using an Aide

   Not teaching students with dyslexia

20. What resources, interventions, and strategies do you use when meeting the needs of a student with dyslexia?

21. What strategies/materials do you use when teaching students with dyslexia? (Please explain your answer.)

22. What are your responsibilities, if any, as a teacher in meeting the needs of a student with dyslexia? Why? (Please explain your answer.)

23. If you do not feel adequately prepared to work with a student with dyslexia, what affect do you think this would have on your student’s self-efficacy? (Please explain)