

## Response to Intervention: Taking Steps toward Effective Instruction and Identification of Struggling Learners

A recent shift in special education law has resulted in the use of a Response to Intervention (RTI) model to identify students with learning disabilities. Historically, many schools use a discrepancy model, in which learning disabilities are identified through a discrepancy between IQ scores and achievement. In 2004, the Individuals with Disabilities Act included a statement that states cannot be required to use a discrepancy model in order to identify students with learning disabilities. Many schools now utilize RTI procedures, but are using it as the singular source of identifying learning disabilities. Many of the RTI procedures have foundations in research-based practices; however other areas that lack research can make it problematic to use RTI as the sole means of identifying learning disabilities in students.

### Vocabulary Terms

<b>Term</b>	<b>Definition</b>
RTI	Response to Intervention
IDEA	Individuals with Disabilities Act
Discrepancy Model	A process for identifying learning disabled students through a discrepancy between IQ and academic performance.
Progress Monitoring	An RTI process involving brief, periodic assessments to determine student improvement and the effectiveness of an intervention.
Intervention	Supplemental instruction that is targeted toward the student's specific academic needs.
SLD	Specific Learning Disability

### Descriptive Content

In the 2004 IDEA, it is stated that states can use a scientifically-based set of interventions to identify learning disabilities, in lieu of a discrepancy model. This statement is the foundation for RTI. Instead of looking at IQ, educators implement interventions, and progress is measured by student performance related to a specified learning goal. Those students who make significant progress in response to the interventions are identified as less likely to have a learning disability than those students making either slow or negligible progress following interventions. When students are not meeting grade-level

standards nor responding to implemented interventions, the IDEA states that they may possess a learning disability (Mesner & Mesner, 2008).

Table 1

*Related Regulations - IDEA 2004*

**300.307 Specific learning disabilities.**

(a) General. A State must adopt, consistent with Sec. 300.309, criteria for determining whether a child has a specific learning disability as defined in Sec. 300.8(c) (10). In addition, the criteria adopted by the State—

- Must not require the use of a severe discrepancy between intellectual ability and achievement for determining whether a child has a specific learning disability, as defined in Sec. 300.8(c)(10);
- Must permit the use of a process based on the child's response to scientific, research-based intervention; and
- May permit the use of other alternative research-based procedures for determining whether a child has a specific learning disability, as defined in Sec. 300.8(c) (10).

Consistency with State criteria. A public agency must use the State criteria adopted pursuant to paragraph (a) of this section in determining whether a child has a specific learning disability.

(Authority: 20 U.S.C. 1221e-3; 1401(30); 1414(b)(6))

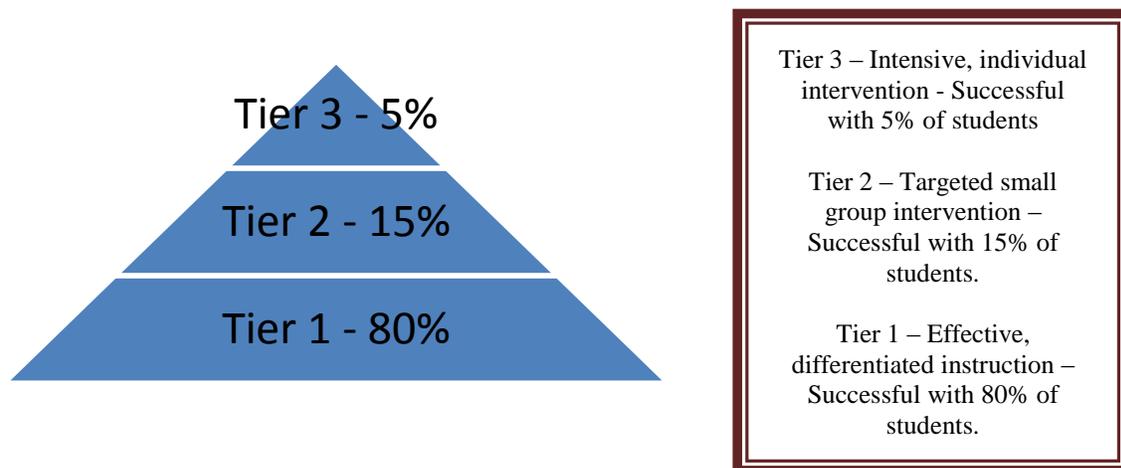
**300.309 Determining the existence of a specific learning disability**(a) The group described in Sec. 300.306 may determine that a child has a specific learning disability, as defined in Sec. 300.8(c)(10), if—

- The child does not achieve adequately for the child's age or to meet State-approved grade-level standards in one or more of the following areas, when provided with learning experiences and instruction appropriate for the child's age or State-approved grade-level standards:
  - Oral expression; listening comprehension, written expression, basic reading skill, reading fluency skills, reading comprehension, mathematics calculation, mathematics problem solving
- The child does not make sufficient progress to meet age or State-approved grade-level standards in one or more of the areas identified in paragraph (a)(1) of this section when using a process based on the child's response to scientific, research-based intervention; or
  - The child exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, State-approved grade-level standards, or intellectual development, that is determined by the group to be relevant to the identification of a specific learning disability, using appropriate assessments, consistent with Sec. Sec. 300.304 and 300.305; and
- The group determines that its findings under paragraphs (a)(1) and (2) of this section are not primarily the result of—
  - A visual, hearing, or motor disability; mental retardation; emotional disturbance; cultural factors; environmental or economic disadvantage; or limited English proficiency.
- To ensure that underachievement in a child suspected of having a specific learning disability is not due to lack of appropriate instruction in reading or math, the group must consider, as part of the evaluation described in Sec. Sec. 300.304 through 300.306—
  - Data that demonstrate that prior to, or as a part of, the referral process, the child was provided appropriate instruction in regular education settings, delivered by qualified personnel; and
  - Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction, which was provided to the child's parents.

(IDEA website, 2004)

Based on these regulations, the RTI process follows specific guidelines in order to identify students with learning disabilities. According to an article by E.M. Mesmer and H.A.E. Mesmer (2008), in the first step, the teacher conducts a benchmark literacy assessment to determine if there are students who are at-risk for not meeting grade-level standards. In the second step, research-based interventions are implemented in a small group setting for those at-risk students. The third step involves measurement of any academic gains using progress monitoring assessments geared towards the specific skill deficit. In the fourth step, if students continue to struggle, the teacher will utilize more “intense, targeted interventions” (p. 283). In the fifth step, a team of relevant school staff and parents meet to determine eligibility for special education services.

RTI is commonly used as a three-tiered model. The first tier is primary intervention, which is effective classroom instruction. If sufficient progress is not made at this level, the second tier is implemented. With this secondary intervention, the student receives supplementary instruction in a small group of three to five students for twenty to forty minutes daily. If the student still does not achieve significant progress at this level, he or she is moved to the third tier. At this level, instruction could involve even smaller groups and increased time to anywhere from thirty to forty-five minutes daily. This tertiary level might also involve a specialized instructor. Progress monitoring is conducted throughout each tier and is geared towards the specific skill deficit. The following diagram based on the 2006 RTI model is from the National Association of State Directors of Special Education (as cited in Fletcher & Vaughn, 2009).



The concept of RTI is broken down into two approaches: the problem-solving approach deals with the analysis of educational variables that can isolate targeted skills that require interventions; the standard protocol approach is related to the use of research-based instructional approaches that can address the skills that need intervention. Many schools implement RTI as a combination of the two approaches (Jimerson, Burns, & VanDerHeyden, 2007).

Prior to RTI, the accepted form of SLD identification was the IQ discrepancy model. However, in recent years, there was a great deal of research negating its diagnostic uses. Some of the issues included:

- Its questionability in indicating general ability, especially for cultural minorities, linguistic minorities, and students from a low socio-economic background.
- When children are identified as having low IQ scores, difficulties in literacy development could be seen as normal and therefore accepted.
- It often takes significant time for a sufficient discrepancy to exist between IQ and performance, so students often go for years without needed interventions (Johnston, 2011).

However, in light of some of the negative research regarding the discrepancy model, schools often view this form of implementation as its replacement. In 2002, even the President's Commission on Excellence in Special Education suggested that RTI could be an alternative to discrepancy model testing for student learning disabilities (Jimerson et al, 2007).

### Differing Perspectives

As an increasing number of school districts across the country have implemented RTI related processes, there has been research both supporting and criticizing the RTI approach to identifying learning disabilities.

#### **Research-supported RTI components**

One of the components of RTI that has a strong research base is the use of progress monitoring assessments to determine academic growth. Studies by Fuchs, Fuchs, and Hamlet (1989a, 1989b), Fuchs, Fuchs, Hamlet, and Stecker (1991), and Stecker, Fuchs, and Fuchs (2005) indicate that the use of frequent, brief progress monitoring assessments provides reliable data on how students are progressing related to improved results. In controlled comparative studies, these data also show that the use of progress monitoring assessments result in better end-of-year scores due to adjusted instruction and regular modification of student goals (as cited in Fletcher & Vaughn, 2009).

There has also been substantial research citing the positive effects of reading interventions in both lower and upper elementary grades. Studies by Wanzek and Vaughn (2007) and Scammacca, et al. (2007) show that while the most significant positive effects are found in implementing substantial reading interventions in primary grades, it is effective in the upper elementary grades, as well. The data also indicate that word-based, text-based, and reading comprehension strategies are all effective forms of intervention (as cited in Fletcher & Vaughn, 2009).

Researchers have suggested that one of the primary benefits of using an RTI approach is in the early identification of learning difficulties. This method allows students to receive immediate intervention rather than waiting until there is an established pattern of academic struggles. The IQ/achievement discrepancy model has often been termed the "waiting to fail" approach because it requires that identification does not occur without a specified gap between IQ and academic performance. This approach also penalizes

younger students because they are less likely to show an achievement gap in the primary grades. Furthermore, operating under this risk model of early identification, all students are screened through the initial RTI tier for potential learning difficulties followed by immediate interventions for students identified as at-risk (Gresham, 2007).

### **RTI Criticisms and Areas for Additional Research**

One of the primary criticisms of using RTI as a means to identify students with learning disabilities is the lack of empirical research that addresses issues such as the definition of effective classroom instruction, time frames for evaluation, the determination of adequate progress as it relates to the “response” component of RTI, and the issue of what constitutes effective interventions in the RTI process. In addition, there is currently a lack of longitudinal studies related to the effects of RTI on students as they progress through high school and beyond (Reynolds & Shaywitz, 2009). However, since the current language of RTI has only been present in policy since the 2004 re-authorization of IDEA, there has not been sufficient time to conduct those longitudinal studies.

Another issue is related to RTI’s being used as the sole method for identifying learning disabilities. Specific concerns involve a potential lack of delineation of which reading components (letter-sound relationships, fluency, comprehension, etc.) need intervention or identifying student strengths that could help support the area of deficit. Furthermore, critics suggest that it does not provide guidelines as to appropriate research-based instruction to meet instructional needs. Some researchers even view RTI as another type of discrepancy model with its comparison of individual student performance to a comparison group, such as grade-level promotion standards, which can vary from state to state. Other studies that reflect similar concerns include ones by Speece and Walker (2007) and Reynolds (2008) (as cited in Reynolds & Shaywitz, 2009).

### **The Issue in Practice**

The purpose of RTI in the 2004 re-authorization of IDEA was to reduce the number of students labeled as learning disabled. However, there are varying interpretations of its implementation at the school level that can lead to a focus on either identification or prevention of SLDs. There are two primary ways that RTI is commonly implemented.

- As it is expressed in 300.307 of IDEA (see Table 1), this form of implementation focuses on identification. This is suggested as an alternative to the discrepancy model. This approach also typically uses curriculum-based measures for progress monitoring assessments.
- RTI can also be implemented to focus on instructional issues, as seen in IDEA 300.309 (see Table 1). It requires that there be data supporting that the child has received effective and appropriate instruction by qualified personnel and that the child has been given regular assessments monitoring academic progress (Johnston, 2011). The crux of this matter that is often not addressed in schools is in developing the literacy expertise of the teacher. Studies such as those by Scanlon, Gelzheiser, Vellutino, Schatschneider, and Sweeney (2008), have

supported the use of professional development and intervention specialists to help teachers develop instructional planning for small group work on targeted skills (as cited in Johnston, 2011).

In order to put RTI into practice effectively, certain principles need to be present:

- Time – The implementation process can possibly take years, and even then it will continue to likely be an ongoing process.
- Resources – The states that have made the most significant progress in RTI implementation have committed extensive resources to the cause.
- Leadership – Strong leadership efforts need to exist from the state level all the way down to the school administrators.
- Preparation of Professionals – Professional development has been key to the success of RTI implementation and focus will likely turn to the preparation of pre-service teachers (Jimerson et al, 2007).

From the standpoint of a practitioner, the time required for implementing RTI as a means to evaluate students for SLDs and determine eligibility for additional services is extensive. Typically, six weeks of monitoring progress and implementing classroom interventions is required before meeting about student academic concerns. Then, the teacher must schedule a meeting with appropriate administrative staff and come prepared with paperwork on current intervention strategies, benchmark assessments, progress monitoring assessments, classroom work examples, parent conference documentation, and basic student data. Then, if there is not sufficient progress from the interventions, another plan is made to increase the amount of small group work and the intensity of interventions. This is implemented for another six to eight weeks. If the student is still making insufficient progress, then another meeting is called with additional supporting paperwork. The student is moved into the second tier of RTI and another six to eight weeks of progress monitoring and intervention begins. Following the completion of the second tier time frame, then suggestions can be made in an additional meeting regarding further testing. If that is agreed upon by the administrative team, then the diagnostician is involved and a subsequent battery of tests and additional paperwork follows. This procedure does allow ample time to implement targeted intervention strategies and allow the student time to respond to them. However, there is also a concern that if a student does need special education support, nearly half of the school year often passes by before that child can be considered for additional assistance.

### Snapshot of Research

Current literature on RTI primarily focuses on the basics of the three-tiered model, forms of implementation, its advantages over the discrepancy model, and criticisms over the lack of empirical research supporting its widespread use.

While there are existing studies (NASDE, 2006; Jimerson, et al., 2007) on the successful implementation of RTI (as cited in Fletcher & Vaughn, 2009), a common thread found in a large amount of current RTI literature is the need for further research. While many

articles have addressed the positive potential of effective RTI implementation, there are many issues that have not been extensively studied, although that is likely due to RTI still being a relatively new process.

A statement by Jimerson et al (2007) identifies this need for further research. They contend that “science should inform practice and practice should inform science” (p. 8). One suggested area of further research is related to the procedures associated with successful RTI implementation. Outcomes of these studies need to be reviewed in light of historical data in order to improve results for students both at-risk and not at-risk for academic difficulties (Fletcher & Vaughn, 2009).

Another area of potential future research is in the definition of scientifically or research-based interventions. RTI processes call for this, but data is not provided on what constitutes research-based. While there are many interventions that have studies supporting them, it is vital that these data are communicated to the schools. Otherwise, there is the danger of a proliferation of educational resources that market themselves to schools and label themselves “research-based” without any supporting evidence (Mesmer & Mesmer, 2008).

## Related Issues

### **Benefits and Disadvantages of SLD identification**

While a classification of SLD does bring with it additional resources through special education, such as decreased student-to-teacher ratio, there are related areas of concern. SLDs have been defined as a fundamental problem in psychological processing; therefore resources and training are focused on treating the symptom rather than the SLD. Because of this, special education teachers are typically trained to work with a wide variety of students and as a result, receive less professional development related to literacy interventions.

### **Increased Numbers of SLD Students**

Since funding was linked to an SLD classification, there has been a dramatic increase in the number of identified students. This increase has also occurred with the intensified focus on standardized testing and its associated accountability ratings. Students with SLDs are not included in the rating system for those assessment results, creating an incentive for SLD classification (Kaufman & Kaufman, 2001).

### **Budgetary Concerns**

The re-authorization of IDEA allows 15% of the special education budget to be used for instructional improvements and implementation of effective interventions. The concern surrounding this budgetary allotment is that the foundation for RTI is based on work done in the regular classroom. Furthermore, RTI is designed to reduce the number of special education referrals, and these funds come out of the special education budget. This issue results in tension stemming from the use of special education funding to reduce the need for the program, itself (Johnston, 2011).

## Summary

The Response to Intervention (RTI) model that many school districts use for identifying students with SLDs stemmed from the re-authorization of IDEA in 2004. Its promotion as a replacement for the IQ/achievement discrepancy model has resulted in its widespread use as a sole means for SLD identification and subsequent special education referrals. It is a time consuming process that does provide opportunity for students to respond to intervention strategies, however, IDEA supports the use of interventions and progress monitoring assessments that are research-based. While the use of these empirically supported efforts is necessary for providing effective assistance for students, many districts are attempting full implementation of RTI processes without the data supporting the measures and interventions being used. RTI has only begun to take form since 2004, so there has not been sufficient time to conduct longitudinal studies on effective strategies and procedures. Perhaps with time, school districts will have the research support needed in order to implement RTI in the way the policy intended.

## Legislative History and Court Cases

RTI is relatively new policy, and therefore there has not been substantial time for court cases to exist on the matter. However, on January 21, 2011, the federal Office of Special Education Programs released a memo reiterating that RTI is not to be used as the sole means of identifying a student with an SLD. It is designed to be one component of a comprehensive evaluation process, but not the whole process, itself. This creates a delicate balance for school districts. While they implement RTI procedures in order to provide intervention for struggling students, they must be careful not to allow a delay in evaluation, or they will potentially be subjected to a due process hearing (Samuels, 2011).

## Recommendations

Some suggestions offered by researchers regarding RTI include:

- Making RTI a system of intervention and not identification
- Putting these interventions solely in the domain of general education
- Involving special education only when students do not make adequate progress following appropriate interventions
- Using a psychometric, comprehensive assessment in order to identify students with SLDs
- Eliminating the 15% special education funding for RTI development (Kavale, Kaufman, Bachmeier, LeFever, 2008)

Along with some of the above concerns, Reynolds and Shaywitz (2009) provide some additional suggestions. These include:

- The emphasis on early identification of learning difficulties by having objective screenings in place to determine the need for RTI, rather than waiting for a teacher referral
- The use of independent professionals to monitor progress and assess the validity of the interventions
- The requirement to document that teachers are using research-based strategies for daily classroom instruction

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