



Bringing the Simple View of Reading to the clinic: Relationships between oral and written language skills in a clinical sample



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ABSTRACT

Purpose: The Simple View of Reading (SVR) predicts subtypes of reading disorder based on weaknesses in word recognition, listening comprehension, or both. This practice-based research study explores predictions of the SVR within a clinical practice setting.

Method: The study is a retrospective analysis of 112 assessment records from school-aged children (aged 6.0–16.7) referred for speech-language evaluation. Available scores within four areas (listening comprehension, word recognition, reading comprehension, and oral expression) were extracted and then converted to composites. Composite scores were used to categorize children into SVR subtypes. We examined the distribution of children across subtypes and the relationships among the four constructs.

Results: Children were distributed across all SVR subtypes, but few had impairments only in word recognition. Children with impairments in listening comprehension or word recognition showed poorer reading comprehension than those that did not, but there was imperfect prediction of reading comprehension impairment at an individual level. There were more significant correlations among constructs for younger children. Oral expression and listening comprehension were closely related across analyses.

Conclusions: The SVR is a clinically useful model for capturing variation and explaining relationships among oral and written language in school-age children.

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1. Introduction

Both oral language impairment (LI) and reading disorders (RD) are common and persistent developmental problems that undermine academic achievement in affected children. These problems are also related at multiple levels (for a review, see Bishop & Snowling, 2004). Unpacking the relationships between oral and written language¹ disorders is a formidable task because both groups (LI and RD) are heterogeneous in terms of their profiles and developmental trajectories. It is critical, then, that clinicians such as speech-language pathologists (SLPs) conduct in-depth assessments that can capture a child's unique profile of oral and written language abilities (Scott, 2011); such assessment leads to the implementation of individualized interventions (Connor, Alberto, Compton, & O'Connor, 2014). However, surveys suggest that many SLPs are reluctant to assess written language (Fallon & Katz, 2011) perhaps due to a perceived lack of knowledge on the topic. For

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¹ The term *written language* includes both reading and writing; *written language disorders* includes RD

example, in a nation-wide survey of school-based SLPs in the United States, just 28.7% of respondents reported that they feel confident evaluating RD (Blood, Mammet, Gordon, & Blood, 2010).

Here we highlight one prominent model of the reading process, the Simple View of Reading (SVR; Gough & Tunmer, 1986), which has the potential to assist SLPs in the assessment of school-age children with oral and written language difficulties. The SVR, described in the next section, predicts several subgroups of poor readers based on their listening comprehension and word recognition abilities. The resulting framework relates oral and written language abilities and helps to explain heterogeneity among poor readers.

This study takes a practice-based research approach (Crooke & Olswang, 2015) by exploring the application of a model (the SVR) within a clinical practice setting (assessment of school-age children referred to an outpatient clinic). In this study, we use clinical assessment data to explore relationships among four language dimensions (listening comprehension, word recognition, oral expression, and reading comprehension) and their correspondence with the predictions of the SVR. We also explore the effect of age on observed relationships. In addition, we consider whether reading comprehension is differentially related to measures of listening comprehension and oral expression; listening comprehension is emphasized in the SVR, but SLPs routinely consider both comprehension and expression. Although the SVR has been used extensively in research-based samples of children with oral and written language disorders, to the best of our knowledge, it has yet to be explored from a practice-based research perspective. Examining the predictions of the SVR from a practice-based perspective may help SLPs to feel more comfortable with addressing RD. In the following sections we describe the SVR and summarize research supporting it.

1.1. Predictions of the simple view of reading

The SVR (Gough & Tunmer, 1986) posits that reading comprehension is the product of word recognition and listening comprehension. To the extent that either one is impaired, reading comprehension will suffer. In many studies, these components have been shown to be relatively independent of one another, highly correlated with reading comprehension, and when combined, explain a high proportion of variance in reading comprehension (Aaron, Joshi, & Williams, 1999; Hoover & Gough, 1990). The SVR has found substantial support in developmental studies of reading, figures prominently in current research on the linguistic and genetic bases of reading ability, and is informing the development of reading curricula (Cain & Oakhill, 2006; Garcia & Cain, 2014; Gough, Hoover, & Peterson, 1996).

The SVR predicts three subtypes of reading disorder (RD), as shown in Fig. 1. The term *dyslexia* has been applied to the first subtype of poor readers, who are defined by their poor word recognition but good oral language comprehension (Catts, Kamhi, & Adlof, 2012; Shankweiler et al., 1995; Shaywitz & Shaywitz, 2005). Children with dyslexia are expected to demonstrate a deficit in phonological processing abilities (Shaywitz & Shaywitz, 2005). Children with dyslexia also typically demonstrate poor spelling skills (International Dyslexia Association, 2002). To maintain consistency with the literature, we use the term *word recognition* throughout this manuscript to refer to these poor word recognition skills; however, it is important to acknowledge the close relationship between spelling and reading at the word level.

A second subgroup of poor readers displays the opposite pattern: good word recognition but poor oral language comprehension. Catts et al. (2012) used the term *specific comprehension deficit* (SCD) for this group and others use the term *poor comprehenders* (e.g., Bishop & Snowling, 2004; Leach, Scarborough, & Rescorla, 2003). The source of reading comprehension difficulty in children with SCD is their difficulty with any or all of the skills that contribute to language comprehension generally, including vocabulary, grammar, or higher-level text skills (such as integration, monitoring, and inference-making). These children would have difficulty comprehending a passage that was read to them as well as one they read themselves (Cain & Oakhill, 2006; Catts et al., 2012; Oakhill, Cain, & Elbro, 2014). Reading problems in a third group stem from the combination of both poor word recognition and oral language comprehension (a *mixed reading disorder* subgroup, Catts et al., 2012). As with children suffering from dyslexia, the word recognition difficulties in children with mixed RD are associated with weak phonological processing skills.

In summary, the SVR can help to explain the bases of heterogeneity in RD as well as relationships between oral language and RD. The quadrant model approach (see Fig. 1) captures individual variability, creating subtypes that may have clinical utility. For the SVR in particular, the RD subtypes generate specific predictions about oral language skill: children with SCD and mixed RD should have impaired oral language comprehension whereas children with dyslexia and mixed RD should demonstrate impaired written word-level skills as well as underlying phonological processing difficulties. The role of oral expression (or oral expressive language) is not specified in the SVR, but has been explored in some of the work supporting the model. The next section summarizes work that has examined the predictions of the SVR.

1.2. Connections between oral language and RD

The SVR thus generates predictions for the relationship between oral language skills, and specifically LI, and RD. These predictions are relevant to SLPs, who are concerned with both disorders. Moreover, the predictions of the SVR have largely been supported in research samples (though they have been unexplored in practice settings, a point to which we return later). Here we highlight findings from the Iowa longitudinal study, a large-scale epidemiological study focused on language disorders (see Tomblin & Nippold, 2014, for a recent summary), with a focus on three key points. The first point is that oral language abilities at the word, sentence, and text levels are strong predictors of RD. For children in the Iowa sample, both

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