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Dyslexia and Related Disorders Reporting Study

JANUARY 2019

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Submitted to the Texas Education Agency

MAKING RESEARCH **RELEVANT**

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List of Acronyms

ADD	attention deficit disorder
ADHD	attention deficit hyperactivity disorder
AIR	American Institutes for Research
CTOPP	Comprehensive Test of Phonological Processing
DRA	Developmental Reading Assessment
EL	English learners
ESC	education service center
FIE	Full individual evaluation
GORT	Gray Oral Reading Tests
HB	House Bill
HERC	Higher Education Regional Council
IDA	International Dyslexia Association
IDEA	Individuals with Disabilities Education Act
IEP	individualized education program
LEA	local education agency
NICHD	National Institute of Child Health and Human Development
NIH	National Institutes of Health
OSERS	Office of Special Education and Rehabilitation Services
PEIMS	Public Education Information Management System
RTI	Response to Intervention
SBOE	State Board of Education
SEA	State education agency
STAAR®	State of Texas Assessments of Academic Readiness
TAPR	Texas Academic Performance Report
TDIA	Texas Dyslexia Identification Academy
TEA	Texas Education Agency
TEC	Texas Education Code
TPRI	Texas Primary Reading Inventory
TSDS	Texas Student Data System
TTAS	Texas Teacher Appraisal System
WRMT	Woodcock Reading Mastery Tests

Executive Summary

Dyslexia is the most commonly diagnosed learning disability. The Texas Education Code (TEC) defines dyslexia as a disorder of constitutional origin manifested by a difficulty in learning to read, write, or spell despite conventional instruction, adequate intelligence, and sociocultural opportunity [TEC §38.003(d)]. Dyslexia is generally referred to as a learning disability because it can be difficult for a student with dyslexia to succeed without proper instruction. In addition to difficulty learning to read, students with dyslexia often experience challenges with both oral and written language skills.

Students can also experience disorders similar to dyslexia, such as developmental auditory imperceptions, dysphasia, specific developmental dyslexia, developmental dysgraphia, and developmental spelling disability. TEC refers to these as "related disorders" [TEC §38.003(d)]. In this report, the term *dyslexia* refers to dyslexia as well as its related disorders.

During the 83rd Texas Legislature, the state passed House Bill (HB 1264), which required public school districts and open-enrollment charter schools to report information regarding the number of students enrolled who are identified as having dyslexia to the Texas Education Agency (TEA) through the Public Education Information Management System (PEIMS). Given this relatively recent change, TEA wanted to understand the reporting procedures used by public school districts and open-enrollment charter schools regarding the dyslexia indicator in PEIMS. In particular, TEA desired to know whether the guidance provided to districts is sufficient to ensure that students identified as having dyslexia are accurately reported in PEIMS. In fall 2018, TEA contracted American Institutes for Research (AIR) to conduct a study to describe the reporting procedures used by districts and open-enrollment charter schools with regard to the dyslexia indicator as well as to determine whether the guidance provided to districts is sufficient to ensure that students with dyslexia are correctly reported.

To do so, AIR engaged in a set of four interrelated activities designed to build on each other and to provide TEA with a holistic picture of dyslexia identification and reporting procedures across the state. These activities included the following:

- **Policy and literature reviews** that document the history and current status of dyslexia requirements in Texas, summarize the research regarding the approximate percentage of students in public education who are identified as having dyslexia, and describe federal and state requirements and policy regarding identifying and reporting students in public education in kindergarten–grade 12
- **Extant data analyses** that use quantitative analyses of data collected in PEIMS to report the percentage of students in Texas identified in PEIMS as having dyslexia, examine district use of the PEIMS indicator and the factors (e.g., district demographics, student characteristics, or available resources) associated with use (or disuse) of the dyslexia indicator as well as the percentages of students identified and reported as having dyslexia who are also identified and reported as receiving special education services and vice versa
- **Statewide district survey** that reports dyslexia identification and reporting procedures for districts and open-enrollment charter schools across the state
- **Interviews** with a sample of districts and schools regarding their dyslexia identification and reporting procedures as well as interviews with education service centers (ESCs), which provide information and training to districts about dyslexia identification and reporting

Defining Dyslexia and Guidance For Students With Dyslexia

Dyslexia is a specific learning disability that is neurobiological in origin. It is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities.

Dyslexia, like many medical and educational constructs, has had definitional challenges; however, the most commonly accepted definition recognizes that (a) individuals demonstrate dyslexia primarily through challenges in word reading and spelling, (b) dyslexia is a life-long condition, and (c) early identification and treatment of dyslexia are associated with improved outcomes academically and quality of life.

Students identified with dyslexia typically display several key attributes, including (a) difficulty with word reading, (b) difficulty with spelling, (c) phonological processing difficulties, and (d) slow and laborious reading. There are other disorders similar to or related to dyslexia, including developmental auditory imperceptions, dysphasia, specific developmental dyslexia, developmental dysgraphia, and developmental spelling disability. In addition, dyslexia may co-occur with disabilities such as attention deficit disorder/attention deficit hyperactivity disorder, dyspraxia (difficulty with motor skills), dyscalculia (math challenges), poor organizational skills, and poor memory. The prevalence of dyslexia in the United States has not been determined definitively but the National Institute of Child Health and Human Development estimates the rate at approximately 10%.

Although there is a range in the prevalence of individuals with dyslexia, there is general agreement that approximately 1 in 10 school children have dyslexia.

Despite the challenges that students with dyslexia experience when first learning to read and write and despite the fact that reading difficulties can affect later content acquisition, it has been shown that students with dyslexia benefit when they are provided evidence-based literacy instruction. Instruction should be customized to meet student needs and provides the specific and explicit instruction required to remediate symptoms related to dyslexia, including intensified instruction in decoding, encoding, and text-based approaches to improving fluency and comprehension.

In Texas, TEA and the SBOE have worked to continuously improve dyslexia policies and provide guidance and procedures to improve the outcomes for students with dyslexia. In 1987, the SBOE first approved the *Texas Education Agency Handbook, Dyslexia and Related Disorders: An Overview of State and Federal Requirements*. *The Dyslexia Handbook* has undergone numerous revisions since then to reflect ongoing policy changes. The handbook provides guidelines for districts to identify and provide services as well as information regarding the state's dyslexia statutes and their relation to federal laws.

District Usage of the Dyslexia Indicator in PEIMS

The percentage of students who were identified in PEIMS as having dyslexia has increased slightly each year—from 2.52% in 2014–15 to 3.29% in 2017–18.

Beginning with the 2013–14 school year, public school districts and open-enrollment charter schools in Texas have been required to report to TEA the number of students enrolled in the district who are identified as having dyslexia. This report analyzes data from the 2014–15 through 2017–18 school years. The percentage of students identified in PEIMS as having dyslexia has increased by about 0.20 percentage points each school year, from 2.52% in 2014–15 to 3.29% in 2017–18. This percentage is lower than the national dyslexia prevalence estimates reported in the research. Conservative estimates put the prevalence in the United States at 4% whereas upper estimates are as high as 20% (Butterworth & Kovas, 2013; Shaywitz, 1996).

The percentage of districts reporting student dyslexia information in PEIMS increased by four percentage points, from 86.0% in 2014–15 to 90.4% in 2017–18.

Districts are required to upload dyslexia identification data at the student level through PEIMS. The percentage of districts identifying at least one student as having dyslexia increased by approximately four percentage points, from 86.0% in 2014–15 to 90.4% in 2017–18.

Usage of the dyslexia indicator in PEIMS varied by district type and ESC region across all years. Use of the dyslexia indicator by charter and rural school districts lagged behind all other district types. Whereas approximately 95% or more of all other district types reported student dyslexia identification information in PEIMS in 2017–18, fewer rural school districts (90.9%) and charter school districts (66.7%) reported this information. Regarding ESC regions, approximately 90% or more of the districts in 13 of the 20 ESC regions reported at least one student in PEIMS as having dyslexia. For the remaining seven regions, approximately 87% or fewer districts reported at least one student in PEIMS as having dyslexia.

District Characteristics Associated With Use of the Dyslexia Indicator in PEIMS

The percentage of African American students in a district, the percentage of Hispanic students in a district, being a rural district, and being a charter school district were associated with district usage of the dyslexia indicator in PEIMS.

Controlling for the other variables in the model, the following characteristics were statistically significantly associated with districts' usage of the dyslexia indicator in PEIMS:

- the percentage of African American students in the district,
- the percentage of Hispanic students in the district,
- being a rural district,
- being a charter school district, and
- missing data on the percentage of students meeting the state standard on the STAAR mathematics and reading assessment.[1]

Districts with these characteristics were statistically significantly less likely to identify one student as having dyslexia, controlling for the other variables in the model.

Percentage of Students with Dyslexia Identified as Also Receiving Special Education Services

The percentage of students identified as having dyslexia who were also reported as receiving special education services in PEIMS did not fluctuate much between the 2014–15 and 2017–18 school years. The percentage of students identified as having dyslexia who were reported in PEIMS as receiving special education services ranged from 18.4% to 19.4% during this time period.

District Dyslexia Identification and Reporting Procedures

The primary goals for this study were to describe the dyslexia identification and reporting procedures used by districts and to determine whether the guidance provided to districts is sufficient to ensure that students with dyslexia are correctly reported. To do so, an electronic survey was sent to district administrative staff in all Texas public school districts and open-enrollment charter schools soliciting information on these topic areas. In total, 758 districts completed the survey (a 65% completion rate). These districts were largely representative of all districts in the state relative to district size, geographic area in which the district resides, state accountability ratings, and demographics of student population.

Dyslexia Screening and Evaluation

Most districts reported conducting universal screening for dyslexia with students in Kindergarten–Grade 2, whereas very few districts reported conducting universal screening for students in high school.

Districts were asked a series of questions regarding their dyslexia screening and assessment procedures. Most districts reported that they conduct universal screening for dyslexia for all students in kindergarten (83.8%) and Grade 1 (85.0%), with approximately half (48.9%) conducting universal screening for all Grade 2 students. Very few districts (6.6%) reported conducting universal screening for all high school students.

[1] Missing data indicators were included in the analyses for account for missing data values for the percentage of students in a district passing the STAAR mathematics and reading assessments. Missing data values on were primarily due to data masking for small cell sizes. The missing data indicators were used in order to include these districts in the analyses.

Districts were also asked to indicate the sources of information they used to screen and assess students for dyslexia in addition to screeners and reading assessments. The five most frequently reported sources of additional information were (1) teacher reports of classroom concerns (98.1%); (2) samples of schoolwork (92.7%); (3) parent reports of history of dyslexia (91.5%); (4) classroom reading assessments (91.5%); and (5) vision screening (91.5%).

Dyslexia Identification and Reporting

Most districts indicated they did not experience barriers in terms of reporting students identified as having dyslexia (88.7%) or uploading dyslexia identification information into PEIMS (86.9%).

Districts were asked to respond to several items regarding their dyslexia identification and reporting practices. Most surveyed districts (88.7%) indicated they did not experience any barriers reporting students identified as having dyslexia or related disorders. Of the districts that did report experiencing barriers (7.5%), the top three barriers identified were (1) coding students with multiple designations (36.8%); (2) the lack of trained staff to identify students with dyslexia (21.1%); and (3) the lack of a dyslexia code in the school information system (14.0%).[2]

Similarly, most districts that responded to the survey indicated they did not experience barriers uploading dyslexia identification data into PEIMS (86.9%). Of the districts that reported experiencing barriers (3.5%), the top three barriers described were (1) coding students with multiple designations (37%); (2) reporting students with dyslexia across years (18.5%); and (3) lacking a dyslexia indicator in the school information system (11.1%).[3]

Dyslexia and Special Education

When students are eligible for both dyslexia and special education services, 16% of districts reported identifying students as only receiving special education services and 1% of districts reported identifying students as having dyslexia.

Districts were asked to indicate the information they would report in PEIMS for students who are eligible for special education services and who are identified as having dyslexia. Most districts (82.3%) reported that they identify these students as having dyslexia and receiving special education services. Approximately 15% of districts reported that they only report these students as receiving special education services—they do not indicate that these students have dyslexia. Less than 1% of districts reported that they only report these students as having dyslexia—they do not indicate that these students are receiving special education services.

[2] Percentages reporting and not reporting barriers do not equal 100% because not all districts indicating they experienced barriers reporting students with dyslexia described those barriers, and districts were allowed to indicate they were "not sure" if they experienced barriers.
[3] Percentages reporting and not reporting barriers do not equal 100% because not all districts indicating they experienced barriers uploading data into TSDS PEIMS described those barriers, and districts were allowed to indicate they were "not sure" if they experienced barriers.

Requested Guidance and Information

Districts need additional guidance on dyslexia identification and screening procedures and PEIMS reporting procedures.

Finally, districts were asked to describe the information or assistance that would help them improve their procedures for identifying students with dyslexia or related disorders and reporting these students in PEIMS. The highest number of districts requested guidance on dyslexia identification and screening procedures (27.3%), guidance on PEIMS reporting procedures (26.8%), and additional training opportunities for staff (21.3%).

Qualitative Findings from ESCs, Districts, and Schools

In addition to survey data collection and analysis of extant PEIMS data, the research team conducted 35 interviews with staff from regional ESCs, districts, and schools within Texas to explore how educators understand issues surrounding reporting on the dyslexia indicator in PEIMS, including processes for identifying students with dyslexia and related disorders.

Dyslexia Reporting

All ESC and most school and district interview participants expressed familiarity with the PEIMS submission requirements.

Participants in 32 of the 35 interviews (91.4%) expressed some familiarity with the PEIMS submission requirements. Interview participants described two main sources of guidance for PEIMS dyslexia reporting: resources from regional ESCs and The Dyslexia Handbook (Texas Education Agency, 2014). Interviewees also said communications about reporting requirements generally come through the ESCs. Consistent with survey responses, fewer interview participants indicated they receive information directly from TEA, though several did report that TEA is a source of PEIMS information. Despite access to resources, there were several frequently mentioned areas of confusion about PEIMS reporting requirements. When asked about the greatest barriers to accurate PEIMS reporting on students with dyslexia and related disorders, the most common response was school and district confusion about reporting on students with multiple designations. Participants in eight interviews (22.9%)—including five ESCs, two schools, and one district—said this is a challenge. The second most commonly cited barrier was having new or untrained staff responsible for PEIMS reporting.

Dyslexia Identification

More than half of interview participants said the greatest barrier to accurately identifying students for services is the lack of resources for understanding and identifying dyslexia-related disorders.

Interview participants in 31 of the 35 interviews (88.6%) expressed familiarity with the processes used to identify students with dyslexia or related disorders. Participants in 28 of the 35 interviews (80.0%) said schools and districts rely on ESC support to shape and inform their dyslexia identification process. ESC support included trainings and workshops as well as the administration of the Texas Dyslexia Identification Academy (TDIA) modules. Participants in 16 interviews (45.7%), including 8 ESCs, 4 districts, and 4 schools, said the modules are an important resource for schools and districts. The second most commonly cited resource was The Dyslexia Handbook, with 22 of the 35 interviews (62.9%) participants mentioning it as a useful source of identification information, including 6 ESCs, 8 districts, and 7 schools.

In 18 of the 35 interviews (51.4%)—including 7 ESCs, 4 districts, and 7 schools—participants said the greatest barrier to accurately identifying students to receive services is the lack of resources for understanding and identifying related disorders. The second most commonly cited challenge for identifying students with dyslexia and related disorders was confusion about which screeners or assessments schools and districts should use. Participants from six ESCs, three districts, and three schools said this is an issue (34.3% of all interviews). Participants from six ESCs, one district, and four school interviews said general education teachers need additional dyslexia identification training (31.4% of all interviews). This challenge is especially true for schools and districts that have no or limited support from a qualified dyslexia specialist. This issue was reported by two ESCs, two districts, and four schools (22.3% of all interviews).

Recommendations

Based on data obtained from the literature and policy reviews, extant data analyses, statewide survey of Texas school districts, and interviews with district, school, and ESC staff, AIR recommends that TEA undertake the following actions to guarantee the guidance provided to school districts is sufficient in ensuring that students identified as having dyslexia are identified, served, and correctly reported:

a) Provide additional guidance and training for ESC, district, and school staff on the identification and service of students with dyslexia and related disorders

b) Provide additional guidance on PEIMS reporting procedures, with particular attention to clarifying the requirements on how to report students with dyslexia who also have a Section 504 plan or receive special education services

c) Provide additional guidance on best-practice dyslexia identification and screening procedures, such as a list of state-approved screeners or assessments educators can use to identify dyslexia

d) Provide school, district, and ESC staff with training and guidance on identifying, reporting, and serving students with related disorders (e.g., dysphasia, auditory imperceptions, or developmental spelling disabilities) to the extent that current research is available

e) Focus additional efforts for improving dyslexia identification and reporting on charter schools, rural school districts, and districts with high percentages of African American and Hispanic students

1. Introduction

Dyslexia is the most commonly diagnosed learning disability. The Texas Education Code (TEC) defines dyslexia as a disorder of constitutional origin manifested by a difficulty in learning to read, write, or spell despite conventional instruction, adequate intelligence, and sociocultural opportunity [TEC §38.003(d)]. The International Dyslexia Association describes it as follows, "Dyslexia is a specific learning disability that is neurobiological in origin. It is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities" (2003). Dyslexia is generally referred to as a learning disability because it can be difficult for a student with dyslexia to succeed without proper and specialized instruction. Although often thought of as purely a reading difficulty, dyslexia often causes difficulties with both oral and written language skills.

Students can also experience disorders considered similar to dyslexia, such as developmental auditory imperceptions, dysphasia, specific developmental dyslexia, developmental dysgraphia, and developmental spelling disability. TEC refers to these as "related disorders" [TEC §38.003(d)]. In this report, the term *dyslexia* refers to dyslexia as well as its related disorders.

The Texas State Board of Education (SBOE) was one of the first in the country to prioritize dyslexia as part of its "focus on early identification and intervention for children who experience reading difficulties" (Texas Education Agency, 2014, p. 3). The SBOE first developed its dyslexia handbook in 1986, which has undergone numerous revisions toward development of the current version, *The Dyslexia Handbook—2018 Update: Procedures Concerning Dyslexia and Related Disorders* (Texas Education Agency, 2018a). The 2014 version of The Dyslexia Handbook, following House Bill (HB) 1264, requires public school districts and open-enrollment charter schools to report information regarding the number of students enrolled in the district or school who are identified as having dyslexia to the Texas Education Agency (TEA) through the Public Education Information Management System (PEIMS) [TEC §42.006(a-1)]. In response to HB 1264, the PEIMS data standards were updated to include a dyslexia indicator code beginning with the 2013–14 school year. The dyslexia code indicates whether a student has been identified as having dyslexia or related disorders as identified in TEC §38.003. The 2018 update to The Dyslexia Handbook contains updates to statutory requirements added by the 85th Texas Legislature, including updated screening and evaluation processes to identify students with dyslexia, as well students with dysgraphia.

Given these changes, TEA wanted to understand the reporting procedures used by public school districts and open-enrollment charter schools regarding the dyslexia indicator in PEIMS. In particular, TEA desired to know whether the guidance provided to districts is sufficient to ensure that students identified as having dyslexia are accurately reported in PEIMS. In fall 2018, TEA contracted American Institutes for Research (AIR) to conduct a study to describe the reporting procedures used by districts and open-enrollment charter schools with regard to the dyslexia indicator as well as to determine whether the guidance provided to districts is sufficient to ensure that students with dyslexia are correctly reported.

1.1 Evaluation Design and Research Questions

To help TEA understand the reporting procedures used by Texas local education agencies (LEAs) regarding the dyslexia indicator in PEIMS as well as to provide recommendations to TEA to ensure proper and accurate identification and reporting of students who have dyslexia or related disorders, AIR engaged in a set of four interrelated activities. The activities were designed to build on each other and to provide TEA with a holistic picture of dyslexia identification and reporting procedures across the state. These activities included the following:

- **Policy and literature reviews** that document the history and current status of dyslexia requirements in Texas, summarize the research regarding the approximate percentage of students in public education who are identified as having dyslexia, and describe federal and state requirements and policies regarding identifying and reporting students in public education in Grade K–12;
- **Extant data analyses** that use quantitative analyses of data collected in PEIMS to examine district use of the PEIMS indicator and the factors (e.g., district demographics, student characteristics, available resources) associated with use (or disuse) of the dyslexia indicator as well as the percentages of students identified and reported as having dyslexia who also are identified and reported as receiving special education services and vice versa;
- **Statewide district survey** that reports dyslexia identification and reporting procedures for districts and open-enrollment charter schools across the state; and
- **Interviews** with a sample of districts and schools regarding their dyslexia identification and reporting procedures as well as interviews with regional education service centers (ESCs), which provide information and training to districts about dyslexia identification and reporting.

The research questions guiding the study and the data sources used to answer them are shown in Table 1.1.1.

Table 1.1.1 Research Questions and Data Sources

Research Questions	Data Sources			
	Literature and Policy Review	Extant Data Files	District Survey	Interviews
1. What is current state and federal policy for identifying and reporting students with dyslexia in K–12 public education? a. What does the research suggest is the true approximate percentage of students in K–12 public education who are identified as having dyslexia or related disorders?	X			
2. What percentage of LEAs in Texas are using the dyslexia indicator (reporting data) to report the number of K–12 students with dyslexia in the district or open-enrollment charter schools? a. What factors (e.g., district demographics, student characteristics, available resources) are associated with LEAs' use of the dyslexia indicator in PEIMS?		X		
3. What percentage of students identified and reported as having dyslexia or a related disorder also are identified and reported as receiving special education services in PEIMS? a. What percentage of students identified and reported as receiving special education services are identified and reported as having dyslexia or a related disorder in PEIMS?		X		
4. What are the procedures used by LEAs in identifying and reporting students with dyslexia or a related disorder? How do these practices differ across LEAs? a. What are the barriers LEAs experience in identifying and reporting students with dyslexia and related disorders in PEIMS?	X		X	X
5. What types of information and guidance are provided to LEAs by TEA, ESCs, or other sources regarding the identification and reporting of students with dyslexia or a related disorder?	X	X	X	X
6. On the basis of this study, what are recommendations for stakeholders for improving practices to ensure that students with dyslexia and related disorders are identified promptly and reported accurately in PEIMS?	X	X	X	X

Note: ESCs = education service centers; LEAs = local education agencies; PEIMS = Public Education Information Management System; TEA = Texas Education Agency.

1.2 Overview of the Report

Chapter 2 provides a review of the research literature on dyslexia, including the definition of dyslexia, dyslexia identification processes, characteristics of individuals with dyslexia or related disorders, and the prevalence of dyslexia. Chapter 3 presents an overview of dyslexia policy in Texas from 1986 to the present as well as a summary of dyslexia practices nationwide and federal policy and guidance for dyslexia. Chapter 4 summarizes extant data on the percentages of districts and open-enrollment charter schools reporting dyslexia data in Texas' Public Education Information Management System (PEIMS). Additionally, Chapter 4 presents findings from analyses of extant data. The analyses focus on the percentage of districts uploading dyslexia identification data in PEIMS and district characteristics associated with uploading these data. Chapter 5 provides results from a statewide district survey regarding dyslexia identification and reporting procedures. Districts were asked to describe barriers they experienced reporting students with dyslexia as well as identify assistance that might help them improve their identification and reporting procedures for students with dyslexia and related disorders. Chapter 6 presents findings from interviews with district, school, and ESC staff. The interviews probed deeper into any challenges that stakeholders experience around reporting procedures and their recommendations about additional guidance. Finally, Chapter 7 provides recommendations for TEA on how to help districts improve their identification and reporting practices in order to ensure that students with dyslexia and related disorders are identified promptly and reported accurately through PEIMS. Throughout this report, the term district is used to refer to both public school districts and open-enrollment charter schools. District is used for clarity and to reduce text length.

2. Review of Research on Dyslexia

This chapter provides a review of the research on dyslexia, including an introduction to dyslexia and some related disorders, characteristics of and identification process for individuals with dyslexia or related disorders, and an overview on how educators can effectively serve students with dyslexia and related disorders. Over the last five decades, professionals from a range of disciplines have agreed on use of the term "dyslexia" to define individuals with significant word reading and spelling problems. Dyslexia refers to specific difficulties in word reading and spelling, manifested as significant difficulties in overall reading and writing, and is considered a common contributor to academic difficulties (Elliott & Grigorenko, 2014; Shaywitz & Shaywitz, 2005). While dyslexia, like many medical and educational constructs, has had definitional challenges, however, the most commonly accepted definition recognizes that: (a) individuals demonstrate dyslexia primarily through challenges in word reading and spelling, (b) dyslexia is a life-long condition, and (c) early identification and treatment of dyslexia are associated with improved outcomes academically and in quality of life. Today, the definition that is most accepted was put forth by the International Dyslexia Association: "Dyslexia is a specific learning disability that is neurobiological in origin. It is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities" (2003).[4] This report uses both the IDA and the Texas Education Code §38.003(d) definitions of dyslexia, as the TEC defines dyslexia as "a disorder of constitutional origin manifested by a difficulty in learning to read, write, or spell despite conventional instruction, adequate intelligence, and sociocultural opportunity."

2.1 An Introduction to Dyslexia

As the most commonly diagnosed learning disability, dyslexia has been the source of much debate amongst researchers for decades. Researchers have historically debated how to best define and describe dyslexia, in some cases using terms such as "reading disability and reading difficulties" interchangeably with "dyslexia" (Vellutino et al, 2004). The construct of dyslexia has been in the medical and psychological literature since 1887 when a German ophthalmologist, Berlin, identified 'word blindness' in adults, which he considered as a form of brain damage (Elliott & Grigorenko, 2014). Since that time, numerous discussions of dyslexia have resulted in various names including "congenital word blindness" (Hinshelwood, 1917) and "strephosymbolia" meaning twisted symbols (Orton, 1937). In many ways, the range of terms used to describe dyslexia represents the range of disciplines who have studied dyslexia including psychologists, neuropsychologists, medically trained individuals, educators, and special education educators.

Despite the nationally accepted definition of dyslexia as "a brain-based type of learning disability that specifically impairs a person's ability to read" (National Institutes of Health, 2016), many misconceptions about the disability persist, making it difficult for untrained persons to identify and diagnose the reading impairment. This confusion is in part due to the fact that individuals with dyslexia demonstrate otherwise typical intellectual functioning and developmental growth. Stanley and Petscher provide clarification on some of the most common misperceptions of dyslexia, including that dyslexia is not due to deficits in intellectual functioning, and it is associated with brain-based phonological impairments, not visual

[4] The full IDA definition of dyslexia states that the disorder "is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities. These difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede growth of vocabulary and background knowledge."

problems (2017). In addition, dyslexia does not mean that the student cannot learn to read but rather that the student requires appropriate evidence-based instruction to support reading development. Perhaps the most common misconception is that dyslexia involves seeing letters and words backwards. In actuality, writing characters or words backward is a common and systematic error among many typically-developing early and emergent readers (Hudson, High, & Al Otaiba, 2007). The vast majority of students with dyslexia do not reverse letters when writing after they are provided appropriate evidence-based instruction (Stanely & Petscher, 2017).

The precise prevalence of dyslexia in the United States has not been determined but conservative estimates put the prevalence at 4% whereas upper estimates are as high as 20% (Butterworth & Kovas, 2013; Shaywitz, 1996). The National Institute of Child Health and Human Development estimates the prevalence of dyslexia at about 10%. There is a range for prevalence figures because (1) children experience variation in early language supports that influence dyslexia and (2) practitioners use different cut-points on the continuum for determining a dyslexia diagnosis (Rose, 2009).

Prevalence data is also impacted by variations in how educators identify and recognize overlap among disorders similar to or related to dyslexia (Rose, 2009). These include developmental auditory imperceptions, dysphasia, specific developmental dyslexia, developmental dysgraphia, and developmental spelling disability. Dyslexia also often co-occurs with disabilities such as attention deficit disorder (ADD)/attention deficit hyperactivity disorder (ADHD), dyspraxia (difficulty with motor skills), dyscalculia (math challenges), poor organizational skills, and poor memory (IDA, 2003).

Because dyslexia is related to language disorders, the extent to which dyslexia is represented in other populations such as individuals who are English learners (ELs) is a consideration. Based on available research, the national prevalence of dyslexia is about the same in populations of ELs as it is in non-ELs. There has also been considerable concern about whether males are more at risk for dyslexia than females. While there is some research to suggest that this might be the case (Shaywitz, 2005), international studies suggest that the risk for dyslexia is only slightly higher for males (Elliott & Grigorenko, 2014).

2.2 Identifying and Diagnosing Dyslexia

Likely tied to the historical debate over its definition, there has been uncertainty as to how to diagnose and subsequently serve children who have symptoms consistent with dyslexia. As Siegel (2006) noted, there is no blood or brain imaging test to definitively diagnose the disorder. However, progress in defining dyslexia has subsequently led to progress in screening and identifying students with dyslexia. For the most part, procedures for screening individuals with dyslexia focus on early identification of students who demonstrate significant problems in phonological awareness, sound-to-letter mapping, word decoding, fluency and comprehension and difficulties with spelling and written expression (Lyon et al., 2003; Tunmer & Greaney, 2010). It is important to note that not all students with reading problems have dyslexia. Reading problems can also be a function of inappropriate instruction or may also occur when students have vision, hearing, or intellectual disabilities that interfere with reading (Rose, 2009).

Current best practices to identify students with dyslexia necessitate early screening (Hall & Moats, 1999; Nevills & Wolfe, 2009; Ferrer, et al., 2015). Screening is a relatively brief process focusing on specific indicators, and screeners are just the first step in identifying students who may have a reading disability; educators must conduct a full assessment before diagnosing a student with dyslexia or a related disorder

(Selznick, 2015). According to the International Dyslexia Association (2009), in addition to a child's educational background and family history, all dyslexia evaluations should take the following factors into consideration:

- Oral language skills;
- Word recognition;
- Decoding;
- Spelling;
- Phonological processing;
- Automaticity/fluency skills;
- Reading comprehension; and
- Vocabulary knowledge.

It is important to note that while dyslexia can be identified as early as preschool and early elementary grades, it can also manifest after the primary grades and there are a number of screeners and diagnostic assessments available for secondary students (Selznick, 2015).

According to research, students with dyslexia typically display several key attributes: (a) difficulty with word reading; (b) difficulty with spelling, including efficiently writing letters and remembering the order of letters in words; (c) phonological processing difficulties that affect the way they connect sounds of language to print; and (d) reading is often slow and laborious. In addition, if a parent has dyslexia there is an increased likelihood that their children will also have dyslexia (Gabrieli, 2009; Stanley & Petscher, 2017). Individuals with dyslexia may experience long-term effects. Challenges that students experience when initially learning to read and write often continue into middle and high school (Edmonds et al., 2009), which negatively affects content and knowledge acquisition (Torgesen et al., 2007). Symptoms and consequences of dyslexia may persist throughout the lifespan (Undhelm, 2009).

2.3 Serving Students With Dyslexia and Related Disorders

While many sources document the extraordinary challenges individuals with dyslexia endure learning to read, research also shows the gains students with dyslexia make when provided with the evidence-based practices needed to improve literacy outcomes (Elliott & Grigorenko, 2014; Klingner, Vaughn, & Boardman, 2015; Wolf, 2007). When provided consistently and with fidelity, these practices yield significantly positive outcomes in reading and general achievement (e.g., Scammaca et al., 2016; Wanzek & Vaughn, 2007; Wanzek, Vaughn, et al., 2013). The negative consequences of inadequate or inappropriate instruction for students with dyslexia are well documented (Rose, 2009). For example, the historical debate between the efficacy of teaching phonics versus whole language approaches dominated reading instruction broadly and influenced very directly the identification and treatment of individuals with dyslexia (Chall, 1996; Kim, 2008; Pearson, 2004). When teachers did not recognize the benefits of phonics instruction for students with dyslexia, their progress is impaired. This is because individuals with dyslexia have a phonological processing disorder that inhibits their ability to map sounds to print. Over the past 25 years, numerous randomized control trials have contributed to a persuasive body of evidence about effective instructional practices for individuals with reading disabilities, including those with dyslexia. The most commonly cited practices are summarized in this section.

In general, students with dyslexia benefit when well-prepared teachers provide evidence-based instruction, including instruction in decoding, encoding, and text-based approaches to improving fluency and comprehension. Successful instruction for students with dyslexia should include explicit teaching of critical elements essential for instruction include: phonemic awareness, phonics, spelling and writing, fluency, vocabulary, and comprehension (Vaughn & Roberts, 2007). Additionally, teachers of individuals with dyslexia and related disorders must appropriately intensify the instruction to meet their individual needs. When intensifying instruction, there are several pathways to pursue (Vaughn, Wanzek, Murray & Roberts, 2012). Studies have demonstrated the importance of adequately differentiating instruction through more explicit and systematic instruction, which may include distributing the learning tasks, providing more opportunities to practice and respond, and giving students specific task-related feedback (Rayner, Foorman, Perfetti, Pesetsky, & Seidenberg, 2001; Ehri & Flugman, 2018; Vaughn et al, 2011; Scammacca, Roberts, Vaughn, & Stuebing, 2015). Research also suggests educators need to consider whether adequate time is provided throughout the day as accelerating progress for these students is unlikely to occur without time devoted to addressing their specific academic and social-emotional needs (Foorman, & Torgesen, 2001; Torgesen et al., 2001; Wanzek & Vaughn, 2007). Finally, current literature suggests educators provide a learning environment aligned with students' needs. This may often require adjusting the group size so that students are in smaller groups or one-on-one instruction to allow frequent opportunities to respond (Stockhard, Wood, Coughlin, & Khoury, 2018; Vellutino, Fletcher, Snowling, & Scanlong, 2004; Vaughn, Gersten, & Chard, 2000).

Despite a growing body of research documenting best practices for serving students with dyslexia, challenge persists. These challenges include limitations in availability of highly trained special education personnel (Rosenzweig, 2009), difficulty translating and implementing research-based knowledge into teaching practice (Blachman et al., 2014; Swanson & Vaughn, 2010), and delayed or weak implementation of effective interventions to address reading difficulties (Vaughn & Wanzek, 2014). Taken together, these issues can contribute to significant disparities in the proper identification, reporting, and intervention services to address dyslexia in public schools. This report presents findings from surveys and interviews with educators across who, in addition to detailing their reporting and identification processes, also described challenges they experience in identifying and serving students with dyslexia.

3. Policy Review

This chapter provides a summary of dyslexia practices nationwide, information on federal policy and guidance for dyslexia, and a historical overview of the Texas state dyslexia legislation from 1986 to the present.

3.1 Practices Nationwide and Federal Policy Guidance for Dyslexia

Nationally, the current landscape for dyslexia policy is varied, evolving as new legislation passes in individual states. Currently, 38 states have dyslexia legislation (National Center for Improving Literacy, 2018). Of these, 21 states require that educators screen students for dyslexia and 15 states require the provision of interventions for students with dyslexia. In addition, some states have requirements for training teachers on dyslexia, with 10 states requiring pre-service training and 19 requiring in-service training. Five states—including Texas—have legislation with all four of the above requirements. There are currently 18 states with handbooks outlining dyslexia policies and guidance (Dyslegia 2018).

Though individual states develop their own resources, guidelines and legislation, they must do so in adherence with federal policies. Students identified as having dyslexia or a related disorder may be eligible for an Individualized Education Plan (IEP) and special education services under the purview of the federal Individuals with Disabilities Education Act (IDEA), originally passed in 1975 (updated in 1990, 1997, and 2004). The most recent revision specifies that children with an identified disability receive special education and related services to address individual needs. In 2015, in order to clarify confusion, the U.S. Department of Education issued a letter with the purpose of clarifying that there is nothing in the IDEA that prohibits the use of the terms dyslexia, dyscalculia, and dysgraphia in evaluation, eligibility determinations, or IEP documents. IDEA includes the Child Find mandate. This mandate requires each state to devise a practical method to determine which children need and receive special education services. According to Section 504 of the federal Rehabilitation Act, students identified as having dyslexia or a related disorder may be eligible for accommodations. According to the U.S. Office for Civil Rights, students are eligible for accommodations and services under Section 504 if they (1) have a physical or mental impairment that substantially limits one or more major life activities; or (2) have a record of such an impairment; or (3) can be regarded as having such an impairment. Reading, writing, and learning are considered major life activities—defined as activities that an average person can complete with little or no difficulty.

Students identified as having dyslexia and related disorders may receive services guided by either an IEP or a Section 504 plan. Districts follow federal mandates to determine student eligibility. If a student's dyslexia or a related disorder falls under the guidelines of IDEA, it is considered a disability. If the student's disorder falls under the guidelines of IDEA, an IEP will be developed to outline special education services, any accommodations or modifications, and to specify goals and objectives for individualized instruction. However, if the student is identified as having dyslexia or a related disorder under Section 504, the student is still considered as having a disability, but the student will be served under a Section 504 plan that specifies the dyslexia instruction and accommodations as appropriate for the reading needs of the student.

3.2 History of Dyslexia in Texas

Legislation, Policy, and Practices

In Texas, the Texas Education Agency (TEA) has a long history of working to clarify dyslexia policies and provide guidance and procedures to improve the outcomes for students with dyslexia. Texas first began creating policies regarding dyslexia requirements and guidelines in public education for grades K–12 in 1986[5]. At that time, the 69th Legislature passed bill HB 157, which defined dyslexia and related disorders and mandated screening and treatment by local school districts. A second bill was passed in 1986 that mandated continuing education for teachers on dyslexia and related disorders.[6] That year TEA sent a letter to all school districts explaining that HB 157 should be implemented at all grade levels, K-12.

Additional legislation passed in the subsequent decade that continued to shape dyslexia policy and practices.

- In 1991, HB 1314 passed that allowed instructional accommodations for students with dyslexia. In addition, the first state dyslexia coordinator position was created in Education Service Center 10 to assist with implementation of dyslexia procedures.
- During the 1993 - 1994 legislative session, SB 7 passed, requiring accommodations for testing students with dyslexia.
- In 1995, as part of Governor Bush's Texas Reading Initiative and a focus on reading proficiency by 3rd grade, the Texas legislature mandated that the entire public-school education code be rewritten. However, advocates worked to have previous dyslexia laws preserved so that they would not be lost in the transition. The Texas State Board of Education (SBOE) updated all reading curriculum to include a stronger, explicit, scientifically-researched phonics-based curriculum.
- In 1997, the legislature passed the Student Success Initiative (TEC §28.006), which resulted in the implementation of reading diagnosis procedures for early identification of reading difficulties, such as dyslexia and related disorders. In addition, informal screening was developed for early identification of reading difficulties and funding for dyslexia coordinators was approved for all 20 regional education service centers.
- In 2003, TEC §7.028(b) delegated responsibility for school compliance to the local school board. Therefore, monitoring of school compliance for serving students with dyslexia and related disorders fell under the purview of the local school board.
- In 2004, TEA conducted a longitudinal study on assessments that resulted in the use of bundled accommodations (oral reading of item stems/answer options; extended time; and proper nouns lists) for students with dyslexia when taking state assessments. After this change, state test proficiency rates increased from 9% to 41% for students with dyslexia in elementary through middle school.

[5] The timeline presented for 1986 - 2010 was adapted from the Texas Education Agency (2014) *The Dyslexia Handbook: Procedures Concerning Dyslexia and Related Disorders*.

[6] Later, the legislature repealed the professional development law because many teachers were opposed to this mandate being tied to teacher evaluation and career ladders. The Texas Teacher Career Ladder, in place from 1984-85 to 1992-93, provided salary supplements to teachers who met specific criteria, including classroom performance and meeting specific professional development requirements. (TEC Chapter 13 Subchapter E, 1986)

- In 2009, Occupations Code, Ch. 403 passed that mandated the specific educational and experience requirements for licensed dyslexia practitioners and licensed dyslexia therapists. In the summer of 2010, the need arose for an updated version of the Dyslexia Handbook to reflect new legislation and additional research.
- In 2011, several new laws pertaining to dyslexia and related disorders were passed or updated. One piece of legislation required integrating technology into the classroom to help accommodate students with dyslexia (TEC §38.0031 was updated to reflect the changes). New legislation regarding the retesting of students for dyslexia stated that, unless otherwise provided by law, an institution of higher education (defined by Section 61.003), may not reassess a student determined to have dyslexia for the purpose of assessing the student's need for accommodations until the institution of higher education reevaluates the information obtained from previous assessments of the student. TEC §51.9701 and TEC §38.003(b-1) were updated to reflect the new mandate. Texas Occupations Code §54.003 was updated to reflect the new requirements. Educator preparation and continuing education requirements for dyslexia were enacted and outlined in the amendments made to TEC §21.044 and §21.054.
- In 2013, TEC §42.006(a-1) was amended to require reporting in PEIMS the number of students identified with dyslexia.
- In 2015, legislation regarding the requirements for licensed dyslexia practitioners and licensed dyslexia therapists was amended (Occupations Code, Ch. 403). The screening and treatment for dyslexia and related disorders was amended in 2017 (TEC §38.003).
- In 2017, the Texas legislature passed HB 1886 which introduced requirements for the screening of all students enrolling in Texas public schools for dyslexia or related disorders.

Most recently, in 2018, TEA issued a letter to administrators and local education agencies with the intent to provide guidance and clarification regarding the provision of supports and interventions for a student identified with, or suspected of having, dyslexia or a related disorder. The letter reiterated and clarified that the Child Find mandate under the IDEA applies to students with, or suspected of having, dyslexia or a related disorder.

The Dyslexia Handbook

In 1987, in support of the dyslexia legislation, the State Board of Education (SBOE) first approved the *Texas Education Agency Handbook, Dyslexia and Related Disorders: An Overview of State and Federal Requirements*. The Dyslexia Handbook was revised and updated several times in the subsequent decades (see Table 1) to align with the most current laws, policies, and practices.

Table 3.1.1 TEA Dyslexia Handbook Revision History: 1986–Present

Year	Revision Details
1986–87	In support of new dyslexia legislation passed by the Texas Legislature, the SBOE first approved the *Texas Education Agency Handbook, Dyslexia and Related Disorders: An Overview of State and Federal Requirements.*
1992,1998, 2001	The SBOE approved new guidelines called the *Revised Procedures Concerning Dyslexia and Related Disorders* in 1992, which were revised again in 1998 and 2001 to reflect ongoing policy changes. In 2001, the handbook was renamed *The Dyslexia Handbook: Procedures Concerning Dyslexia and Related Disorders*.
2006–07	The Dyslexia Handbook underwent additional revisions in 2006–07. The SBOE continued to emphasize the importance of using research-based strategies to prevent or address reading difficulties and to provide appropriate instruction to struggling readers. In November 2006, *The Dyslexia Handbook Revised 2007: Procedures Concerning Dyslexia and Related Disorders* was approved.
2010	In 2010, there was an update of The Dyslexia Handbook to include new legislation and additional research related to dyslexia, to support early intervention and high-quality training of teachers, and to equip teachers with skills to prevent reading failure.
2014	*The Dyslexia Handbook: Procedures Concerning Dyslexia and Related Disorders (The Dyslexia Handbook)* was updated in 2014 as a result of new legislation passed in the 82nd and 83rd legislative sessions.
2018	*The Dyslexia Handbook—2018 Update: Procedures Concerning Dyslexia and Related Disorders* was finalized in November as a result of new legislation passed in the 84th and 85th legislative sessions. It clarifies processes regarding identification and services for students, including students with dysgraphia. The 2018 update to The Dyslexia Handbook also includes guidance for screening students for dyslexia. The Dyslexia Handbook contains the SBOE-approved procedures concerning dyslexia and related disorders and provides guidelines for school districts to follow as they identify and provide services for students with dyslexia. Additionally, The Dyslexia Handbook provides school districts and parents or guardians with information regarding the state's dyslexia statutes and their relation to federal laws. Specifically, it outlines relevant information pertaining to the Rehabilitation Act of 1973, Section 504, as amended in 2008 (§ 504), the Americans With Disabilities Amendments Act, and the Individuals With Disabilities Education Act of 2004 (IDEA, 2004). This handbook replaces all previous handbooks and guidelines.

Source: Texas Education Agency (2014). *The Dyslexia Handbook: Procedures Concerning Dyslexia and Related Disorders*. *Note*: IDEA = Individuals With Disabilities Education Act; SBOE = State Board of Education; TEA = Texas Education Agency.

4. District Use of the Dyslexia Indicator

This chapter presents findings from quantitative analyses conducted using extant PEIMS data. The analyses investigated:

- the percentage of students identified in PEIMS as having dyslexia,
- the percentage of districts uploading student dyslexia identification information in PEIMS between 2014–15 and 2017–18,
- characteristics of districts associated with uploading student dyslexia identification information in PEIMS, and
- the percentage of students receiving special education services who were identified as having dyslexia as well as the percentage of students identified as having dyslexia reported as receiving special education services.

4.1 Percentage of Students Identified in PEIMS as Having Dyslexia

Beginning with the 2013–14 school year, districts in Texas have been required to report to TEA the number of students enrolled in the district who are identified as having dyslexia. Districts are required to upload dyslexia identification data at the student level through PEIMS. Districts may not upload files with missing values for the dyslexia indicator, so all students are coded as '1' identified as having dyslexia, or '0' not identified as having dyslexia. This report examines district reporting of students with dyslexia during the 2014–15 through 2017–18 school years. During this time period the PEIMS data standards have remained the same.

Table 4.1.1 presents the number and percentage of students identified in PEIMS as having dyslexia during the 2014–15 through 2017–18 school years. As shown, this percentage has increased by about 0.20 percentage points each school year, from 2.52% in 2014–15 to 3.29% in 2017–18. This percentage is lower than the national dyslexia prevalence estimates reported in the research. As reported in Chapter 2, conservative estimates put the prevalence in the United States at 4% whereas upper estimates are as high as 20% (Butterworth & Kovas, 2013; Shaywitz, 1996). The National Institute of Child Health and Human Development estimates the prevalence of dyslexia in the United States at about 10%.

Table 4.1.1 Number and Percentage of Students Identified in PEIMS as Having Dyslexia by School Year

Year	K-12 Enrollment	Students Identified in PEIMS as Having Dyslexia	
		Number	Percentage
2014 – 2015	4,990,118	125,739	2.52
2015 – 2016	5,056,027	141,027	2.79
2016 – 2017	5,110,865	154,392	3.02
2017 – 2018	5,143,315	169,036	3.29

Source: Texas Public Education Information Management System (PEIMS) data files, 2014–15 to 2017–18).

4.2 District Use of the Dyslexia Indicator in PEIMS

TEA was interested in learning how district reporting of student dyslexia identification has changed over time. Table 4.2.1 displays the number and percentage of districts identifying at least one student in the district having dyslexia in PEIMS during the 2014–15 through 2017–18 school years.[7] As shown, the percentage of districts identifying at least one student as having dyslexia has increased by approximately four percentage points, from 86.0% in 2014–15 to 90.4% in 2017–18.

Usage of the dyslexia indicator in PEIMS varied by district type across all years. Although the percentage of districts reporting at least one student as having dyslexia in PEIMS has increased across all district types, charter and rural school districts continue to lag behind (Table 4.2.1). Whereas approximately 95% or more of all other district types reported student dyslexia identification information in PEIMS in 2017–18, fewer rural school districts (90.9%) and charter school districts (66.7%) reported this information.

Similarly, use of the dyslexia indicator in PEIMS varied by ESC region. In 2017–18, approximately 90% or more of the districts in 13 of the 20 ESC regions reported at least one student in PEIMS as having dyslexia. For the remaining seven regions, between approximately 63% and 87% of districts reported at least one student in PEIMS as having dyslexia (Table 4.2.2).

[7] At the time the data analyses included in this report were conducted, data for the 2018–19 school year was not yet available.

Table 4.2.1. Number and Percentage of Districts Uploading Student Dyslexia Identification Information in PEIMS, Overall and by District Characteristics

	2014–15 (District N = 1257)		2015–16 (District N = 1190)		2016–17 (District N = 1193)		2017–18 (Districs N = 1198)	
	Number	Percentage	Number	Percentage	Number	Percentage	Number	Percentage
All Districts	1,018	86.0	1,035	87.0	1,065	89.3	1,083	90.4
District Type								
Charter School Districts	97	59.5	107	63.3	112	64.7	118	66.7
Independent Town	65	95.6	65	95.6	65	95.6	66	97.1
Major Suburban	78	98.7	78	98.7	78	98.7	78	98.7
Major Urban	11	100.0	11	100.0	11	100.0	11	100.0
Non-Metropolitan Fast Growing	25	89.3	26	92.9	26	92.9	27	96.4
Non-Metropolitan Stable	161	92.5	165	94.8	168	96.6	168	96.6
Other Central City	37	97.4	37	97.4	36	94.7	36	94.7
Other Central City Suburban	157	95.7	160	97.6	162	98.8	162	98.8
Rural	387	84.3	386	84.1	407	88.9	458	90.9

Source: Texas Public Education Information Management System (PEIMS) data files, 2014–15 to 2017–18.

Table 4.2.2. Number and Percentage of Districts Uploading Student Dyslexia Identification Information in PEIMS, Overall and by Region

	2014–15		2015–16		2016–17		2017–18	
	Number	Percentage	Number	Percentage	Number	Percentage	Number	Percentage
Region								
1–Edinburgh	35	81.4	35	81.4	35	81.4	37	86.1
2–Corpus Christi	36	78.3	36	78.3	39	84.8	39	84.8
3–Victoria	33	84.6	35	89.7	35	89.7	35	89.7
4–Houston	54	67.5	57	70.4	59	72.0	64	78.1
5–Beaumont	32	88.9	33	91.7	34	94.4	34	94.4
6–Huntsville	52	86.7	54	90.0	56	93.3	58	95.1
7–Kilgore	89	87.3	92	90.2	94	92.2	95	93.1
8–Mount Pleasant	42	89.4	42	89.4	43	91.5	47	100.0
9–Wichita Falls	35	94.6	33	89.2	35	94.6	36	97.3
10–Richardson	107	93.0	106	91.4	108	92.3	108	91.5
11–Fort Worth	80	89.9	80	88.9	82	89.1	83	90.2
12–Waco	73	90.1	73	90.1	76	93.8	77	95.1
13–Austin	63	90.0	65	90.3	65	90.3	64	86.5
14–Abilene	41	95.4	41	95.4	42	97.7	41	95.4
15–San Angelo	41	95.4	40	93.0	40	93.0	41	95.4
16–Amarillo	57	91.9	56	90.3	60	96.8	60	96.8
17–Lubbock	49	83.1	50	84.8	54	91.5	57	96.6
18–Midland	21	58.3	25	69.4	27	77.1	27	77.1
19–El Paso	12	63.2	13	68.4	12	63.2	12	63.2
20–San Antonio	66	85.7	69	88.5	69	88.5	68	86.1

Source: Texas Public Education Information Management System (PEIMS) data files, 2014–15 to 2017–18.

4.3 District Characteristics Associated with District Usage of the Dyslexia Indicator in PEIMS

To further examine characteristics of districts associated with using the dyslexia indicator in PEIMS, relationships between district characteristics and usage of the dyslexia indicator were assessed using logistic regression. The logistic regression model used district characteristics to model the log odds of districts not identifying any students as having dyslexia in their PEIMS data upload. The log odds of not identifying at least one student as having dyslexia was used in order to highlight district types that may need more guidance and assistance with identifying students with dyslexia in PEIMS. For this analysis, only data from the 2017-18 school year were included in the analysis. For additional details about the logistic regression analysis, see Appendix A.

Table 4.3.1 shows the results of the logistic regression analysis. As shown, controlling for the other variables in the model, the following characteristics were statistically significantly associated with usage of the dyslexia indicator in PEIMS:

- the percentage of African American students in the district,
- the percentage of Hispanic students in the district,
- being a rural district,
- being a charter school, and
- missing data on the percentage of students meeting the state standard on the STAAR mathematics assessment.

Districts with these characteristics were statistically significantly less likely to identify one student as having dyslexia, controlling for the other variables in the model.

Table 4.3.1 Logistic Regression Results Showing Relationships between District Characteristics and District Usage of the Dyslexia Indicator in PEIMS

	Degrees of Freedom	Log-odd ratio	Standard Error	Wald Chi-Square	P-value	Odds Ratio
Intercept	1	-4.71	1.64	8.2191	<0.01	*
Percentage of Asian students	1	0.23	2.37	0.0091	0.92	1.25
Percentage of African American students	1	2.93	0.93	9.897	<0.01	18.77
Percentage of Hispanic students	1	2.22	0.73	9.3373	<0.01	9.17
Percentage of students of other races	1	2.77	6.21	0.1991	0.66	15.98
Percentage of English language learners	1	1.22	0.95	1.6397	0.20	3.39
Percentage of female students	1	-0.53	2.34	0.0509	0.82	0.59
Percentage of economically disadvantaged students	1	-0.05	0.85	0.004	0.95	0.95
Percentage of special education students	1	-3.73	2.77	1.8103	0.18	0.02
Rural district	1	1.14	0.46	6.196	0.01	3.13
Non-metropolitan fast-growing district	1	0.20	1.12	0.0327	0.86	1.22
Independent town district	1	-0.26	0.84	0.0976	0.75	0.77
Other central city district	1	0.00	0.85	0	1	1
Other central city suburban district	1	-1.19	0.83	2.064	0.15	0.30
Charter school district	1	1.36	0.51	7.185	0.01	3.92
Major urban district	1	-13.61	947.70	0.0002	0.99	<0.01
Major suburban district	1	-1.54	1.11	1.9499	0.16	0.21
Percentage of students meeting state standards on the STAAR reading assessment	1	0.95	1.84	0.2664	0.61	2.59
Percentage of students meeting state standards on the STAAR reading assessment	1	0.31	1.46	0.0445	0.83	1.36
Missing STAAR reading assessment data	1	1.39	0.93	2.2015	0.14	4.00
Missing STAAR mathematics assessment	1	1.94	0.74	6.779	0.01	6.95

Source: Texas Public Education Information Management System (PEIMS), 2017–18.

Note. N=1200. The outcome modeled in this analysis is not identifying at least one student as having dyslexia during the 2017-18 school year in PEIMS. Omitted variables include percentage of white students and non-metropolitan stable community type. Statistically significant predictors are highlighted in blue.

4.4 Percentage of Students Identified as Having Dyslexia and Receiving Special Education Services

TEA was also interested in learning how dyslexia identification and receipt of special education services intersect. The percentage of students identified as having dyslexia who were also reported as receiving special education services in PEIMS did not fluctuate much between the 2014–15 and 2017–18 school years. The percentage of students identified as having dyslexia who were reported as receiving special education services in PEIMS ranged from 18.4% to 19.4% during this time period. Similarly, the percentage of students receiving special education services who were identified as having dyslexia did not vary substantially. In the 2014–15 school year, approximately 5.21% of special education students were identified as having dyslexia. This percentage increased to about 6.58% of students receiving special education services in the 2017–18 school year.

Table 4.4.1 Percentage of Students Identified as Having Dyslexia and Receiving Special Education Services

Year	Students With Dyslexia Identified as Receiving Special Education Services		Students Receiving Special Education Services Identified as Having Dyslexia	
	Number	Percentage	Number	Percentage
2014–15	23,509	18.70	23,509	5.21
2015–16	26,217	18.59	26,217	5.66
2016–17	28,382	18.38	28,382	5.95
2017–18	32,787	19.40	32,787	6.58

5. District Survey Findings

This chapter presents the results of a fall 2018 survey of administrative staff serving public school districts and open-enrollment charter schools across Texas. The survey collected information on district and open-enrollment charter school procedures for dyslexia identification and reporting, dyslexia screening and assessment, and identification of students who are eligible for both special education and dyslexia services. Districts were asked about guidance they received for dyslexia screening, identification, and reporting from TEA and their regional ESC as well as any information or assistance they needed to improve their procedures for identifying or reporting students with dyslexia in PEIMS.

5.1 Methods

The survey was administered via unique hyperlinks that were included in email messages sent to 1,167 superintendents from the end of October through the beginning of November 2018. Superintendents were asked to complete the survey or to forward the hyperlink to the individual(s) who are the most knowledgeable about the district's dyslexia services and dyslexia PEIMS reporting procedures for completion. The survey was designed so that respondents could complete the survey in more than one sitting, and more than one individual could complete the survey. The survey consisted of 24 items. None of the items required districts to provide a response. Appendix B provides more information on the process of survey administration, follow-up of nonrespondents, distribution of responses across district characteristics, and representativeness of the respondents to the population of districts in the state.

In total, 758 districts (65%) completed the survey. The sample of districts responding to the survey was largely representative of all districts in the state on characteristics such as district type, district size, state accountability rating in the 2016–17 school year, and student demographic group proportions in the district, including economically disadvantaged students, EL students, students served in special education, and race/ethnicity groups (see Table B.2.1 in Appendix B). The total number of districts responding to each survey item is listed in the notes section below each figure.

5.2 Dyslexia Screening and Evaluation

Both state and federal legislation call for early identification and intervention for students who are at risk for dyslexia and other related disorders. Prior to 2017, Texas state law required the testing of students for dyslexia and related disorders "at appropriate times", which were dependent on numerous factors (e.g., a student's reading performance, reading difficulties, teachers' input) determined by each district or charter school (*The Dyslexia Handbook*, 2018, p.8). However, in 2017, the 85th Texas Legislature passed HB 1886, amending TEC §38.003, Screening and Treatment for Dyslexia (*The Dyslexia Handbook, 2018*). HB 1886 requires districts to screen all Kindergarten and Grade 1 students for dyslexia and related disorders. The law requires that all students beyond Grade 1 be screened or tested as appropriate. TEA defines screening as "a universal measure administered to all students by qualified personnel to determine which students are at risk for dyslexia or reading difficulties and/or a related disorder" (The Dyslexia Handbook, 2018, p.9). The screening process is not a formal evaluation.

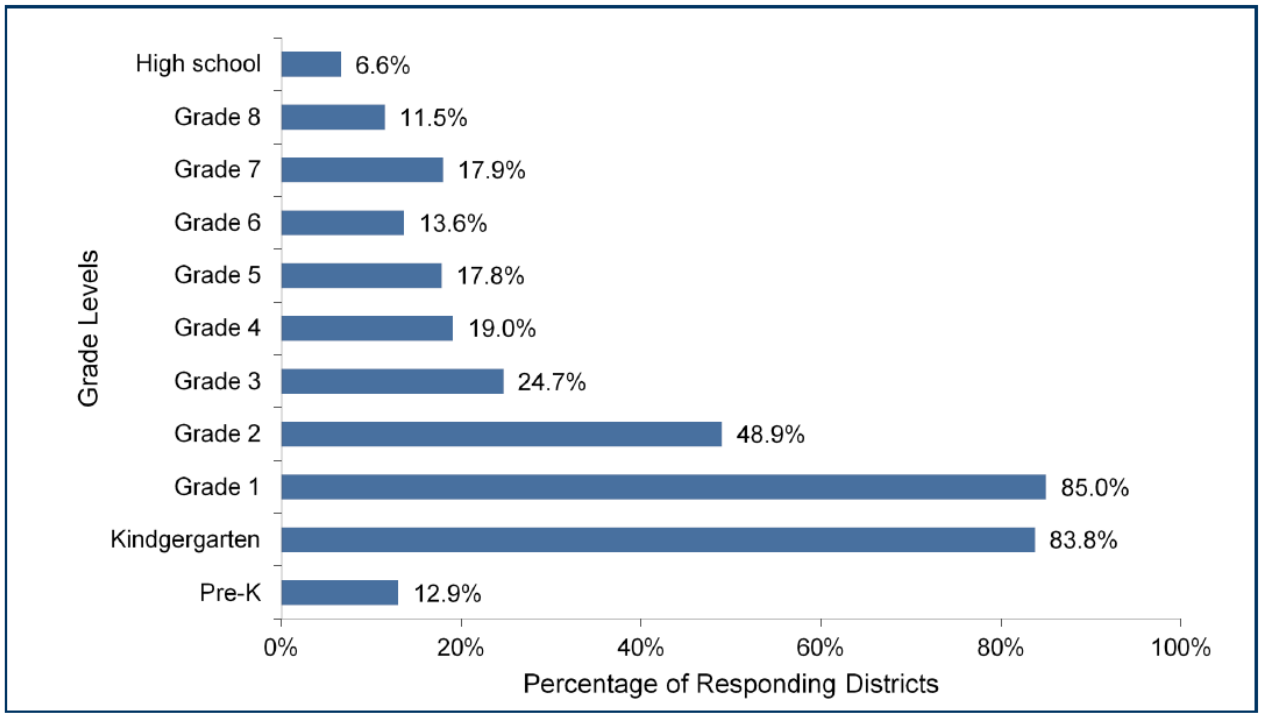
Additionally, a related state law, TEC §28.006, requires schools to administer early reading instruments to all students in kindergarten, Grade 1, and Grade 2 to assess their reading development and comprehension skills (Texas Education Agency, 2018a). Schools must also administer a reading

assessment from the Commissioner's approved list at the beginning of Grade 7 to any student who did not meet proficiency requirements on the Grade 6 STAAR reading assessment administered under TEC §39.023(a) (Texas Education Agency, 2018a). Districts and schools may opt to administer more often, if desired.

School districts must meet the requirements of TEC §28.006 and §38.003. A district may opt to use the same instrument to meet the requirement of both TEC §28.006 and §38.003; however, they are not required to do so (Texas Education Agency, 2018a).

On the survey, districts were asked to report the grades in which they conduct universal screening for dyslexia. As displayed in Figure 5.2.1, most districts reported that they conduct universal screening for dyslexia for all students in kindergarten (83.8%) and Grade 1 (85.0%). Approximately half (48.9%) of the responding districts reported that they conduct universal screening for all Grade 2 students. Considerably fewer districts reported that they conduct screening for all students in Grade 3 or above, with very few districts reporting that they conduct screening for all high school students (6.6%).

Figure 5.2.1 Percentages of Responding Districts Conducting Universal Screening for All Students at Each Grade Level



Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Note. N = 758.

Figure 5.2.2 displays the screeners or reading assessments used most frequently by districts to assess students' reading development and comprehension to identify students who might be at risk for dyslexia and other related disorders. The largest number of districts reported using the Texas Primary Reading

Inventory (TPRI) for early elementary school students (44.6%), IStation for late elementary (29.4%) and middle school students (19.9%), and the Gray Oral Reading Tests (GORT-5) for high school students (19.4%).

Table 5.2.2. Top Five Screeners or Reading Instruments Used to Assess Students' Reading Development and Comprehension to Identify Students Who May Be at Risk for Reading Disabilities, Including Dyslexia and Other Related Disorders, by Grade Level

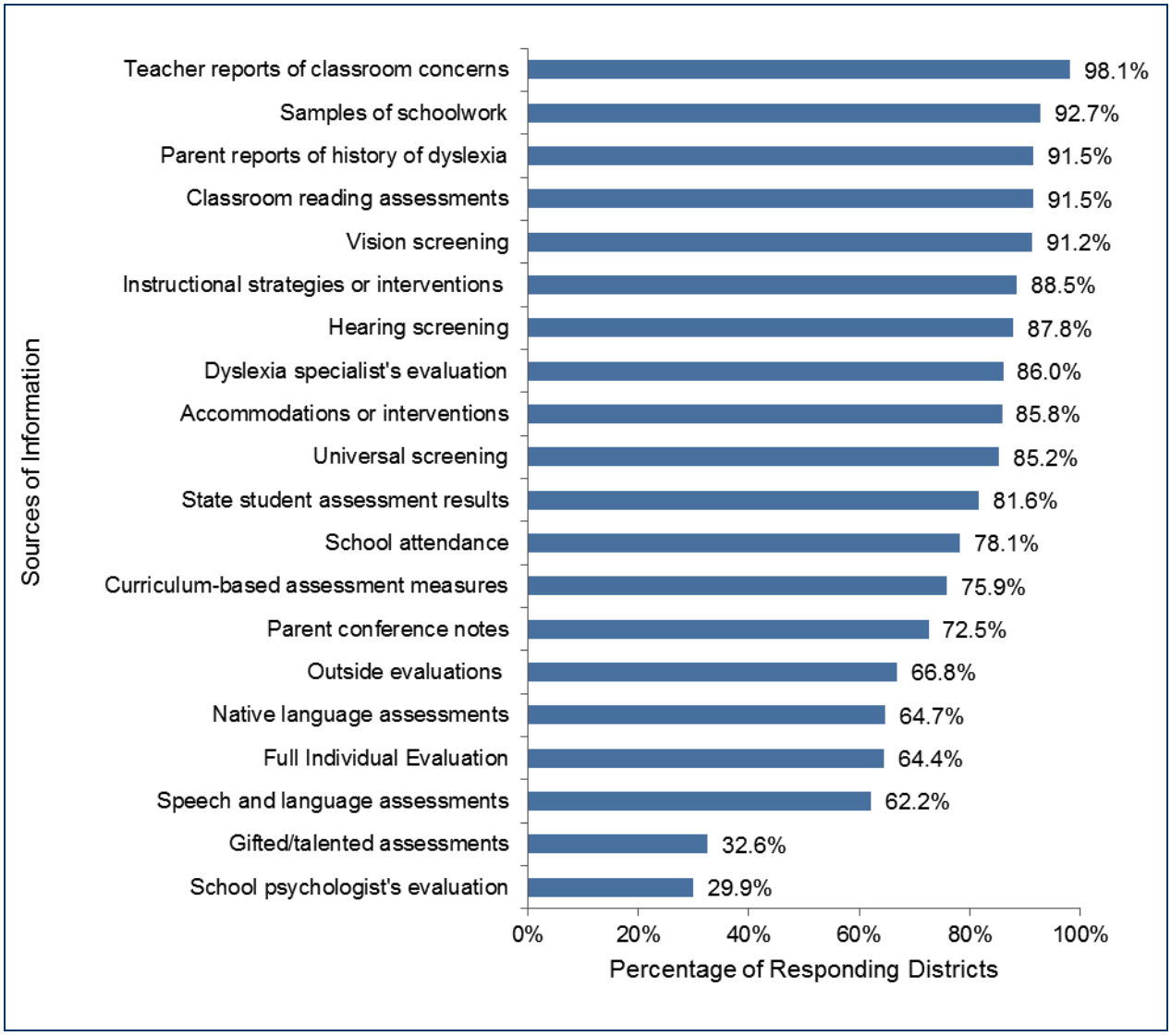
Assessment	Percentage
Early Elementary School (Grade K–2)	
TPRI	44.6
IStation	28.5
NWEA MAP Reading	10.0
Renaissance Star	8.6
DRA	8.2
Late Elementary School (Grade 3–5)	
IStation	29.4
Renaissance Star	20.8
NWEA MAP	11.9
GORT-5	10.9
TPRI	9.9
Middle School (Grade 6–8)	
IStation	19.9
Renaissance Star	17.8
STAAR®	15.0
GORT-5	13.6
CTOPP-2	12.6
High School (Grade 9–12)	
GORT-5	19.4
CTOPP-2	17.3
Renaissance Star	16.5
STAAR®	16.0
WRMT-III	13.9

Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Notes. Early elementary school, N = 673; late elementary school, N = 506; middle school, N = 381; high school, N = 237. CTOPP = Comprehensive Test of Phonological Processing; DRA = Developmental Reading Assessment; GORT = Gray Oral Reading Tests; STAAR = State of Texas Assessments of Academic Readiness; TPRI = Texas Primary Reading Inventory; WRMT = Woodcock Reading Mastery Tests. While districts reported using the assessments listed in this table to identify students who may be at-risk for reading disabilities, not all of the assessments, such as the STAAR®, are designed to be used for this purpose.

In addition to screeners and reading instruments, the top five additional sources of information districts reported using to screen and evaluate students for dyslexia and related disorders are (1) teacher reports of classroom concerns (98.1%); (2) samples of schoolwork (92.7%); (3) parent reports of history of dyslexia (91.5%); (4) classroom reading assessments (91.5%); and (5) vision screening (91.5%). As

exhibited in Figure 5.2.3, relatively few districts reported using gifted/talented assessments (32.6%) or a school psychologist's evaluation (29.9%) when screening and evaluating students for dyslexia.

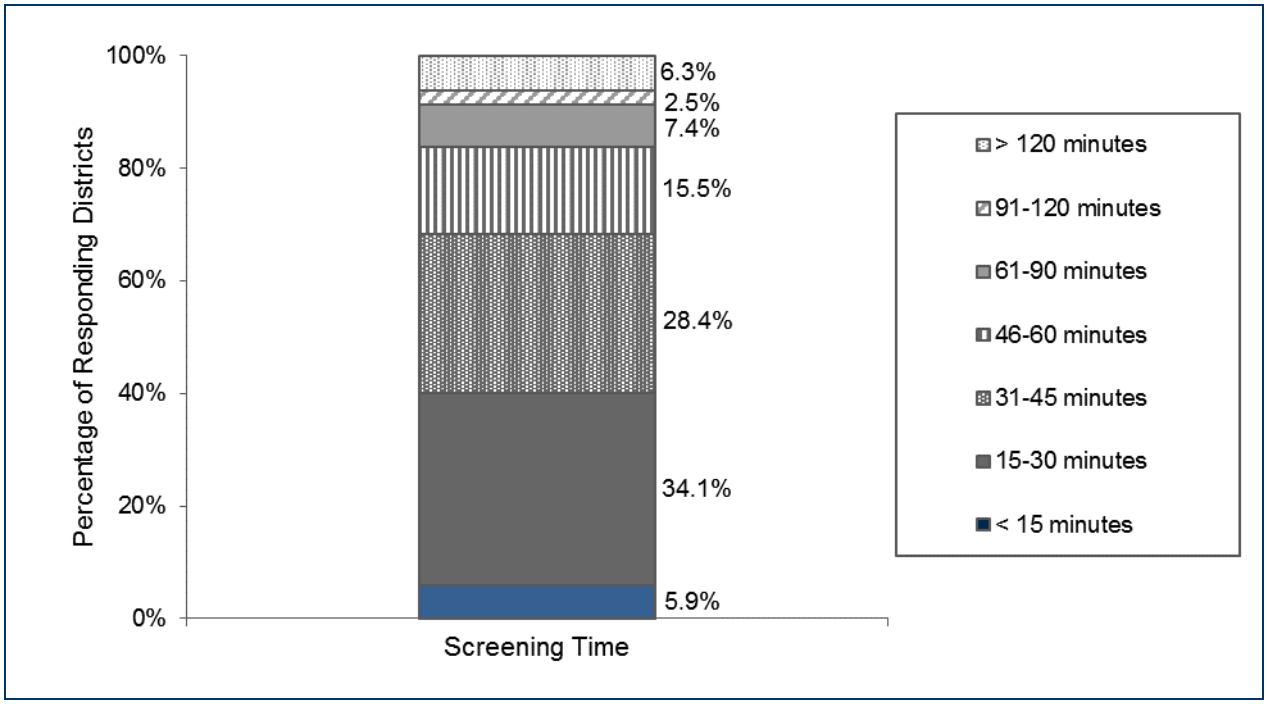
Figure 5.2.3 Sources of Information Considered by Districts When Screening and Evaluating Students for Dyslexia



Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Note. N = 732.

Most districts reported spending 15–30 minutes (34.1%) or 31–45 minutes (28.4%) screening students for dyslexia, as displayed in Figure 5.2.4.

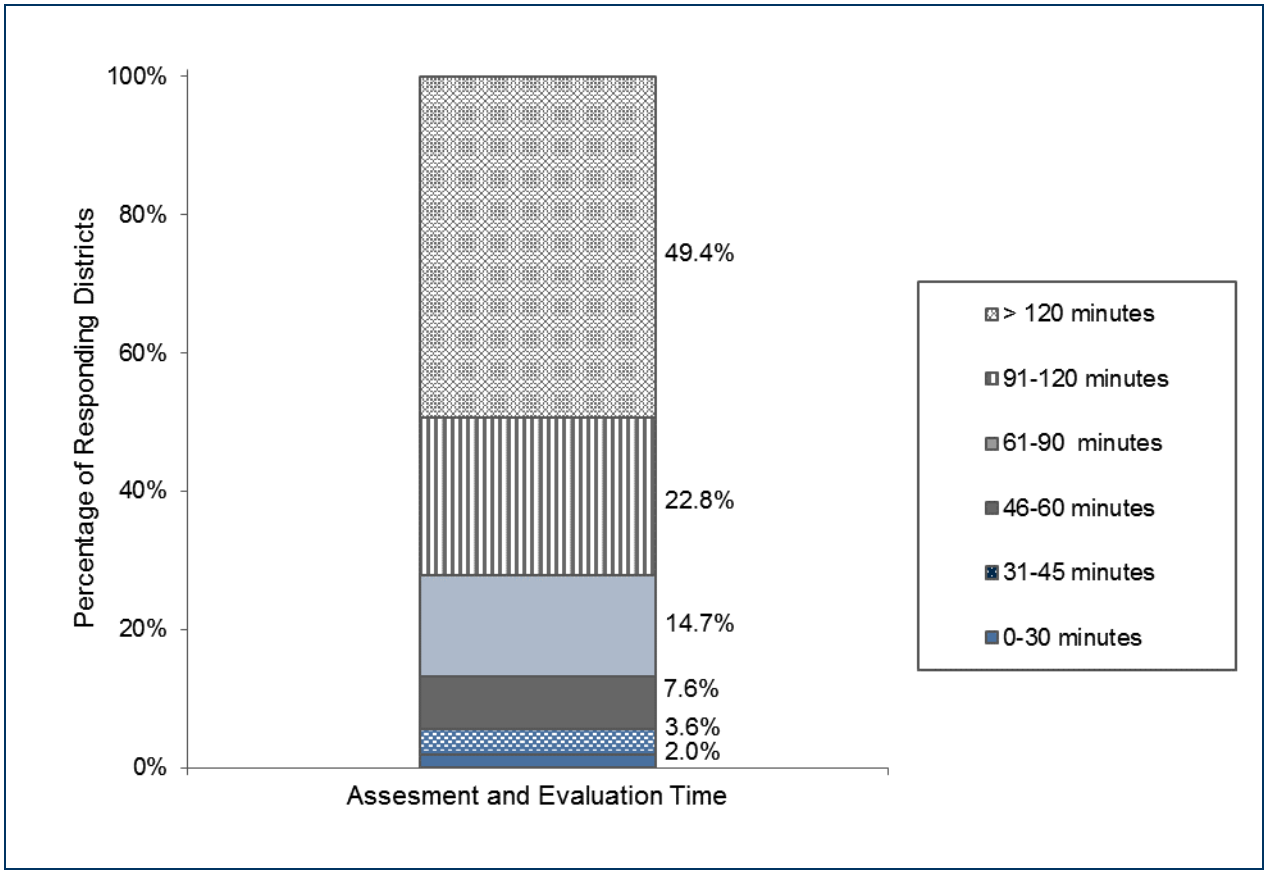
Figure 5.2.4 Length of Time (in Minutes) per Student That Districts Spend on the Dyslexia Screening Process



Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Note. N = 718.

Districts reported spending considerable time completing the full evaluation process to identify students with dyslexia. As shown in Figure 5.2.5, approximately half (49.4%) of districts reported spending 2 hours or more evaluating students for dyslexia. Few districts (13.2%) reported spending fewer than 61 minutes.

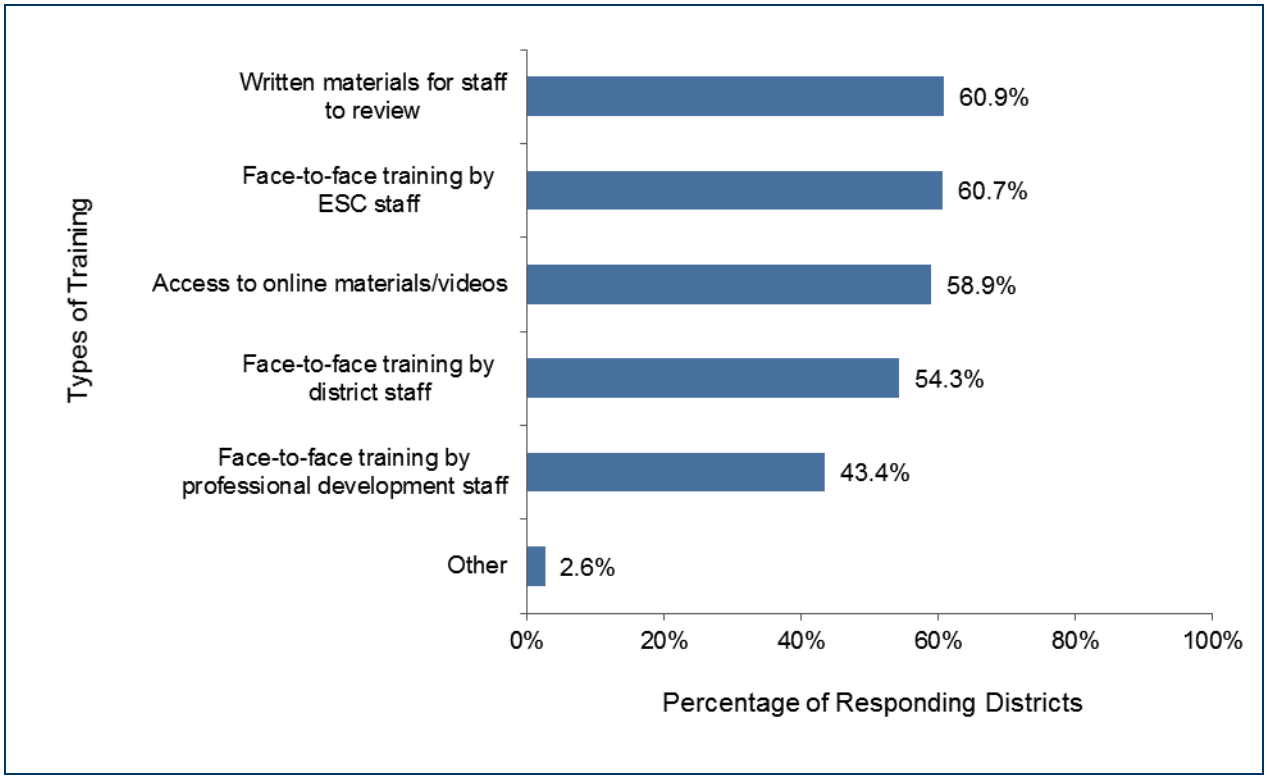
Figure 5.2.5 Length of Time (in Minutes) Districts Spend on the Dyslexia Evaluation Process for Each Student



Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Note. N = 721.

To help staff screen, evaluate, and identify students with dyslexia or a related disorder, districts reported their staff have received written materials for staff to review (60.9%), face-to-face training by ESC staff (60.7%), and online materials or videos (58.9%). Somewhat fewer districts reported that staff have received face-to-face training by district staff (54.3%) or face-to-face training by professional development staff (43.4%), as shown in Figure 5.2.6.

Figure 5.2.6 Types of Training District Staff Received to Screen, Evaluate, and Identify Students With Dyslexia or Related Disorders



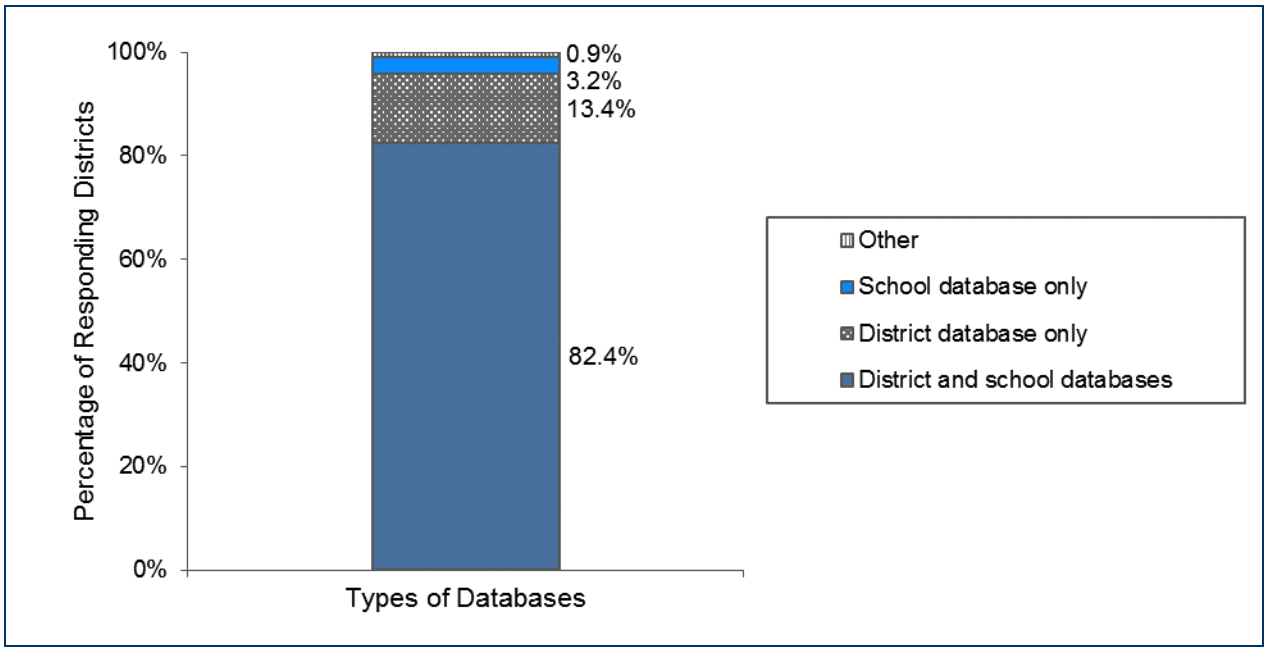
Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Notes. N = 728. ESC = education service center.

5.3 Dyslexia Identification and Reporting

Districts were asked to respond to several items regarding their dyslexia identification and reporting practices, included reporting any barriers they experienced identifying and reporting students in district records as well as in the PEIMS.

As shown in Figure 5.3.1, most districts (82.4%) reported having dyslexia indicators in both district and school databases. Only 13.4% of districts indicated that dyslexia identifiers were included only in district databases. Very few districts (3.2%) reported only identifying students with dyslexia in school databases.

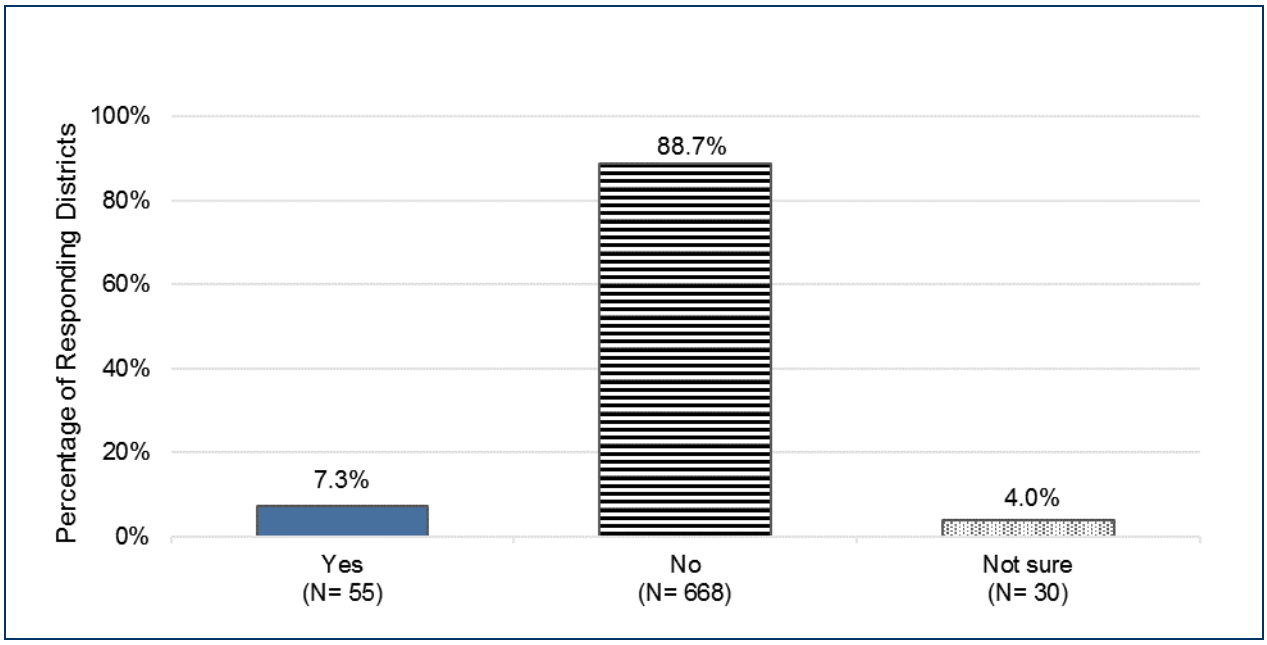
Figure 5.3.1 How Districts Designate Students Who Are Identified as Having Dyslexia or Related Disorders Are Designated in District Records



Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Note. N = 751.

Most districts (88.7%) indicated they did not experience any barriers reporting students identified as having dyslexia or related disorders. As shown in Figure 5.3.2, 7.3% of districts indicated they had experienced barriers reporting students with dyslexia or related disorders, whereas the remaining 4.0% of districts were not sure.

Figure 5.3.2 Percentage of Districts Experiencing Barriers Reporting Students Identified as Having Dyslexia or Related Disorders



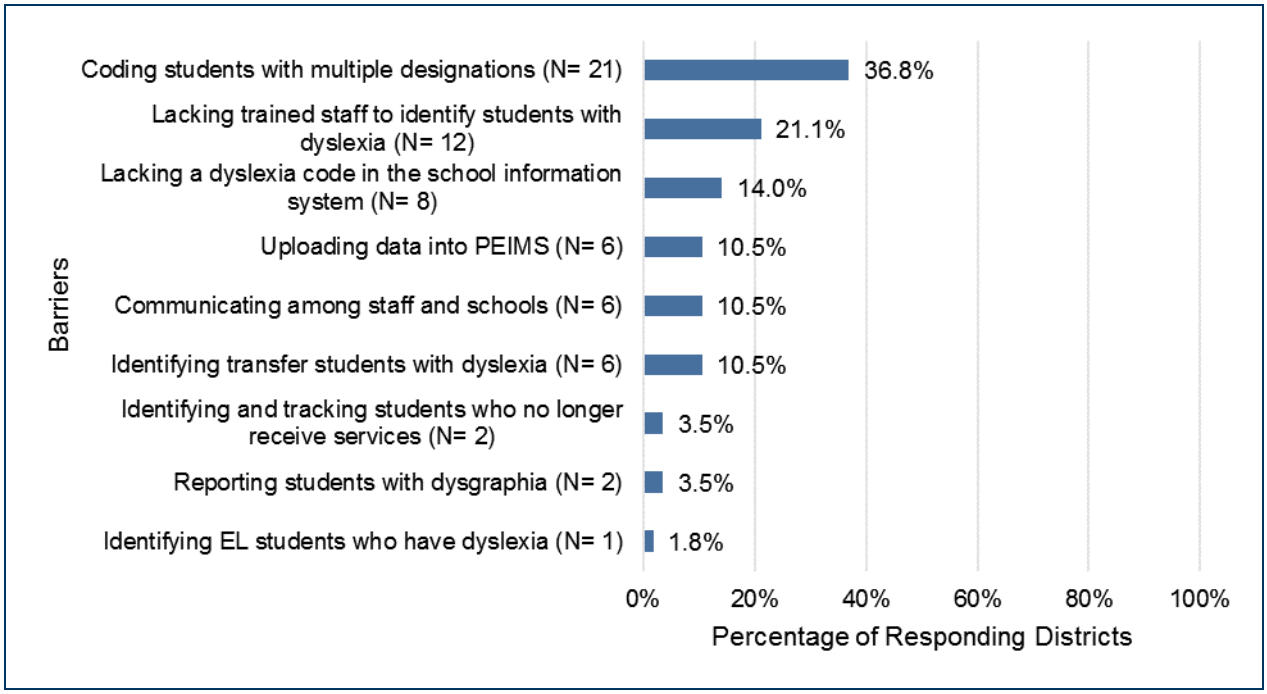
Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Note. N = 753.

Districts that indicated they had experienced barriers or were not sure were asked to describe these barriers. As shown in Figure 5.3.3, of the 57 districts that described barriers, the most frequently reported barrier focused on coding multiple designations (36.8%). Districts experiencing barriers with coding multiple designations reported that their student information system did not allow for coding students with multiple designations, staff were not properly trained in how to code students with multiple designations, and there is confusion among staff regarding state reporting requirements for students with multiple designations.

Several districts (21.1%) reported that they lack staff trained in dyslexia identification and reporting. This has resulted in inconsistent coding of students with dyslexia, students not being identified as having dyslexia, and differences in identification and reporting across district campuses. Other districts (14.0%) reported that their school information systems did not contain dyslexia codes. Although a few districts reported working with software providers to rectify the issues, other districts reported continuing having to rely on paperwork.

Issues uploading data into PEIMS (10.5%), communication issues among district staff and schools (10.5%), and identification of transfer students with dyslexia (10.5%) were also among the more commonly reported barriers to reporting students with dyslexia.

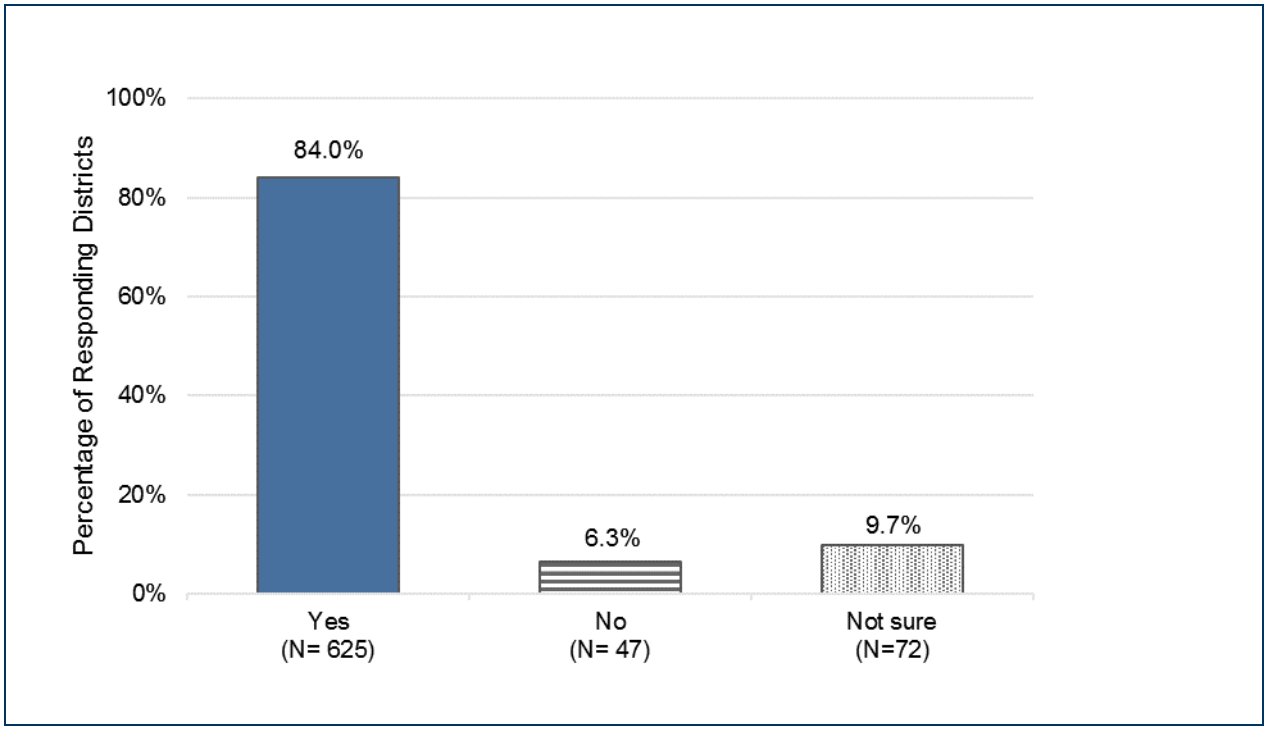
Figure 5.3.3 Barriers Districts Experience Reporting Students With Dyslexia



Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Notes. N = 57. EL = English learner; PEIMS = Public Education Information Management System.

Districts were also asked to report whether they include data on students identified as having dyslexia or related disorders in their data uploads to the PEIMS. As displayed in Figure 5.3.4, most reporting districts (84.0%) indicated they include dyslexia identification information in their PEIMS uploads. Approximately 6% of districts indicated they do not include dyslexia identification information in their PEIMS uploads, and 9.7% of districts were not sure.

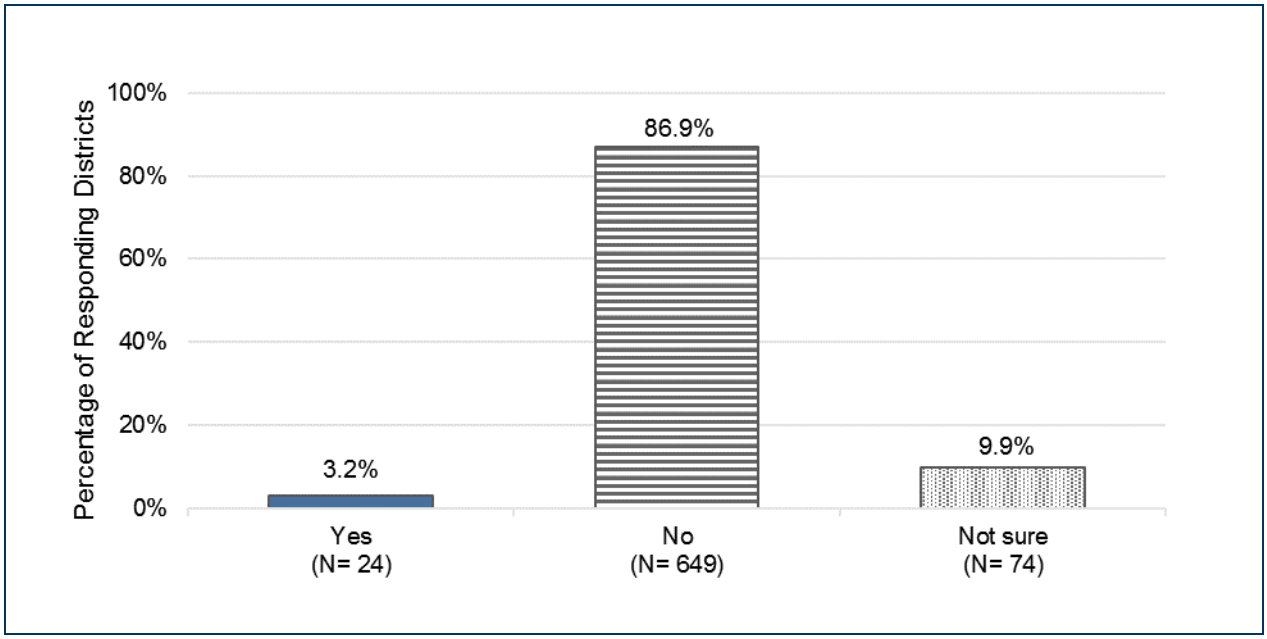
Figure 5.3.4 Percentage of Districts Reporting Uploading Dyslexia Identification Data in the Public Education Information Management System



Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Note. N = 744.

Districts were also asked to indicate whether they had difficulties reporting student dyslexia identification information in PEIMS. As shown in Figure 5.3.5, most districts (86.9%) indicated they did not experience barriers reporting student dyslexia identification information into PEIMS. Approximately 3% of districts reported they did experience barriers reporting student dyslexia identification information into PEIMS, and approximately 10% of districts were not sure.

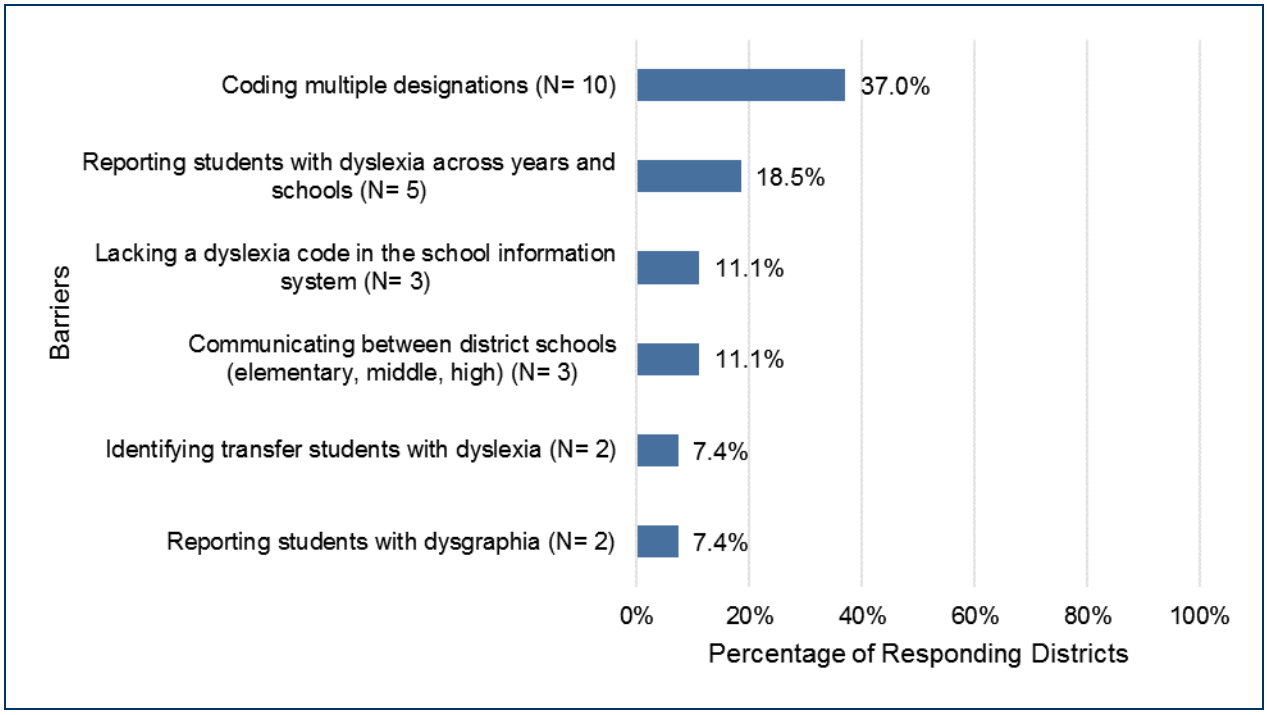
Figure 5.3.5 Percentage of Districts Reporting Experiencing Barriers Reporting Student Dyslexia Information in the Public Education Information Management System



Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Note. N = 747.

Districts that reported experiencing barriers reporting dyslexia data in PEIMS or who were not sure were asked to describe these barriers. As shown in Figure 5.3.6, of the 27 districts that identified barriers, the most frequently reported barrier (37.0%) was difficulty coding students with multiple designations (504, special education, dyslexia). Continually monitoring and reporting students with dyslexia across years and schools was also listed by several districts (18.5%) as a barrier. In their comments, some districts indicated this was a particular problem when students were no longer receiving services for dyslexia. Other districts indicated that reporting students with dyslexia across years was difficult because either their student information system erases the Section 504 and dyslexia data each year or district campuses have different coding processes for students with dyslexia. Similarly, districts reported difficulty identifying students with dyslexia when they moved from elementary school to middle school and from middle school to high school (11.1%). Identifying transfer students with dyslexia and lack of a dysgraphia indicator were also listed as barriers to reporting data into PEIMS.

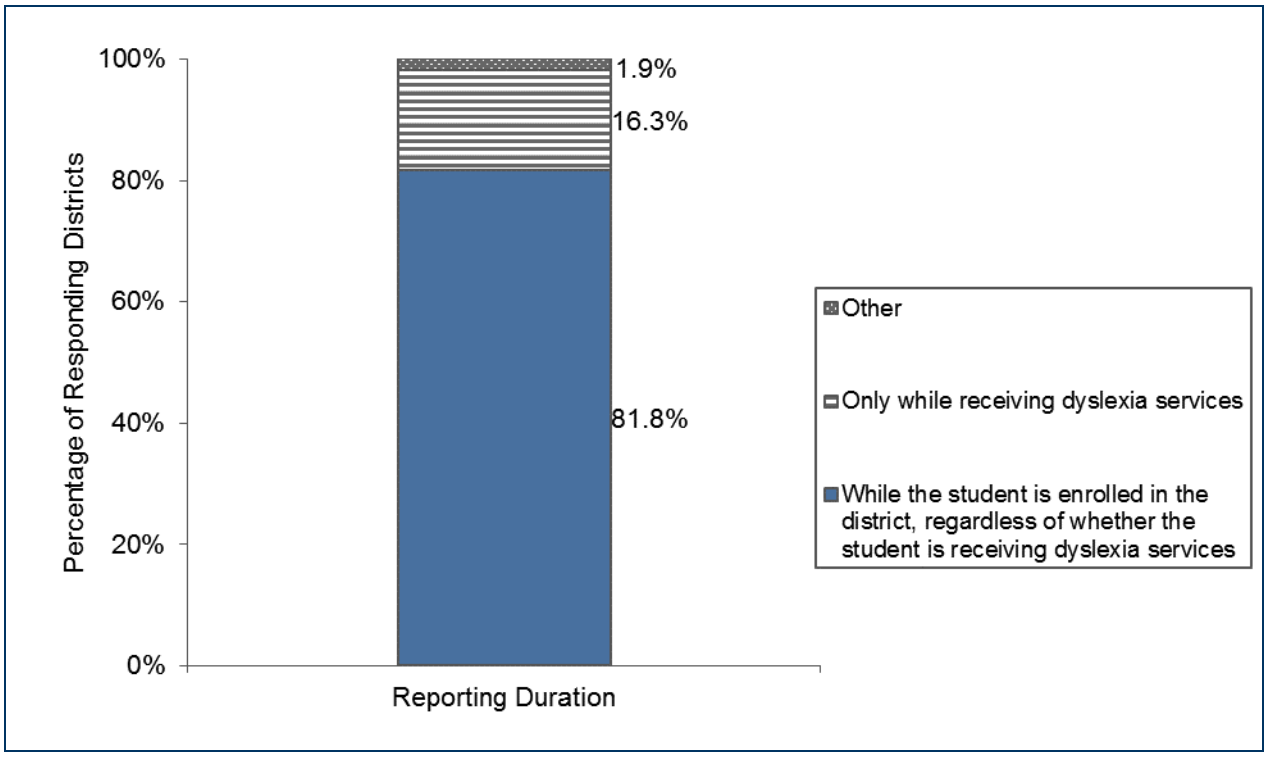
Figure 5.3.6 Barriers Districts Experience Reporting Student Dyslexia Data in the Public Education Information Management System



Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Note. N = 27.

Districts were specifically asked to indicate whether they continue to report students as having dyslexia or a related disorder in PEIMS once the students stop receiving services for dyslexia. As shown in Figure 5.3.7, most districts (81.8%) reported that they continue to report students as having dyslexia regardless of whether students are currently receiving dyslexia services. Approximately 16% of districts indicated they only report students as having dyslexia or a related disorder while students are receiving services.

Figure 5.3.7 Length of Time Districts Continue to Report Students in the Texas Student Data System Public Education Information Management System as Having Dyslexia or a Related Disorder

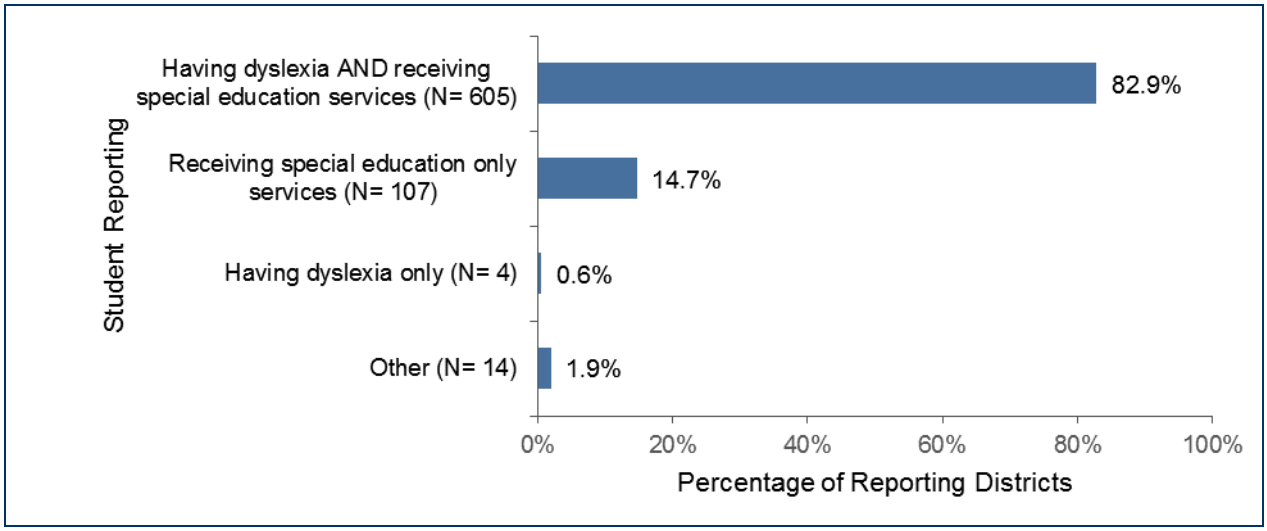


Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Note. N = 748.

5.4 Dyslexia and Special Education

Districts were asked to indicate the information they would report in PEIMS for students who are eligible for special education services and who are identified as having dyslexia. Most districts (82.3%) indicated that if a student who is eligible for special education services is also identified as having dyslexia, both pieces of information are reported in PEIMS (Figure 5.4.1). Approximately 15% of districts indicated they only report students as receiving special education services, and less than 1% of districts indicated they only report students as receiving dyslexia services.

Figure 5.4.1 District Reporting of Students Identified as Having Dyslexia Who Are Eligible for Special Education Services



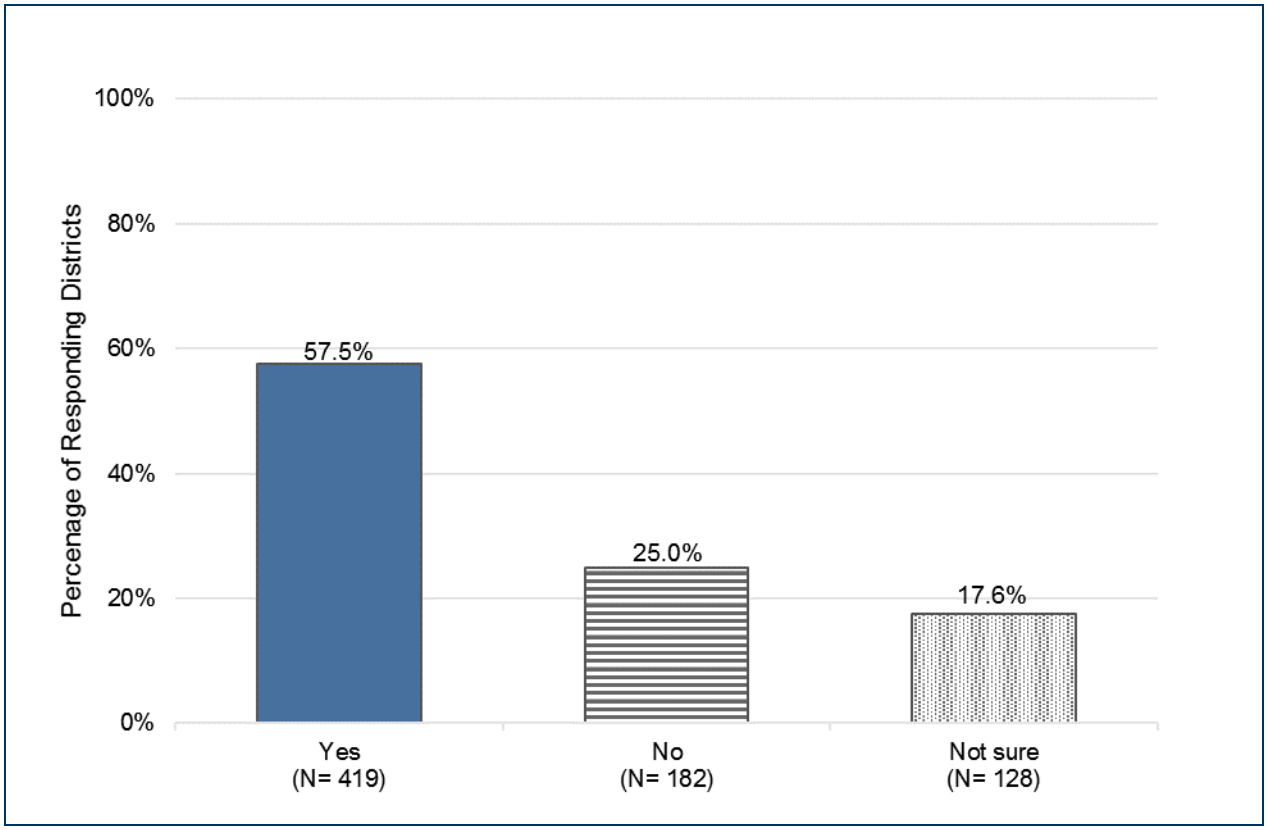
Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Note. N = 730.

5.5 Guidance for Dyslexia Screening, Identification, and Reporting

Districts were also asked a series of questions regarding whether or not they had received guidance from TEA or their regional ESC regarding screening, identification, or PEIMS reporting requirements for students with dyslexia or a related disorder. Districts were asked to indicate the types of guidance they received and whether the guidance was useful.

Just over half of districts (57.5%) indicated they had received information or guidance from TEA regarding screening, identification, or PEIMS reporting requirements for students with dyslexia or a related disorder. As shown in Figure 5.5.1, one-fourth of districts (25.0%) indicated they had not received information or guidance from TEA, and the remaining 17.6% of districts were not sure if they had received information or guidance.

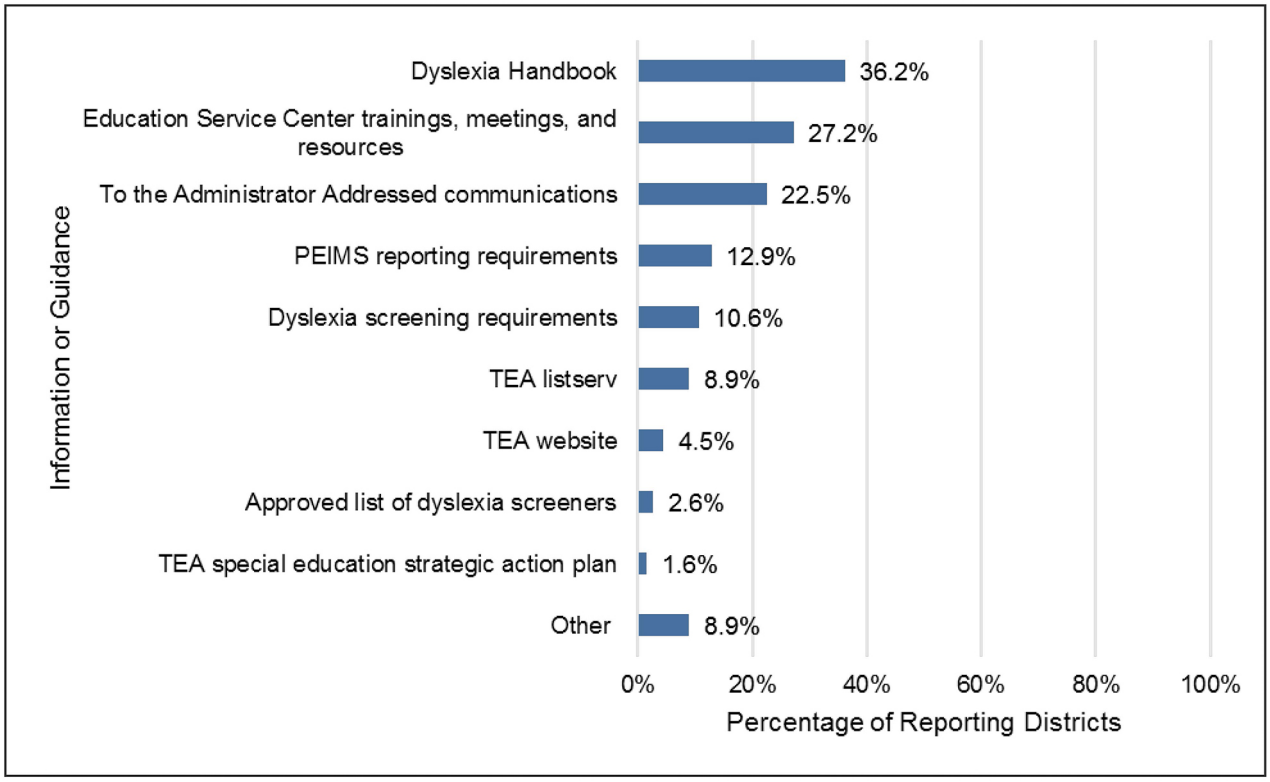
Figure 5.5.1 Percentage of Districts That Received Information or Guidance From the Texas Education Agency Regarding Screening, Identification, or Public Education Information Management System Reporting Requirements for Students With Dyslexia or Related Disorders



Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Note. N = 729.

Districts who reported receiving information or guidance from TEA or who were not sure were asked to describe the information or guidance they had received. As displayed in Figure 5.5.2, the top three sources of information or guidance districts reported receiving from TEA were (1) The Dyslexia Handbook (36.2%); (2) information about trainings, meetings, or resources provided by the ESCs (27.2%); and (3) To the Administrator Addressed communications from TEA (22.5%).

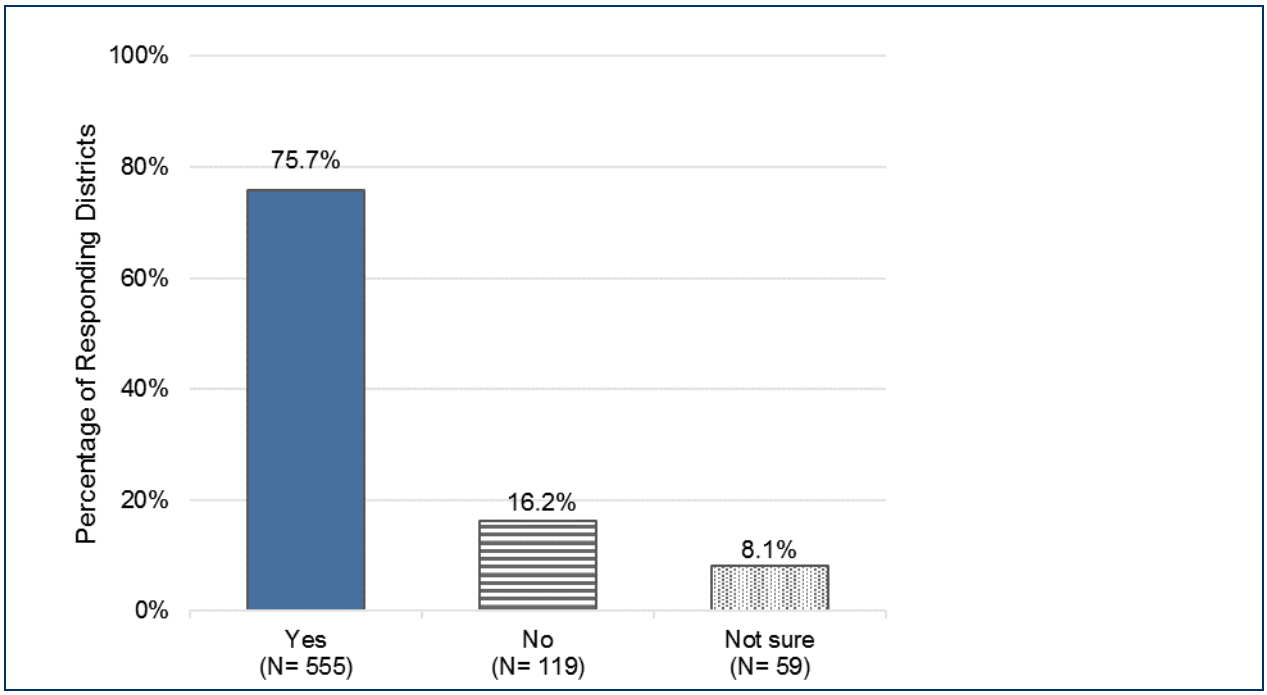
Figure 5.5.2 Type of Information or Guidance Received by Districts From the Texas Education Agency Regarding Screening, Identification, or Texas Student Data System Public Education Information Management System Requirements for Students With Dyslexia or a Related Disorder



Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Notes. N = 426. PEIMS = Public Education Information Management System; TEA = Texas Education Agency.

A somewhat higher percentage of districts reported receiving information or guidance regarding screening, identification, or PEIMS reporting requirements for students with dyslexia or related disorders from their regional ESC. As shown in Figure 5.5.3, approximately three-fourths of districts (75.7%) indicated they had received guidance from the regional ESC. The remaining districts either reported not receiving information or guidance from their regional ESC (16.2%) or were not sure (8.1%).

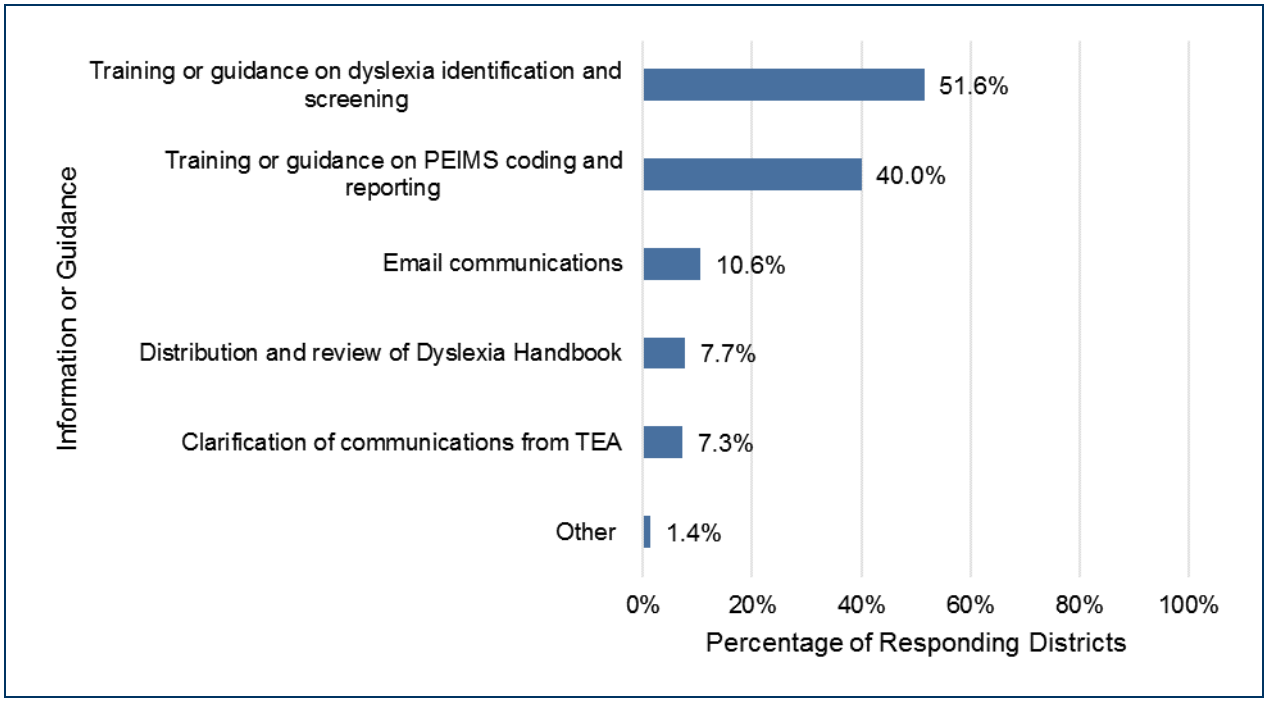
Figure 5.5.3 Percentage of Districts That Received Information or Guidance From Their Regional Education Service Center Regarding Screening, Identification, or Public Education Information Management System Reporting Requirements for Students With Dyslexia or Related Disorders



Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Note. N = 733.

Districts who reported receiving information or guidance from their regional ESC or who were not sure were asked to indicate the type of information or guidance they had received. As displayed in Figure 5.5.4, the largest percentages of districts reported receiving training or guidance on dyslexia identification and screening (51.6%) and PEIMS coding and reporting (40.0%).

Figure 5.5.4 Type of Information or Guidance Received by Districts From Regional Education Service Center Regarding Screening, Identification, or Public Education Information Management System Requirements for Students With Dyslexia or a Related Disorder

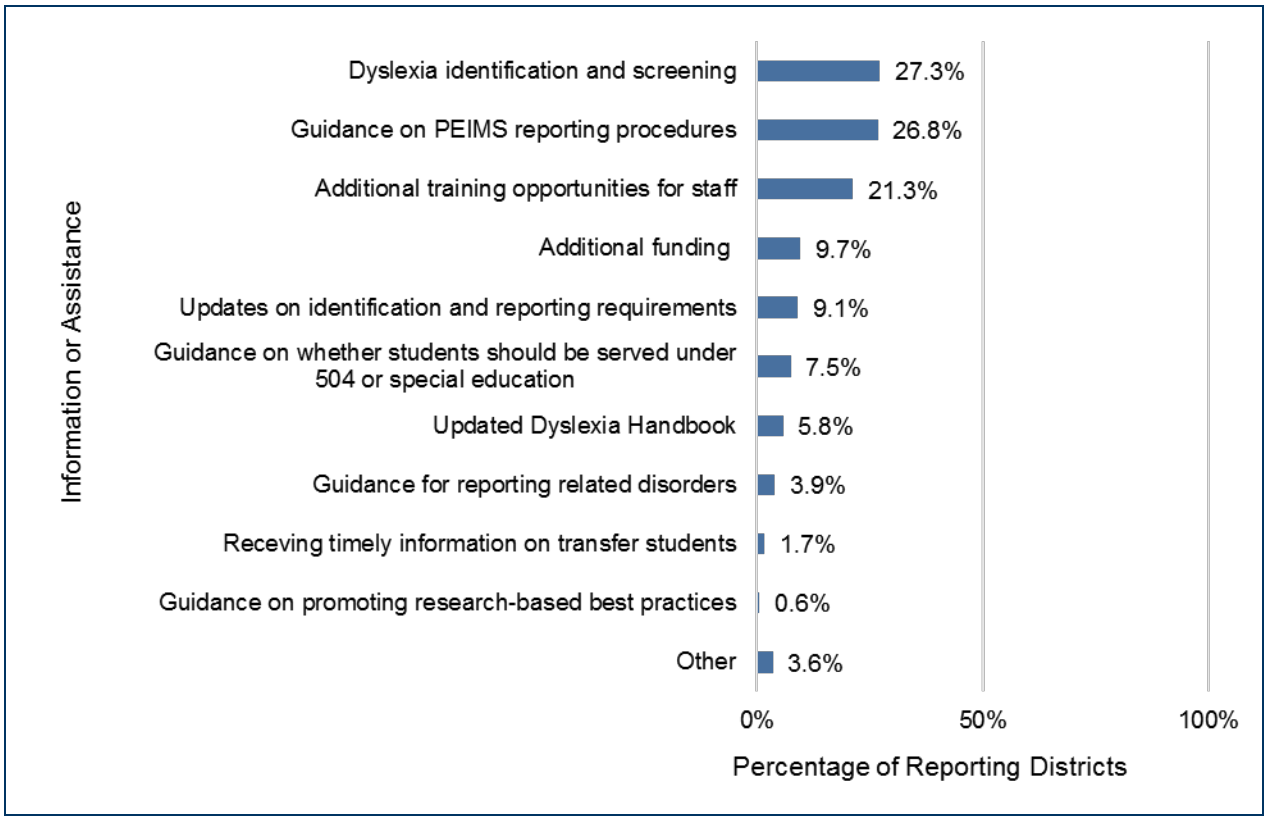


Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
*Note*s. N = 508. PEIMS = Public Education Information Management System; TEA = Texas Education Agency.

5.6 District Needs

Finally, districts were asked to describe the information or assistance that would help them improve their procedures for identifying students with dyslexia or related disorders and reporting these students in PEIMS. As displayed in Figure 5.6.1, the highest number of districts requested guidance on dyslexia identification and screening procedures (27.3%), guidance on PEIMS reporting procedures (26.8%), and additional training opportunities for staff (21.3%). Smaller percentages of districts requested additional funding (9.7%), timely updates on dyslexia identification and reporting requirements (9.1%), and guidance on whether students with dyslexia should be served under Section 504 or special education (7.5%).

Figure 5.6.1 Information or Assistance Needed by Districts to Improve Their Procedures for Identifying and Reporting Students With Dyslexia or Related Disorders in the Texas Student Data System Public Education Information Management System



Source: Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey (2018).
Notes. N = 362. PEMIS = Public Education Information Management System.

6. Interviews

This chapter presents data from 35 interviews and focus groups conducted in October and November 2018 with staff from (a) regional ESCs, (b) districts, and (c) schools within Texas. The interviews were conducted to explore how Texas educators understand issues surrounding reporting on the dyslexia indicator in PEIMS. The interviews included opened-ended questions around three overarching topics:

a) understanding whether the current guidance is clear, useful, and sufficient to ensure accurate reporting on students with dyslexia and related disorders;

b) discovering any challenges stakeholders face in carrying out or understanding the procedures for identifying students with dyslexia and related disorders; and

c) providing recommendations to TEA for what other information or support could be useful to ensure that students who have dyslexia or related disorders are identified and reported on accurately.

6.1 Methods

The research team reached out to ESCs, districts, and schools in order to represent varied geographic (e.g., region and location type) and demographic characteristics. The interviews included staff from 10 of the 20 ESCs in Texas. The ESCs were selected using a map from the Texas Higher Education Coordinating Board showing the Higher Education Regional Councils (HERCs) that divide Texas into 10 regions. Each of the 10 HERCs maps roughly onto two of TEA's ESCs. One ESC was randomly selected from within each of the paired ESCs to be included in the study. In total, the research team interviewed 19 staff members from 10 ESCs, which included dyslexia consultants, dyslexia coordinators, and special education directors.

In addition, the research team identified 15 districts for participation. Based on TEA's eight district community types, the team sampled districts of each type in approximate proportion to their distribution across the state. In total, 11 districts agreed to participate in the study, with the following categories: Independent Town (2), Major Suburban (1), Major Urban (2), Non-Metropolitan: Fast Growing (1), Non-Metropolitan: Stable (1), Other Central City (1), Other Central City: Suburban (2), and Rural (2). District-level participants (n = 17) held a variety of titles, including PEIMS coordinators, dyslexia specialists, program coordinators, assistant superintendents, special education directors, and directors of state and federal programs.

Within each district, the research team reached out to two schools—one elementary and one secondary. In total, 14 schools (with 25 participants) chose to participate[8] in interviews, including 7 elementary schools and 7 secondary schools (4 middle schools and 3 high schools). The role of participants from school campuses varied widely, ranging from special education teachers, dyslexia therapists, and counselors to curriculum specialists and administrators. Each participating entity nominated interviewees based on their familiarity with PEIMS reporting and/or their level of involvement with dyslexia identification. In total, across 35 interviews, the research team spoke to 61 staff about their experiences with and perceptions of reporting

[8] In two participating districts, district staff reported that central office staff are responsible for both the dyslexia identification and PEIMS reporting processes for all schools in the district. In these cases, schools declined participation, and district staff served as their proxies.

on the dyslexia indicator as well as any challenges they encounter in identifying students with dyslexia and related disorders. This chapter presents the findings from these interviews.[9]

6.2 Dyslexia Reporting

Interviewers asked participants at the ESC, district, and campus levels several questions on the topic of reporting for students with dyslexia and related disorders in PEIMS. These included questions about participants' understanding of current data submission requirements and procedures as well as probes about the resources or guidance from TEA, ESCs, or other sources that participants report receiving and using to fulfill requirements. Participants in 32 of the 35 interviews (91.4%) expressed some familiarity with the PEIMS submission requirements. In the other three cases, interviewees said that although they worked to identify students with dyslexia and related disorders, they were unaware of the PEIMS reporting process or did not feel comfortable enough with the process to answer questions related to reporting.

Interview participants described two main sources of guidance for PEIMS dyslexia reporting: resources from regional ESCs and The Dyslexia Handbook. Interviewees most commonly reported relying on their ESCs to obtain information about PEIMS data submission requirements. In 22 interviews (62.9%), representing 9 school, 6 district, and 7 ESC interviews, participants said ESCs are a key resource for information about PEIMS reporting requirements. ESCs said they use email distribution lists and their regional dyslexia networks or roundtables to support local schools and districts with reporting. Interviewees from all three settings said that ESC staff were responsive to reporting questions. For example, a high school dyslexia therapist said, "I rely tremendously on [the ESC] … The new coding this year for fall submission, we had to have the intervention strategy coded, any students with an intervention strategy… I started with [the ESC contact] and asked, 'Okay, what are the requirements? What does that entail?' She started checking with her people at Region [number] and got us the information."

Interviewees also said communications about reporting requirements generally come through the ESCs. For example, a middle school Section 504 administrator said whenever there are "any changes in the law and any changes in The [Dyslexia] Handbook, [ESC staff] present those at workshops and send out invites to the district and the district determines who they're sending to get this information, and then the district personnel that it attends can come back and share it." Although fewer interview participants indicated they receive information directly from TEA, several did report that TEA is a source of PEIMS information. This is consistent with reports of survey respondents, 75.7% of whom indicated they had received information from ESCs and 57.5% of whom indicated they had received guidance from TEA regarding screening, identification, or PEIMS reporting requirements for students with dyslexia or a related disorder.

In four school- and two district-level interviews (17.1%), participants said The Dyslexia Handbook provided them with guidance on reporting in PEIMS, and two said the Texas Dyslexia Identification Academy (TDIA), sometimes referred to as the "dyslexia modules," helped them understand the requirements as well. Participants from districts and schools said they used a variety of other resources—most notably knowledgeable district staff—for PEIMS reporting information. One school dyslexia therapist said that in order to learn about PEIMS, "I kind of research things myself. But no, nobody here gives me any of that information."

[9] In this chapter, counts represent an interview with ESCs, districts, or schools, which sometimes involved more than one participant. Therefore, the findings represent at least one perception or opinion expressed during the interview, though consensus among all or multiple participants in the interview was not required.

Despite access to resources, there were several frequently mentioned areas of confusion about PEIMS reporting requirements. District and school staff reported being unclear on how to accurately report students who have disorders related to dyslexia. Specifically, interview participants said LEAs frequently struggle to understand their responsibilities to dually identify students who receive special education services or have Section 504 plans. Participants in nine interviews (25.7%), including at four districts, four ESCs, and one school, said that LEAs tend to be unsure how to code students with related disorders. An ESC dyslexia coordinator summarized a common misconception about related disorders, saying, "We did get some questions … 'So, if a student has dysgraphia, what code do we use for them?'… There were some questions about that with schools. I'm not sure whether that guidance is real clear or not. I think there's some potential for some confusion."

There were several responses to questions about reporting on a student who has dyslexia or a related disorder and who is served by special education or a Section 504 plan that indicate confusion or incorrect perceptions. For example, in six interviews (17.1%)—including one district and five schools—participants stated that students with dyslexia who are receiving special education services should only be reported under the special education indicator. In eight other interviews (22.9%)—including six ESCs, one school, and one district—participants said districts and schools need additional clarity around students with multiple designations. For example, one ESC interviewee said questions related to identification for students who have dyslexia and who are receiving other services are the most common: "That's the main question is, can they be dyslexic and counted as 504? Can they be dyslexic and counted under special ed? Can they be dyslexic and counted in [Response to Intervention (RTI)]? Those are huge questions. Are they always counted as dyslexic? ... People are confused or not sure of that because I think they hear conflicting information from just different sources."

Similarly, when asked about reporting on a student who has dyslexia or a related disorder and who is served by a Section 504 plan, participant responses in two middle school interviews (14.2% of school interviews) indicated an incorrect perception that those students must be reported in either the dyslexia or the Section 504 plan indicator. In four school-, three ESC-, and two district-level interviews (25.7%), participants said this is a common source of confusion. Additionally, a school-level dyslexia therapist described the challenging reporting intersection between Section 504, special education, and dyslexia: "In our PEIMS submission workshop I went to, it was made clear that if they are dyslexic, they're automatically 504, unless they are dyslexic but also special ed, under the special ed umbrella. So, I'm gradually pulling out the information I need, but there've been a lot of questions and lots of rabbit holes I've gone down. It's hard."

Although participants in 21 of the interviews (60.0%) said they understood that a student who has been identified as having dyslexia or a related disorder but who is not currently receiving services should still be reported as dyslexic in PEIMS, one district-level interviewee said such a student would not be reported, and interviewees in one school, one district, and three ESCs said this is a topic that TEA could further clarify. Similarly, participants in 26 interviews (74.2%) understood that any student who has been reported as having dyslexia or a related disorder should continue to be reported in subsequent years. However, interviewees from two districts and one school (8.6% of interviews) said there may be cases in which a student with dyslexia would not be reported in subsequent years. For example, one state and federal programs director said students are no longer reported as having dyslexia once "they're exited from the program … and this is a little confusing." Participants in three schools, two districts, and two ESCs (20.0% of interviews) stated that although they personally understand the requirements, this is a

source of confusion for other staff in their school, district, or region, especially when students move across districts. One dyslexia coordinator said their district has "had instances where we coded a student dyslexic, then they moved [out of district], and they were uncoded when they came back."

Reporting Challenges

Interviewers asked all participants about the greatest barriers to accurate PEIMS reporting on students with dyslexia and related disorders. The most common response was the previously mentioned school and district confusion about reporting on students with multiple designations. Participants in eight interviews (22.9%)—including five ESCs, two schools, and one district—said this is a challenge. The second most commonly cited barrier was having new or untrained staff responsible for PEIMS reporting. Participants at one school and three ESCs (11.4%) said this is a challenge, with one ESC staff stating that, in their region, there are a number of rural districts where "the PEIMS contact is in a really, really small district, a clerk, a paraprofessional that's doing the PEIMS training and PEIMS submissions … it'll be a little bit more challenging for them to get that support from their professional because that professional is also wearing many hats." In addition, participants in one district, one school, and one ESC (8.6% of interviews) described struggling to receive timely response from TEA to reporting questions. For example, an ESC dyslexia coordinator spoke about her experience reaching out to TEA: "I was just told to fill out a ticket, and they would get back to me. That doesn't work for us. We need to have an answer to turn it around and give it to a district. We need to be able to answer them."

Finally, interview participants at all levels asked for a more transparent process when modifications are made to reporting guidelines or the TEA *Dyslexia Handbook*. These comments were consistent with survey data, in which 9.1% of responding districts said they needed more timely updates on dyslexia identification and reporting requirements (see Figure 5.5.1). Similarly, several interviewees said districts would benefit from clearer communication about how PEIMS data are used to make decisions. As one district PEIMS coordinator summarized, "The very most common thing is nobody has a clue what I do. Everybody says, 'What is PEIMS?'" An ESC dyslexia coordinator said that, generally, the purpose of PEIMS data collection is not always clear: "Where do you go and run a report at the state level that shows dyslexia counts for all the districts? Who is finally the data owner for dyslexia at the state level, and are they even monitoring it? Do they run a statewide report, a regional report, a district report? If you go to the TEA website, where can you go look at the dyslexia counts, and are they even monitoring the data that we report through PIEMS?"

6.3 Dyslexia Identification

Interview topics related to identifying students with dyslexia and related disorders included questions about the processes schools use to identify or diagnose students with dyslexia and related disorders as well as resources or guidance participants receive and use from TEA, ESCs, or other sources. Interview participants in 31 of the 35 interviews (88.6%) expressed familiarity with the processes used to identify students with dyslexia or related disorders. In the other four cases (11.4% of interviews), participants said that although they reported on students in PEIMS, they were unfamiliar with the identification process or did not feel comfortable enough with the process to answer questions related to identification.

Interview participants described similar standard processes for identifying students with dyslexia or related disorders. The two catalysts described for initiating a dyslexia screening are teacher observation and parent request. Once a student has been flagged, they are referred to a school-based team, typically consisting of some combination of a classroom teacher, counselor, special education instructor, reading

specialist, and school administrator. The team will review the referral, examining available evidence from student performance on formative and summative assessments as well as teacher observation or anecdotal data to determine whether a dyslexia evaluation will be conducted. Once the student has been fully evaluated and diagnosed as having dyslexia, he or she begins receiving services.

As with PEIMS reporting, interview participants described two main sources of guidance for developing dyslexia identification processes in schools: resources from regional ESCs and *The Dyslexia Handbook*. Participants in 28 of the 35 interviews (80.0%) said schools and districts rely on ESC support to shape and inform their dyslexia identification process. ESC support included trainings and workshops as well as the administration of the TDIA dyslexia modules. Participants in 16 interviews (45.7%), including 8 ESCs, 4 districts, and 4 schools, said the modules are an important resource for schools and districts. For example, a dyslexia specialist at one district said, "Districtwide we have all of our teachers—whether it be elementary, middle and high school and no matter what subject—they all took the online module through TEA (module 1) online. So that's dyslexia 101." Interview participants from two schools and two districts (11.4% of interviews) said they receive training and support from the Region 10 ESC Dyslexia Program. A district dyslexia therapist described a useful Region 10 training during which ESC staff introduced screeners and assessments, and attendees "were able to go out, ask questions, look at the instrument, talk about how you would score it, how would you report it on your reporting during meetings."

The second most commonly cited resource was *The Dyslexia Handbook,* mentioned by participants in 22 of the 35 interviews (62.9%). Participants said it is a useful source of identification information, including 6 ESCs, 8 districts, and 7 schools. For example, one district dyslexia services coordinator said The Dyslexia Handbook has been an important resource for establishing the district's dyslexia identification process and knowing what characteristics their teachers should be looking for: "It gives us the process, tells us we must go through the 504 process. It outlines what we need to look for. It tells us the types of tests to use, the components that we need to assess … That's what we go by. We get to choose the test we use, but we're using tests that are recommended for dyslexia … it outlines our process and how we go through it."

Beyond the ESCs and TEA, interviewees cited other resources. Districts and schools said they use resources through various reading programs such as Take Flight. Districts sometimes bring in speakers to provide workshops on dyslexia identification or explain legal obligations for creating Section 504 plans and providing special education services. In addition, interview participants from one ESC, three districts, and two schools (17.1% of interviews) said staff in the region or districts received dyslexia identification training through the Texas Scottish Rite Hospital. One ESC dyslexia coordinator described the type of resource the Scottish Rite provides that schools and districts find useful, including "a handout tool that's useful to help to look for what are the characteristics and what are the steps, you know, what are you looking for?"

Identification Challenges

Interviewers asked all participants about any challenges schools or districts encounter when identifying students with dyslexia or related disorders. In 18 of the 35 interviews (51.4%)—including 7 ESCs, 4 districts, and 7 schools—participants said the greatest barrier to accurately identifying students to receive services is the lack of resources for understanding and identifying related disorders. An elementary school administrator said, "I wouldn't say there's anywhere near enough information that's disseminated to educators here as far as any differences or similarities between dyslexia and dysgraphia and how to look for that. In terms of dysgraphia itself, it's a fairly unexplored concept here." One ESC dyslexia consultant said the understanding of related disorders, even with the ESC itself, is limited: "I think the related disorders, we don't have good, clear guidance on what that looks like and what that is. Dysgraphia, for example, if you're looking at dysgraphia, there's no good standardized test that you can use. It's all subjective material that you're gathering. Once again, it's subjective. The way I view it may be different than somebody else in the room."

The second most commonly cited challenge for identifying students with dyslexia and related disorders was confusion about which screeners or assessments schools and districts should use. Participants from six ESCs, three districts, and three schools (34.3% of interviews) said this is an issue, with one ESC dyslexia coordinator saying, "The obstacles are having the tools to assess, and then also having the knowledge base, and then feeling confident in that process, especially with related disorders with dysgraphia … it's more about, what do we use? How do we assess?" Similarly, an elementary school Section 504 coordinator said they had received little guidance on how to screen and assess students: "I don't know that TEA has a laid-out plan, like these are the tests you need to give … I do definitely feel like TEA puts it out there, 'Hey, you need to make sure these kids are identified.' But you're not telling me how. That's handing me a bag of popcorn with no instructions and saying, 'Get it popped.'"

Survey respondents reported spending considerable time completing the full evaluation process to identify students with dyslexia, with approximately half (49.4%) of districts reporting spending 2 hours or more assessing and evaluating students for dyslexia. Interview participants from two schools and one district (8.6% of interviews) said time spent assessing students presented a challenge in districts with limited qualified staff. A dyslexia therapist from one high school said, "Besides teaching the classes, I also have to do the identification and the testing, and so I need about four more of me to do that … I'm spread very, very thin … When you're in a small district, that's just how it is." In addition to the amount of time it takes to evaluate and diagnose students with dyslexia, interview participants also cited the prohibitive cost of the assessments as an identification challenge.

Participants from six ESC, one district, and four school interviews (31.4%) said general education teachers need additional dyslexia identification training. A dyslexia teacher in an elementary school said general education teachers in their school do not "understand that whenever I pull [students] for dyslexia explicit instruction, that's just to help them with decoding, and giving that systematic explicit but [teachers] should also be doing things in the classroom as well with them. … They're not given the resources to understand that. The classes, the workshops, to understand that." These comments were consistent with survey data, in which 21.3% of responding districts reported that additional training opportunities for staff would help their district improve its procedures for identifying students with dyslexia or related disorders (see Figure 5.5.1).

Another common challenge schools and districts reported was having no or limited support from a qualified dyslexia specialist. This was reported by two ESCs, two districts, and four schools (22.9% of interviews). For example, one district dyslexia program facilitator said, “I do feel like they need to have somebody at the region level who actually understands dyslexia,” and a dyslexia specialist from another district said their staff “are having to search sometimes for some of our answers to our questions we’re looking for. And I think if our service center was a little more equipped, they could help us a little more easily.” At the school level, a Section 504 coordinator said, “I'm really the only one certified to diagnose anyone with dyslexia or have the knowledge … Not only do I have other jobs obviously on this campus, but I also have to figure out time to test [students]. That is not a quick process.” Interviewees also reported struggling with identifying students with dyslexia or related disorders in the early elementary grades. Participants from two ESCs, one district, and four schools (20.0% of interviews) said it is challenging for school staff to distinguish early signs of dyslexia for students who are still learning to read.

7. Recommendations

This final chapter synthesizes the survey responses and information from interview participants, offering recommendations for improving the PEIMS reporting process or clarity that could increase the accuracy of identifying, serving and reporting students with dyslexia and related disorders as well as areas where additional guidance may be needed to ensure students are correctly identified. The primary recommendations are summarized below.

Provide additional guidance and training for staff on the identification and service of students with dyslexia.

Districts need additional guidance and training for staff on the identification and service of students with dyslexia. On the statewide survey, the second most frequently reported barrier to reporting students with dyslexia was a lack of trained staff to identify students with dyslexia. To help address this barrier, districts requested additional guidance and training opportunities.

This was also demonstrated in the interviews, where the most common response to the question asking districts for recommendations on how TEA could improve the process for or offer clarity on how districts and schools identify students with dyslexia and related disorders was for more guidance on dyslexia identification for general education classroom teachers. Participants from six ESCs, one district, and four school interviews identified this as a priority. Relatedly, interviewees from four ESCs and one district reported that having ready access to a qualified dyslexia specialist would help districts with accurate and timely dyslexia identification.

Provide additional guidance on PEIMS reporting procedures, with particular attention to clarifying the requirements on how to report students with dyslexia who also have a Section 504 plan or receive special education services.

Districts also need additional guidance regarding PEIMS reporting procedures. On the statewide survey, the most frequently described barrier to reporting students with dyslexia and to uploading student dyslexia information into PEIMS focused on difficulties coding students with multiple designations (i.e., Section 504, dyslexia, special education). Districts reported being unsure if or how to report students who are receiving services under more than one of these designations. In both the interviews and surveys, districts reported that staff were not properly trained in how to code students with multiple designations and that there was confusion among staff regarding state reporting requirements for these students. These difficulties were demonstrated by responses to the statewide district survey, in which 14.7% of districts reported coding students who were identified as having dyslexia and receiving special education services as only receiving special education services.

To address this, districts requested additional guidance on PEIMS reporting procedures. Approximately 26.8% of districts indicated on the statewide survey that guidance on PEIMS reporting would help them improve their dyslexia identification and reporting procedures. Staff from five ESC interviews recommended creating a single, short document to address frequently asked reporting questions. For example, an ESC dyslexia consultant said their districts would benefit from a “TEA-approved cheat sheet, so that I’m not just making it up, that says, ‘504, you can click both 504 and dyslexia.’” Additionally,

interview participants recommended additional PEIMS training for ESC staff so that they may better assist districts that struggle with the reporting process.

Provide additional guidance on best-practice dyslexia identification and screening procedures, such as a list of state-approved screeners or assessments educators can use to identify dyslexia.

Districts also want additional guidance on dyslexia identification and screening procedures. In response to the question on the statewide survey asking districts to describe the types of information or assistance that would help them improve their procedures for identifying students with dyslexia and reporting these students in PEIMS, the highest percentage of districts (27.3%) requested additional guidance on dyslexia identification and screening procedures. To help them with this, participants in seven interviews—including four ESCs, one district, and two schools—suggested TEA provide a list of state-approved screeners or assessments educators can use to identify dyslexia and related disorders, similar to the list of approved early reading instruments.

Provide school, district, and ESC staff with training and guidance on identifying, reporting, and serving students with dyslexia-related disorders (e.g., dysphasia, auditory imperceptions, or developmental spelling disabilities).

Additionally, districts struggle with identifying and reporting students with dyslexia-related disorders. Interviewees from four ESCs, two districts, and four schools indicated that lack of knowledge about related disorders is a significant barrier to identifying students who may need services. Not having a dysgraphia indicator was identified as a barrier to reporting data on dyslexia and related disorders on the statewide survey. To remedy this, interview participants from one ESC, one district, and one school suggested creating a handbook for related disorders or adding additional chapters to the existing The Dyslexia Handbook with more details about related disorders.

While districts identified a need for this type of support, there is a lack of research regarding identifying, reporting, and serving students with some of these dyslexia-related disorders, especially dysgraphia.

Focus additional efforts for improving dyslexia identification and reporting on charter schools, rural school districts, and districts with high percentages of African American and Hispanic students.

The extant data analyses, using data from the 2017–18 school year, showed that charter schools, rural school districts, and districts with high percentages of African American and Hispanic students were significantly less likely to identify at least one student in PEIMS as having dyslexia. Additionally, the descriptive analyses showed that the percentage of charter schools identifying at least one student in PEIMS as having dyslexia lagged considerable behind all other district types. Between 2014–15 and 2017–18, the percentage of charter schools identifying at least one student in PEIMS as having dyslexia ranged from 59.5% to 66.7%. This is considerably lower than the statewide averages, which ranged from 86.0% in 2014–15 to 90.4% in 2017–18. Focusing guidance and training for staff on the identification of students with dyslexia, guidance on PEIMS reporting procedures, and assistance with best-practice dyslexia identification and screening procedures on these district types could increase the accuracy of the dyslexia information in PEIMS considerably.

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Appendix A. Extant Data Analyses: Technical Details

A.1 Data

Administrative data files from the Texas Education Agency (TEA) were used to conduct the extant data analyses. The administrative data files contained student- and district-level data for the 2014–15 through 2017–18 school years. The following student-level data variables were obtained from the Public Education Information Management System (PEIMS): grade, race/ethnicity, economic disadvantage, sex, English language learner (EL) status, special education status, and dyslexia status. The percentages of students meeting grade level on the State of Texas Assessments of Academic Readiness (STAAR) data in mathematics and reading were obtained from the Texas Academic Performance Reports (TAPR) provided on the TEA website at the district level. The education service center (ESC) region for each district was also obtained from the TAPR files. District community type was obtained from the district type files included on the TEA website.[10] Only districts for which data were available in PEIMS, TAPR, and the district type files were included in the analyses.

A.2 Percentage of Districts Using the Dyslexia Indicator in PEIMS

To determine the percentage of districts using the dyslexia indicator in PEIMS, student-level data from the PEIMS data files were aggregated to the district level. Data were aggregated separately for each school year, 2014–15 through 2017–18. Aggregated PEIMS data were merged with district-level data from TAPR and the district type files using the district ID variable present in each data file. Descriptive statistics were used to produce the number and percentage of districts in the state for which at least one student was identified as having dyslexia by school-year cohort. Student group analyses were conducted to examine the percentage of districts using the dyslexia indicator in PEIMS by district type and ESC region by school year.

A.3 District Characteristics Associated With Using the Dyslexia Indicator in PEIMS

To further examine districts' use of the dyslexia indicator in PEIMS, a logistic regression model was used to assess which, if any, district characteristics were correlated with districts' reporting student dyslexia information in PEIMS. Data from the 2017–18 school year only were used in these analyses.

Logistic regression is used to explain relationships between a binary dependent variable (outcome) and one or more independent variables. In these analyses, the outcome was coded as 1 if the district reported at least 1 student as having dyslexia in PEIMS and 0 if the district did not have any students coded as having dyslexia in PEIMS. The variables most likely to be the strongest predictors of district use of the dyslexia indicator were tested in a logistic regression model first. These variables included district type, percentage of students meeting grade level on STAAR mathematics assessments, percentage of students meeting grade level on STAAR reading assessments, percentage of economically disadvantaged students, percentage of ELL students, and percentage of students by race/ethnicity (e.g.,

[10] District type for the 2017–18 school year are not available. Because there is little fluctuation across years in district type, data from the 2016–17 school year were used instead.

Asian, black, Hispanic, white, and other).[11] Due to collinearity issues, district size and district region were not included in the final analysis. The equation for the logistic regression model is shown below:

$$logit(p) = \ln\left(\frac{p}{1-p}\right) = \beta_0 + \beta_1 X_1 + \beta_2 X_2 \ldots \beta_k X_k$$

In the model above, (p) is the probability of not identifying at least one student in the district as having dyslexia in PEIMS, β_0 is the intercept, β_1 through β_k are the coefficients associated with the predictor variables, and X_1 through X_k are the values of the predictor variables. The final variables included in the model were: percent African American students, percent Hispanic students, percent Asian/Pacific Islander students, percent students of other races, percent English language learners, percent special education students, rural district, non-metropolitan fast-growing district, independent town district, other central city district, other central city suburban district, charter school district, major urban district, major suburban district, percentage of students meeting state standards on the STAAR reading assessment, percentage of students meeting state standards on the STAAR mathematics assessment, missing data for the percentage of students meeting state standards on the STAAR reading assessment, and missing data for the percentage of students meeting state standards on the STAAR mathematics assessment.

A.4 Special Education Status and Dyslexia Status

Descriptive analyses using student-level PEIMS data were conducted to report the percentage of students identified and reported as having dyslexia or a related disorder who also were identified and reported as receiving special education services in PEIMS. Analyses were also conducted to assess the percentage of students identified and reported as receiving special education services who are identified and reported as having dyslexia or a related disorder in PEIMS. These analyses were conducted using data for the 2014–15 through 2017–18 school years.

[11] Some districts had missing values or masked data values for the percentage of students meeting state standards on the STAAR reading or mathematics assessments. To address this, missing data indicators were created in which district with missing values for the percentage of students meeting state standards on the STAAR assessments were coded as 1 and districts with non-missing values were coded as 0. Missing values for the percentage of students meeting state standards on the STAAR reading and mathematics assessments were replaced with 0s.

Appendix B. Fall 2018 District and Open-Enrollment Charter School Survey

B.1 Summary of Activity

On October 15, 2018, American Institutes for Research (AIR) administered a 24-item survey to 1,167 districts and open-enrollment charter school districts in Texas. The survey was designed to gather information about processes and procedures used by districts to identify and report students with dyslexia. Instructions and a unique link for completing the survey were distributed to the email addresses of the school district superintendents on file in the most recent AskTED database.[12] Superintendents were asked to forward the survey to the individual(s) most knowledgeable about their district's dyslexia service and Texas' Public Education Information Management System (PEIMS) reporting. By clicking on the *Next* button at the bottom of the survey introduction page, districts provided consent for AIR to use district responses anonymously in the study report.

The survey consisted of fixed as well as open-ended response items. None of the items on the survey were required, meaning that districts did not have to provide an answer to an item in order to advance to subsequent items or to submit the survey. The survey used skip logic, meaning that responses to some items triggered additional items to be delivered to the respondent, contingent on the original response. Survey respondents were able to save their responses and return to complete the survey at a later time. In addition, multiple users could access the unique district link to complete the survey, as needed.

The survey comprised five sections. The first section contained seven items asking districts to provide information about their dyslexia identification and reporting procedures, including describing barriers to reporting students with dyslexia through PEIMS. The second section comprised seven items asking districts to report on their dyslexia screening and evaluation procedures. The third section contained two questions asking districts to describe their coding procedures for students identified as having dyslexia and receiving special education services. In the fourth section, districts were asked to respond to six items regarding the guidance for dyslexia screening, identification, and reporting they received from TEA and their regional education service center (ESC). The final section asked districts to describe the types of information or assistance that would help them improve their procedures for identifying, or PEIMS reporting of, students with dyslexia as well as provide any additional feedback they believed TEA should know about district reporting procedures for students with dyslexia.

Assistance was provided to survey respondents via telephone and email. Respondents were asked to direct technical questions to the AIR project director at the email address and telephone number provided.

The original survey invitation asked districts to complete the survey by October 31, 2018. The deadline was extended to November 5, 2018, in order to accommodate districts that had difficulty accessing the survey for various reasons. Reminder emails were sent to nonrespondents on the following dates:

[12] AskTED is a database that houses contact information for Texas public schools, districts, and education service centers (ESCs). AskTED is available at http://mansfield.tea.state.tx.us/tea.askted.web/forms/home.aspx.

October 15, 2018

October 18, 2018

October 22, 2018

October 24, 2018

October 25, 2018

October 29, 2018

October 30, 2018

November 2, 2018

November 5, 2018

B.2 Characteristics of District Respondents

The survey was open from October 15 through November 5, 2018. Responses from the districts were monitored in order to target follow-up calls to districts to achieve a pool of responses representative of the state. District response was disaggregated as reported according to the following categories: (a) district type (e.g., charter, major urban, major suburban, rural); (b) 2016–17 district accountability rating; (c) district demographics (e.g., race/ethnicity, special education, economically disadvantaged, limited English proficiency); and (d) district size. Reminder calls were conducted with nonresponding districts throughout the administration window.

The final number of districts completing the survey was 758, a 65% response rate. Table B.2.1 presents the distribution of district responses relative to the state. As shown in Table B.2.1, the characteristics of districts that responded to the survey were largely representative of all districts and open-enrollment charter schools in the state.

Table B.2.1. Characteristics of Districts Responding to the Dyslexia Identification and Reporting Survey Fall 2018 District and Open-Enrollment Charter School Survey Compared to the State

District Characteristics	District		State	
	Count	Percentage	Count	Percentage
Total District	758		1,167	
Total Student	3,173,599		5,273,257	
District Type				
Charter School Districts	93	12.3	153	13.1
Independent Town	46	6.1	68	5.8
Major Suburban	43	5.7	78	6.7
Major Urban	7	0.9	11	0.9
Non-Metropolitan Fast Growing	15	2.0	28	2.4
Non-Metropolitan Stable	112	14.8	173	14.8
Other Central City	26	3.4	38	3.3
Other Central City Suburban	105	13.9	162	13.9
Rural	311	41.0	458	39.2
District Size (Student Enrollment)				
50,000 or More	9	1.2	20	1.7
25,000 to 49,999	21	2.8	30	2.6
10,000 to 24,999	40	5.3	65	5.6
5,000 to 9,999	42	5.5	76	6.5
3,000 to 4,999	46	6.1	76	6.5
1,600 to 2,999	93	12.3	139	11.9
1,000 to 1,599	100	13.2	149	12.7
500 to 999	159	21.0	229	19.6
Fewer Than 500	248	32.7	385	32.9
State Accountability Rating				
Met Standard	712	93.9	1,101	94.2
Met Alternative Standard	11	1.5	19	1.6
Improvement Required	29	3.8	39	3.3
Not Rated	6	0.8	10	0.9

District Characteristics	District		State	
	Count	Percentage	Count	Percentage
Student Demographics				
Economically Disadvantaged	1,834,321	57.8	3,098,300	58.8
English Language Learners	562,393	17.7	992,599	18.8
Special Education	284,368	9.0	461,501	8.8
African American	377,579	11.9	652,346	12.4
Hispanic	1,622,769	51.1	2,760,919	52.4
White	959,187	30.2	1,484,892	28.2
American Indian	11,803	0.4	20,431	0.4
Asian/Pacific Islander	130,286	4.1	228,321	4.3

Appendix C. Dyslexia Identification and Reporting Study Fall 2018 District and Open Enrollment Charter School Survey

Dyslexia Identification and Reporting Study—Fall 2018 District and Charter School Survey

Why am I receiving this survey invitation?

American Institutes for Research (AIR) is conducting a study on behalf of the Texas Education Agency (TEA) examining the identification and reporting in Texas Student Data System (TSDS) Public Education Information Management System (PEIMS) of students with dyslexia or a related disorder. The purpose of this survey is to find out how districts and charter schools (in the survey, the word "districts" refers to both districts and charter schools) across Texas are identifying students as having dyslexia or a related disorder and reporting the data in TSDS PEIMS. Your school district has recently received a To the Administrator Addressed communication from TEA regarding this survey.

The survey includes both multiple-choice and short, open-ended questions. The survey will take approximately 15–25 minutes to complete. Please read the questions carefully and review all response choices before making your selections.

We ask that the survey be completed by the individual(s) in the district who are most knowledgeable about the district's dyslexia services and dyslexia TSDS PEIMS reporting requirements.

Why should my district participate?

This survey asks for information about the processes and procedures your district uses to identify and report on students with dyslexia and related disorders. Your participation is voluntary, but your input plays an important role providing feedback to TEA that can be used to improve the guidance and support that TEA provides to districts regarding TSDS PEIMS dyslexia reporting requirements.

Who can I contact for questions or support in completing the survey?

If you encounter technical or substantive issues with survey content during completion, please direct your questions by phone or email to Ginger Stoker at 512-391-6506 or gstoker@air.org.

Are my responses confidential?

Yes. Your responses are confidential to the extent permitted by law, and no individuals or districts will be identified by name in the reporting of study findings. Only aggregate results will be reported. It is also important to note that AIR is not evaluating you or your district; rather, we are trying to ascertain the processes and procedures used by districts across Texas to identify and report on students with dyslexia. Survey results from district administrators will be aggregated in all reports, and you will not be linked to any results. If any of the open-ended comments are used in future reporting, all identifying information (such as names of schools, districts, or individuals) will be omitted.

By completing the survey, you consent to let AIR use your responses and comments anonymously in AIR's Dyslexia Identification and Reporting Study reports.

Statement of Consent

If you agree to participate in the survey, click on the "NEXT" button below.

Section 1: Dyslexia Identification and Reporting

1. How are students who are identified as having dyslexia or a related disorder designated in district records? (*Select one*.)

◯	District database only
◯	School database only
◯	District and school databases
◯	Other:_____

2. Has your district experienced any barriers reporting students identified with dyslexia or related disorders?

◯	Yes	◯	No	◯	Unsure

< Respondents will receive item 3 if they answer "Yes" or "Unsure" to item 2>

3. Please describe the barriers your district has experienced reporting students identified with dyslexia.

4. After a student has been identified as having dyslexia, for how long does your district report that student in Texas Student Data System (TSDS) Public Education Information Management System (PEIMS) as having dyslexia or a related disorder?

◯	Only while the student is receiving dyslexia services
◯	While the student is enrolled in the district, regardless of whether the student is currently receiving dyslexia services
◯	Other:_____

5. Does your district include data on whether a student has been identified as having dyslexia or a related disorder in its student data uploads to the TSDS PEIMS?

◯	Yes	◯	No	◯	Unsure

6. Has your district experienced any barriers reporting data about students with dyslexia or a related disorder via TSDS PEIMS?

◯	Yes	◯	No	◯	Unsure

< Respondents will receive item 7 if they answer "Yes" or "Unsure" to item 6>

7. Please describe the barriers your district has experienced reporting data about students with dyslexia or a related disorder via TSDS PEIMS.

Section 2: Dyslexia Screening and Evaluation

8. In which grades does your district conduct universal screening of <u>all students</u> for dyslexia? (*Select ALL that apply*.)

◯	Pre-K	◯	Grade 3	◯	Grade 7
◯	Kindergarten	◯	Grade 4	◯	Grade 8
◯	Grade 1	◯	Grade 5	◯	High School
◯	Grade 2	◯	Grade 6		

9. Please list the names of the screeners or reading instrument(s), if any, your district uses to assess students' reading development and comprehension to identify students who may be at risk for reading disabilities, such as dyslexia or other related disorders, in each of the following grade spans.

Early Elementary (K-Grade 2)
Late Elementary (Grades 3-5)
Middle School (Grades 6-8)
High School (Grades 9-12)

10. Which sources of information does your district consider when screening and assessing students for dyslexia? (*Select ALL that apply*.)

◯	Vision screening	◯	State student assessment results
◯	Hearing screening	◯	Observations of instruction provided to the student
◯	Teacher reports of classroom concerns	◯	Full Individual Evaluation (FIE)
◯	Classroom reading assessments	◯	Outside evaluations
◯	Accommodations or interventions provided	◯	Speech and language assessment
◯	Gifted/talented assessments	◯	School attendance
◯	Samples of schoolwork	◯	Curriculum-based assessment measures
◯	Parent conference notes	◯	Instructional strategies or interventions provided and student's response to the instruction
◯	Native language assessments	◯	Universal screening
◯	Reading instruments (reading development and comprehension)	◯	School psychologist's evaluation
◯	Parent reports of history of dyslexia	◯	Dyslexia specialist's evaluation
◯	Other:_____		

11. About how long does the screening process take for each student? (*Select one*.)

◯	Less than 15 minutes	◯	61-90 minutes
◯	15-30 minutes	◯	91-120 minutes
◯	31-45 minutes	◯	More than 120 minutes
◯	46-60 minutes		

12. About how long does the assessment/evaluation process take for each student? (*Select one*.)

◯	Less than 15 minutes	◯	61-90 minutes
◯	15-30 minutes	◯	91-120 minutes
◯	31-45 minutes	◯	More than 120 minutes
◯	46-60 minutes		

13. What types of training have staff in your district received with regard to screening, evaluation, and identification of students with dyslexia or a related disorder? (*Select ALL that apply*.)

◯	Written materials for staff to review regarding screening, evaluation, and identification of students with dyslexia or a related disorder	◯	Face-to-face training provided by ESC staff regarding screening, evaluation, and identification of students with dyslexia or a related disorder
◯	Face-to-face training provided by district staff regarding screening, evaluation, and identification of students with dyslexia or a related disorder	◯	Face-to-face training provided by professional development staff regarding screening, evaluation, and identification of students with dyslexia or a related disorder
◯	Access to online materials or videos regarding screening, evaluation, and identification of students with dyslexia	◯	Other:_____

14. How often does your district offer professional development training to staff regarding screening, evaluation, and identification of students with dyslexia? (*Select one*.)

◯	As needed	◯	Twice a year
◯	Every other year	◯	More than twice a year
◯	Every year	◯	

Section 3: Special Education

15. Briefly describe the process your district uses to determine whether students identified as having dyslexia or a related disorder are eligible for special education.

16. If a student who is eligible for special education services is also identified as having dyslexia, what information does your district report in TSDS PEIMS for this student? (*Select one*.)

◯	Having dyslexia only
◯	Receiving special education services only
◯	Having dyslexia AND receiving special education services
◯	Other:_____

Section 4: Guidance for Dyslexia Screening, Identification and Reporting

17. Has your district received any information or guidance from TEA regarding screening, identification, or PEIMS reporting requirements for students with dyslexia or a related disorder?

◯	Yes	◯	No	◯	Unsure

< Respondents will receive item 18 if they answer “Yes” or “Unsure” to item 17>

18. Please list or describe the type(s) of information or guidance has your district received from TEA regarding screening, identification, or PEIMS reporting requirements for students with dyslexia or a related disorder.

< Respondents will receive item 19 if they answer “Yes” or “Unsure” to item 17>

19. How useful was the information or guidance you received from TEA regarding dyslexia screening, identification, or PEIMS reporting requirements for students with dyslexia or a related disorder?

20. Has your district received any information or guidance from your regional Education Service Center (ESC) regarding screening, identification, or PEIMS reporting requirements for students with dyslexia or a related disorder?

◯	Yes	◯	No	◯	Unsure

< Respondents will receive item 21 if they answer "Yes" or "Unsure" to item 20>

21. Please list or describe the type(s) of information or guidance has your district received from your regional ESC regarding PEIMS reporting requirements for students with dyslexia or a related disorder.

< Respondents will receive item 22 if they answer "Yes" or "Unsure" to item 20>

22. How useful was the information or guidance you received from your regional ESC regarding PEIMS reporting requirements for students with dyslexia or a related disorder?

Section 5: District Needs

23. What information or assistance would help your district to improve its procedures for identifying or PEIMS reporting of students with dyslexia or related disorders?

24. Please provide any additional feedback you feel TEA should know about district reporting procedures for students with dyslexia or related disorders.

Thank you for completing the survey!

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