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# Each and Every Child

Quick news for Parents, Teachers and Students

An e-newsletter by the Iowa Department of Education's Bureau of Learner Strategies and Supports

## Explicit instruction: 'I do, we do, you do'

"OK, we are going to pretend to blow up a balloon," says Teacher Ashley Huffman to her two first graders. "The balloon gets bigger...and bigger...and bigger...."

With outstretched hands holding the imaginary overinflated balloon, Ashley asks, "and what happens when a balloon gets too full?"

The children say "Pop!" and they all pantomime as if their balloons had burst.

Though her students didn't know, Ashley was demonstrating sequencing (or "first, next, last") by explicitly teaching the concepts.

"We were talking about first and next," she said. "The kids were looking at two pictures. They had to determine which picture came first and which one came next. In that particular instance, there was one picture of a balloon being popped and one picture of a kid blowing up a balloon. They had to figure out which one came first and next."

The special education teacher at Hayes Elementary in Davenport said that before a district-wide reading and literacy initiative was put in place, the students' needs were mostly guesswork and hunches.

"Before, it was hard to pinpoint precisely what it was the student needed," Ashley said. "Today, we can ascertain exactly what the child needs. And when teaching, one particularly good approach is explicit instruction, which enables the students to see and hear what it is you're teaching them."

Explicit instruction is a key element within Davenport's reading and literacy initiative, says Patti Pace-Tracy, director of special education in the 16,000-student district.

"One of the things that the teachers learn is that a critical component of instruction in the classroom is being explicit," Patti said. "I do, we do, you do –that is the process we use with explicit instruction in the classroom."

The reading and literacy initiative was put in place based on abysmal performance among students on Individual Education Programs.

"When I came on board three years ago, the district had gone through a special education audit because students were not achieving," she said. "Of the eight urban education networks, we were last in the education gap. I was handed the audit with understanding that I needed to fix things – take this information and fix what was going on in special education."

Patti conferred with the Iowa Department of Education about professional learning opportunities for their special education teachers. She was interested in professional development that focused on literacy instruction for persistently struggling readers.

Department Consultant Sandy Nelson said there are specific attributes that literacy professional

development should contain to ensure a change in teacher practices. Sandy suggested that it be based on the research from the National Reading Panel (2000) and the research that has come out since that provides the why and the how around literacy instruction for struggling readers.

"It also must address the five major areas of literacy – fluency, comprehension, decoding, vocabulary and phonemic awareness – and have a strong component that builds assessment and matching to instruction skills for teachers," Sandy said.

Finally, it is important to provide system-level support for change and build into your professional development embedded learning opportunities such as on-site coaching and follow-up with teachers in their classrooms.

Back in Davenport, committees were formed and an aggressive plan was developed that focuses on three main areas: literacy, organizational structures and Response to Intervention (RtI). A major part of the plan called for professional learning for educators working with students with disabilities. A central focus of that learning has been the use of a reading research-based set of materials called Language Essentials for Teachers of Reading and Spelling, but more commonly referred to as LETRS, from Sopris Learning. For the Davenport special education staff, that meant a rigorous 16-day training that starts from the theoretical models of reading all the way through to changing instruction in the classroom. When training is complete, all of the approximately 200 special education teachers from preschool through 12th grade will have gone through it. One outcome from this learning is teachers knowing why and when you use an explicit instruction approach with students who persistently struggle with reading.

"What it calls for is errorless teaching in which the lesson and the directions are laid out specifically for what the teacher does and the student does," Patti said. "It is very structured in its delivery."

Does it take away from the art of teaching?

"No," Patti said. "But we no longer rely on 'I think.' We rely solidly on data to drive our instruction, and if the research supports it, we're going to go in that direction."

The approach leaves few variables unattended.

"We have had to work with teachers who wanted to wing it," Patti said. "Some teachers would say that the 'students are struggling' or 'it's just too much for the kids.' My response: You have to maintain the rigor. We have to ensure a high level and rigor in our instruction. We know if we follow what the program is telling us to do, the students will achieve. We have to assume that kids can achieve at high levels. We should never sell them short. We have coddled special education students far too long."

Before the first cohort went through the professional development, the initiative received a cool reception because of the huge commitment out of the classroom. But after the first four days of training, Patti said, "word starting trickling out: 'Oh my gosh, this is incredible stuff.'"

An essential skill that the teachers acquired is how to complete a diagnostic assessment using multiple tools to determine the skill deficit of each child. This ensures that the match to the explicit instruction approach for each child is put into place, and that the teacher knows how to deliver that instruction. Once that's in place, progress monitoring is conducted and ongoing instructional decision-making is under way.

"We have to close the gap," Patti said. "We know we will double dose or even triple dose to get students caught up to their peers."

Though the initiative has been in place for only two years and fewer than half of the teachers have gone through the professional development, it is already paying dividends.

"This past year, we moved up a notch among the urban education networks," Patti said. "That was like winning the lottery."

## **A chart for mental health issues**

Mental health has been the topic of front-page news stories in the last month.

The National Alliance on Mental Illness (NAMI) Greater Des Moines chapter created an easy-to-use what-to-do chart for those affected by mental health issues. It is attached to this newsletter.

This is provided courtesy of Teresa Bomhoff, vice president, Great Des Moines' NAMI.

## **A bullying, suicide-prevention hotline for all**

The state of Iowa has created a new tool designed to combat bullying and enhance suicide prevention among our youth.

The state now has a program to help children, parents, educators and others get help in preventing bullying and youth suicides.

Your Life Iowa is a hotline set up by the Iowa Department of Public Health in partnership with the Iowa Department of Education and others.

The service is available by phone or text at 855-581-8111.

Counselors will be able to answer questions and provide help to young people.

## **Clear, Obvious and Orderly**

### **Why Explicit Instruction Matters**

By Edward J. Kame'enui

Students who struggle in school because they can't read the words in a story, do math or even pay attention and follow directions, should benefit from explicit instruction—instruction that a teacher makes clear to the eyes, ears and mind of a child. So, "What does that mean?" And, "Why does it matter?"

Instruction that is explicit—clear to the eyes, ears, and mind of a child—requires a teacher to show children what things look like and explain to them in clear and simple language what things mean or how they work. Of course, this kind of instruction is basic common sense, isn't it? However, it is simply not common enough in classrooms and it is difficult to do without a great deal of preparation and thinking before any teaching takes place.

Why does explicit instruction matter? Well, in one word, the brain. All learning takes place in the brain, right? It's kind of a "no brainer." However, getting learning to "stick" in the brain is more difficult than you think. In order for human beings of any age to learn, we must, as a first step, pay very close attention with our eyes, ears and mind, to what a teacher is saying and doing. This is especially important when what is being taught is new and we don't know much about it. Why? Well, all learning requires us to attend to "sensory" information—information that involves the eyes, ears and mind. Explicit instruction makes very obvious what things a child must attend to when the teacher is teaching.

For example, when the teacher says, "Everyone, look at me," or "Boys and girls, put your finger under the word, boisterous, in the story," the teacher is stating in clear and unmistakable terms, what students should

do. Explicit instruction also matters because it breaks big and complicated chunks of information into small bits and pieces that teachers can present, and the brain can soak up more readily.

In order for the brain to soak up information and remember it, the information—in manageable chunks or bits and pieces—needs to be prepared so that the brain can see a pattern that is consistent and repeated. Explicit instruction makes this pattern clear and consistent to the ears, eyes and mind of the student.

When instruction is explicit, children should know: (a) what to pay attention to, (b) how to respond, (c) when to respond, (d) what to expect, and (e) why something is important. Students should also be given many, many chances to respond correctly (including being told the right answer when the wrong answer is given) and to feel successful. Why does this matter? The brain likes it when it is successful, doesn't it? Now, that really is a no brainer!

Dr. Edward J. Kame'enui is Dean-Knight Professor of Education, director of the Institute for the Development of Educational Achievement and the Center on Teaching and Learning, and associate dean for Research and Outreach in the College of Education at the University of Oregon. Dr. Kame'enui has co-authored 17 college textbooks, including books on teaching reading, curriculum design, vocabulary instruction, higher order thinking, and classroom management. He has more than 150 publications including 100 refereed research articles and 50 book chapters.

## **About the author**

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## **Response to Intervention coming your way**

In the coming weeks, months and years, you are going to be hearing about a lot about a research-based decision-making model called Response to Intervention, or RtI. RtI is about all students, though there are plenty of implications for students and educators within the special education community.

RtI will be rolled out statewide through a collaboration among the Iowa Department of Education, the area education agencies (AEAs) and local schools called Collaborating for Kids.

RtI is a decision-making framework composed of evidence-based practices in assessment and instruction. RtI is a process by which schools use data to identify the academic and behavioral supports each student needs to be successful in school and to leave school ready for life. The process calls for schools to provide all students with evidence-based instruction and interventions matched to their needs, and monitors student progress to improve their education.

Included in this process is determining whether struggling students need special education services. In that realm, RtI also is used to help monitor the progress of special education students and to adjust special education interventions when needed.

RtI provides three levels of instruction. In Iowa, these tiers are labeled Universal, Targeted, and Intensive. Each of these levels provides increasingly intensive instruction, based on individual student needs, to support student progress toward proficiency in the Iowa Core.

The critical components of RTI include:

- Robust, universal instruction in the Iowa Core;
- Universal screening (where all students are screened);
- Evidence-based, instructional interventions at the Targeted and Intensive levels;
- Progress monitoring; and
- Data-based decision-making

What is the Department doing to support RtI?

- Establishing a state implementation network;
- Reviewing and editing, as necessary, state policies and procedures;
- Identifying and allocating financial supports;
- Developing statewide professional development;
- Establishing a new RtI data system;
- Identifying reliable and valid universal screening and progress monitoring assessments; and
- Conducting a research review to share information with Iowa educators focusing on the Universal, Targeted, and Intensive levels of instruction and support.

Many of these activities are already under way and will continue to be a priority of the Department. Timelines will be determined by Collaborating for Kids group as this work moves forward. For more information, go to the Department's RtI webpage at [http://educateiowa.gov/index.php?option=com\\_content&view=article&id=2562](http://educateiowa.gov/index.php?option=com_content&view=article&id=2562).

## Mental Illness Education Possibilities in Schools

Suicide Prevention Efforts	Crisis Response	For Students	For School Staff	For Parents and Families
<p><b>ACE Cards</b> laminated for students - Adapt an awareness project from Army - <a href="http://www.armyg1.army.mil/hr/suicide/training.asp">http://www.armyg1.army.mil/hr/suicide/training.asp</a> <i>See image on second page</i></p>	<p><b>CIT for Youth training</b> <a href="http://www.nami.org/cit">www.nami.org/cit</a> and <a href="http://www.nami.org/Content/NavigationMenu/Find_Support/Child_and_Teen_Support/CIT_for_Youth/CIT_for_Youth.htm">http://www.nami.org/Content/NavigationMenu/Find_Support/Child_and_Teen_Support/CIT_for_Youth/CIT_for_Youth.htm</a></p>	<p>School based MH Services (piloted in some schools)</p>	<p>Mandatory MH training in-service and in college prep training</p>	<p>Support groups and Education</p>
<p><b>SOS Signs of Suicide prevention</b> program - <a href="http://www.mentalhealthscreening.org/programs/youth-prevention-programs/sos/">http://www.mentalhealthscreening.org/programs/youth-prevention-programs/sos/</a></p>	<p><b>A Guide to Emerging and Promising Crisis Intervention Programs for Youth</b> <a href="http://www.nami.org/Template.cfm?Section=Federal_and_State_Policy_Legislation&amp;Template=/TaggedPage/TaggedPageDisplay.cfm&amp;TPLID=76&amp;ContentID=37849">http://www.nami.org/Template.cfm?Section=Federal_and_State_Policy_Legislation&amp;Template=/TaggedPage/TaggedPageDisplay.cfm&amp;TPLID=76&amp;ContentID=37849</a></p>	<p><b>Breaking the Silence</b> <i>Elementary, middle school, senior high – teacher lesson plans</i> <a href="http://www.btslessonplans.org/">http://www.btslessonplans.org/</a></p>	<p><b>NAMI Basics</b> – free <i>Eventually have teaching teams within the school system.</i> <a href="http://www.nami.org/basics">www.nami.org/basics</a></p>	<p><b>NAMI Basics</b> – free <a href="http://www.nami.org/basics">www.nami.org/basics</a></p>
<p><b>The Science of Healthy Behaviors</b>—NIMH <a href="http://science.education.nih.gov/supplements/nih7/healthy/default.htm">http://science.education.nih.gov/supplements/nih7/healthy/default.htm</a></p>		<p><b>Mental Health First Aid</b> <a href="http://www.mentalhealthfirstaid.org/">www.mentalhealthfirstaid.org/</a></p>	<p><b>Mental Health First Aid</b> <a href="http://www.mentalhealthfirstaid.org/">www.mentalhealthfirstaid.org/</a></p>	<p><b>Mental Health First Aid</b> <a href="http://www.mentalhealthfirstaid.org/">www.mentalhealthfirstaid.org/</a></p>
<p><b>2012 National Strategy for Suicide Prevention – SAMHSA</b> <a href="http://www.samhsa.gov/samhsaNewsletter/Volume_20_Number_3/suicide_prevention_resources.aspx">http://www.samhsa.gov/samhsaNewsletter/Volume_20_Number_3/suicide_prevention_resources.aspx</a></p>		<p><b>Resilience Trumps ACES</b> – teaching skills to reduce impact of Adverse Childhood Experiences <a href="http://www.resiliencetrumpsaces.org/">www.resiliencetrumpsaces.org/</a></p>	<p><b>NAMI Parents and Teachers as Allies</b> – free <a href="http://www.nami.org/template.cfm?section=Schools_and_Education">www.nami.org/template.cfm?section=Schools_and_Education</a></p>	<p><b>NAMI Parents and Teachers as Allies</b> - free <a href="http://www.nami.org/template.cfm?section=Schools_and_Education">www.nami.org/template.cfm?section=Schools_and_Education</a></p>
		<p><b>The Science of Mental Illness</b> <i>Middle school</i> – NIMH <a href="http://science.education.nih.gov/supplements/nih5/mental/default.htm">http://science.education.nih.gov/supplements/nih5/mental/default.htm</a></p>	<p><b>NAMI Provider Education</b>– free <i>Eventually have teaching teams within the school system</i> <a href="http://www.nami.org/providereducation">www.nami.org/providereducation</a></p>	
		<p><b>The Brain’s Inner Workings: A Guide for Teachers</b> – NIMH <a href="http://www.nimh.nih.gov/educational-resources/brains-inner-workings/the-brains-inner-workings-activities-for-grades-9-through-12.shtml">http://www.nimh.nih.gov/educational-resources/brains-inner-workings/the-brains-inner-workings-activities-for-grades-9-through-12.shtml</a></p>	<p>Free quarterly <b>NAMI Beginnings</b> magazine <a href="http://www.nami.org/Template.cfm?Section=Child_and_Adolescent_Action_Center&amp;template=/ContentManagement/ContentDisplay.cfm&amp;ContentID=30220">http://www.nami.org/Template.cfm?Section=Child_and_Adolescent_Action_Center&amp;template=/ContentManagement/ContentDisplay.cfm&amp;ContentID=30220</a></p>	<p>Free quarterly <b>NAMI Beginnings</b> magazine <a href="http://www.nami.org/Template.cfm?Section=Child_and_Adolescent_Action_Center&amp;template=/ContentManagement/ContentDisplay.cfm&amp;ContentID=30220">http://www.nami.org/Template.cfm?Section=Child_and_Adolescent_Action_Center&amp;template=/ContentManagement/ContentDisplay.cfm&amp;ContentID=30220</a></p>
		<p><b>Brain Basics</b> – NIMH <a href="http://www.nimh.nih.gov/educational-resources/brain-basics/brain-basics.shtml">http://www.nimh.nih.gov/educational-resources/brain-basics/brain-basics.shtml</a></p>	<p><b>Shoes on the Wrong Feet</b> video - Contact the Des Moines Police Dept. – Kelly Drane – <a href="mailto:kddrane@dm.gov">kddrane@dm.gov</a></p>	<p><b>NAMI Family to Family</b> – Free when older teens involved in transition to adulthood <a href="http://www.nami.org/f2f">www.nami.org/f2f</a></p>
		<p>Youth Mental Health First Aid* <i>Coming soon</i></p>	<p>Youth Mental Health First Aid* <i>Coming soon</i></p>	<p>Youth Mental Health First Aid* <i>Coming soon</i></p>
		<p><b>Youth WRAP and Recovery</b> <a href="http://mentalhealthrecovery.com/store/product45.html">http://mentalhealthrecovery.com/store/product45.html</a></p>		

Please note: Foster families can receive CEU's for attendance at NAMI Basics classes and NAMI Family to Family.

\*The Youth Mental Health First Aid course is for adults and peers working or living with young people (12 – 25 years) with mental health challenges. Course participants learn about adolescent development, the signs and symptoms of the common and disabling mental health problems in young people, where and how to get help when a young person is developing a mental illness, what sort of help has been shown by research to be effective, and how to provide first aid in a crisis situation.

Resource which can be consulted: Child and Adolescent Center at the NAMI National Office

[http://www.nami.org/Template.cfm?Section=Child\\_and\\_Teen\\_Support&Template=/TaggedPage/TaggedPageDisplay.cfm&TPLID=72&ContentID=54313](http://www.nami.org/Template.cfm?Section=Child_and_Teen_Support&Template=/TaggedPage/TaggedPageDisplay.cfm&TPLID=72&ContentID=54313)

**Adolescent Mental Health Outreach** [www.outreacharts.com](http://www.outreacharts.com) – Emmy nominated, award winning films - Since 2001, we've created numerous acclaimed films focusing on **teen depression, substance abuse, bullying, dating & domestic violence, cutting/self-injury, problem gambling, eating disorders, steroid abuse** and **teen suicide**. Among our teen suicide awareness films, the '**Never Enough**' film series, created for Oregon's **RESPONSE program**, has proven to be a powerful educational tool and was designated a **Best Practice** in 2007 with a featured listing in the **Suicide Prevention Resource Center** and **American Foundation for Suicide Prevention's Best Practice Registry**. In addition, our 'Maple Ave' drama '**Promise Me**': **Parents With Addictions** was nominated for the **U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA)**, and **Center for Mental Health Services**, prestigious **2011 Voice Award**. In fact, OutreachArts is probably best known for its critically acclaimed television/video series, '**Maple Ave**' which focuses on the everyday issues/struggles of teens and their parents

