FOREWORD

by

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Now here is a book that fulfills the promise of its title, **COMPLETE** Handbook. I am sure that some potential buyers (and readers) might be discouraged, not just by the size and weight of the whole 700+ pages, but by the nit-picking detail of the subject matter. How many pediatricians have seen or would know what to do if they did see a child who was a non-reader and a schizophrenic? But at least with this book at hand they would be able to look up these rare, odd syndromes, conditions and combinations. Then the doctor would appear to be at least slightly knowledgable when referring a child to some local diagnostic citadel.

How about the teachers who are confronted daily with "challenges?" They have given the students their best shot and 80% learn to read, seem to enjoy learning and pay attention. But what about those 20% who just refuse to "fit in?" They simply **do not learn how to read.** Why? These teachers would find their non-learning students here in this handbook and might be more efficient at sending these problems off to the correct facility for help, or better yet, learn to teach the non-reader themselves.

How about parents who know their child is bright enough to learn to read? What's the matter with the school? They could scan the index until they found their child and then would go to the appropriate professional or clinic for a more definitive diagnosis and treatment plan.

How about the pediatrician, the general practitioner or the family practice doctor who is faced with a 7 year old who cannot read but looks okay - or at least average? Their numbers are legend: pale with circles under their eyes, hemoglobin test a low normal, a little maladroit, but all within normal limits. There is no clue in the examination that anything is wrong. What does the professional do? It would be best to read this book, or at least the first line of every paragraph to get the drift of Dr. Mosse's thrust: make an accurate diagnosis first. Doctors are supposed to know everything.

How about psychologists, psychiatrists, social workers and school counsellors who are overwhelmed with medical literature and biased by their own training? They assume that if the medical doctor has ruled out any physical problem, what is left is a clear cut neurosis or at least the reading difficulty has an emotional basis. These professionals can find something wrong with every family's dynamics. But do emotional or psychic imbalances explain reading disorders or are the children disturbed and show emotional symptoms **because** they cannot read? These professionals will feel comforted and supported by Dr. Mosse's book because she uses terms that they are familiar with. She is right; emotional overlay must be diagnosed and dealt with along

with any reading therapy. She did the most unique method of investigation of reading problems; she actually went into the classroom and watched the teacher teach and the children learn. Or not learn. Dr Mosse knows what she is writing about.

How about the reading therapist who knows that if the phonetic method had been used as the basic learn-to-read method, there would have been few if any referrals from the schools and his/her job would be in jeopardy? When the reading therapist uses phonetics, about 90% or more can learn. Why is the phonetic method used only as therapy for the older non-reader and not used in the primary learn-to-read situation?

Can you believe this book will help all these people? There is something in here for everyone. For some it may be more than they want to know. I was flattered because I could understand most of what Dr. Mosse wrote. She also included some of my cherished beliefs: (1) there is too much use of stimulant medication without an accurate diagnosis, (2) there is a lack of the use of phonetics as the basic method of learning to read, (3) not enough therapists, parents and teachers are aware that a good diet is a prerequisite for the ability to concentrate, and (4) there is a lack of a definitive diagnosis before treatment is begun.

The reader can find himself, his child, his patient and his pupil in this book, and its not difficult to do. She has given us some easy steps to find the answers. An adequate index of contents allows the parent/teacher/therapist to zero in on his particular interest, concern or problem.

I was delighted to find that Dr. Mosse recognizes that organic problems can appear clinically as if psychologically induced. And then there are normally appearing and acting children who just don't get it; they have great difficulty reading a word! So the teacher would be the first to recognize - but maybe not pinpoint the cause of the non-reading. But where have the parents been? Shouldn't they have figured out that their child's development was not even close to the average? And shouldn't their doctor have done more than say, "It's just a phase; he'll outgrow it." Dr. Mosse has provided clues all over these pages that fairly scream out to parents, teachers and doctors that something needs to be done for the child at risk.

Because she was an M.D. psychiatrist and had made her life goal the understanding, diagnosis and treatment of non-reading children, she emphasizes that a specific diagnosis should be made in each case. She felt that a clinic approach involving the parents, the pediatrician, the social worker, a psychologist, a psychiatrist, and a reading therapist would be the minimum professional staff to study the child but a neurologist, an ophthalmologist (I would look for a developmental optometrist) and perhaps an otologist should be consulted. An ombudsman would be essential for the execution of the recommendations of the staff.

How does the child learn? Is he auditory or visual? Is he kinesthetic or whatever? Is his cortex working? Where does one start? Dr. Mosse provides us with some steps to figure out the direction to take.

Don't let the weight and length of this book discourage you. Read the index

and the table of contents first. Then jump into some section that appears to be familiar and get used to Dr. Mosse's style. (You'll love what she has to say about comic books and television.) You'll have to admit that she makes a lot of sense. You will come to appreciate her insights and welcome her easy style that makes sense out of something as complicated as the way the brain works.

Happy hunting.

SECOND FOREWORD

by

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When Dr. Mosse's Complete Handbook of Children's Reading Disorders reached my desk this term, I was teaching a course in Learning Disabilities. Each chapter in Dr. Mosse's book had to be shared with my students and we found ourselves neglecting the assigned text in favor of the Handbook. Dr. Mosse tells it "true" and she tells it very well.

One of her most striking messages is that the large majority of our reading disabled children have been victimized by the sight word method and related curriculum practices. Never has this vital message been conveyed with more authority and experience.

According to the U.S. Department of Education (Wills, 1986) about 25% of high school students drop out before graduation and of those who do graduate over 30% are illiterate. Thus, we are apparently teaching only somewhat over one half of today's students to read. The statistics on writing and arithmetic are no more encouraging.

Dr. Mosse observed that "it will not be possible to stem the epidemic of reading disorders unless corrective measures are based on the clinical method" (p. 12). Her work is a comprehensive, readable, and practical presentation of the clinical method and the wide ranging body of knowledge on which it is based and to which it contributes.

In today's milieu of specialization and fragmentation, the breadth and integration of Dr. Mosse's experience and knowledge are strikingly welcome. In this work, professionals, students, parents and all practitioners can find useful and accurate information about every aspect of reading, writing and arithmetic disorders.

Dr. Mosse's description of a thorough clinical examination is a model of careful, wide-ranging thoughtful inquiry too seldom seen in practice. Dr. Mosse's approach is the antidote to narrow, limited diagnoses. Too often reading disorders are "diagnosed" only thru psycho-educational tests. Realistically, Dr. Mosse observes that not every single child with a reading disorder can be practically diagnosed by the total clinical method, but observes that the knowledge she and others have acquired through the method is reliable and valid. That knowledge base, derived from both research and clinical practice, is the focus of this book. After the in-depth diagnostic process is described, Dr. Mosse presents descriptive chapters on writing disorders and arithmetic disorders with an organic basis. She divides reading disorders into those with an organic, psychogenic, or a sociogenic basis. In this day of disputes among those who would label all learning disabilities due to one cause—whether inadequate teaching, minimal brain dysfunction, or heredity—her approach of recognizing all has the solid ring of truth and practicality.

Sociogenic reading disorders are far more numerous than psychogenic and organic in our society and others where damaging teaching philosophies and practices, mass media domination and violence are rampant.

Dr. Mosse indicts the sight word method, comic books and destructive television programming. She moves on from the problem to the solution and many readers will find inestimable value in the chapter on treatments. That chapter concludes on a positive note. "The prognosis for the treatment of all reading disorders is excellent. Only a small number of children with the severe organic type cannot be completely cured."

This book ought to be required reading and a constant reference source for every parent, teacher, clinician, therapist and administrator concerned with helping prevent and treat school failure. And perhaps most of all, it should be reading by every college professor who teaches others how to work with children who have disorders in reading, writing, or arithmetic.

My personal list of books I recommend to people who want to help children with learning disabilities has now grown to two: Suzanne Stevens' *Classroom Success for the Learning Disabled* and Hilde Mosse's *Complete Handbook of Children's Reading Disorders*.