REDESIGNING SYSTEMS OF CHILD DEVELOPMENT AND EDUCATION TO ENSURE SUCCESS FOR STUDENTS WITH LEARNING DIFFERENCES
A GUIDE FOR CITIES AND PROGRAMS

The Education Redesign Lab created the By All Means consortium to rethink education and child development systems in order to overcome widespread inequity in children’s outcomes, opportunities, and supports. This initiative revealed a need for specific guidance for cities on how to best incorporate the needs of students with learning and attention challenges in the design of system-wide reform and inspired the creation of this guide.

According to the National Center for Learning Disabilities (NCLD), one in five children have learning and attention issues1 with only a small portion of these children receiving formal diagnoses. Therefore, it is imperative to consider the unique needs of these individuals if we are to truly meet the needs of all students. The following serves as a guide for stakeholders involved in designing and implementing programs and services for children. The guide highlights four key areas of focus: constructing children’s cabinets or working groups, expanding learning opportunities, integrating social and emotional health services, and personalizing learning.

Children’s Cabinets/Working Groups

Ensure representation from the special education community – such as researchers, special education directors, practitioners, or advocacy group members – on Children’s Cabinets and working groups.

Build the needs of students with learning differences into design. Identify how the needs of students with learning differences will be addressed by new systems from the outset and throughout the design process.

Engage the community. Build community engagement into the plan, and ensure that students with learning and attention issues, their families, and advocates are included.

Incorporate students with learning differences explicitly into the accountability plan by disaggregating outcomes and opportunity data and using a range of measures.
Expanded Learning Opportunities

Coordinate care between in-school and out-of-school learning environments. Sharing student data and Individual Education Plans (IEPs) enables out-of-school learning programs to provide support students with learning differences. Having a school psychologist or special educator work in collaboration with out-of-school personnel to translate the needs of students into actionable steps is a key component of this process.

Provide out-of-school programming staff professional development opportunities for serving students with learning differences. Professional development surrounding programming tips, providing accommodations, and interpretation of data and IEPs provided by the schools can be critical in ensuring students with learning and attention differences care are served well in out-of-school programming.

Consider learning differences in applications for competitive programs. Some enrichment opportunities place competitive constraints on participation. Evaluate whether admissions criteria are equitable.

Partner with out-of-school learning organizations that focus on students with learning and attention differences. The most effective mentoring relationships are built when children or young adults are matched with someone they closely identify with. Therefore, having opportunities for students with learning and attention differences to develop a network, particularly focused on mentoring relationships, can be key to improving social and emotional outcomes.

Social and Emotional Health Services Integration

Create multi-disciplinary teams of support. Facilitating a multi-disciplinary care team from early childhood can improve early identification and interventions, and ensure fluid care throughout the lifespan for students with learning and attention differences. Care teams should consist of experts from schools, healthcare facilities, and social services.

Commit to interagency collaboration. Establish clear channels of communication between caregivers. When appropriate, data should be shared between school and healthcare professionals regarding identification and treatment of learning and attention differences. Informational resources should be made available throughout each sector.
Encourage health providers in your community to include screening for early signs of learning differences in their intake process. Healthcare professionals should collect a thorough history and flag potential risk factors in development and family history. Flagging and sharing information on early warning signs can be key in early identification and remediation resulting in better life outcomes for students.

Implement early warning systems to prevent dropout. Early warning systems, which monitor factors such as chronic absenteeism, poor academic performance, and behavioral incidents (e.g. suspension) can help to identify students at risk for dropping out.

Implement a Multi-Tiered Systems of Support (MTSS) framework to support struggling students. MTSS is a whole-child approach to serving the needs of students through an incremental or tiered structure of supports. MTSS utilizes continuous data monitoring to enable student growth and simultaneously provides support for teachers to implement evidence-based strategies.

Increase data sharing and communication with juvenile correctional centers. It is estimated that a third or more of incarcerated youth have a specific learning disability, with estimates even higher for students with ADHD. Schools and correctional centers should develop a streamlined process to transfer IEPs of incarcerated youth to ensure the continuity of schooling. Provide professional development for teachers and service providers to understand the transitions between schools and correctional facilities and how to best support these students.

Partner with local youth diversion programs. Diversion programs, meant to rehabilitate rather than incarcerate, can provide a supported environment for students to get the help that they need to avoid involvement with the law.

Integrate learning differences in school-centered social and emotional curricula. Social and emotional learning programs are especially beneficial for students with learning differences who are often challenged with poor self-concept, difficulty forming relationships, and increased risk of anxiety and depression. These social and emotional challenges contribute to higher dropout rates, absenteeism, and negative behaviors that lead to increased rates of disciplinary action. Special education providers can serve as advocates and assessors of the accessibility of social and emotional programs for students with learning and attention differences.
Personalized Learning

Design for students with special needs. Personalized learning can benefit students with learning differences, but it can also introduce new challenges. Consider the specific needs of students with learning differences in the design and implementation of personalized learning systems, and involve special educators, students, and their parents in the planning and implementation process.

Offer training opportunities for educators on fostering executive functioning skills. Strong executive functioning skills are particularly important for the success of students in personalized learning systems, and many students with learning and attention differences need support with executive functioning.

Leverage special educators as coaches during implementation. With many students with learning and attention differences in the general education classroom, it is especially critical to use special educators’ expertise when implementing facets of personalization for these students.

Invest in technology. Ensure technology used in the classroom is designed for all students’ needs. Consider technology designed with Universal Design for Learning in mind. Establish partnerships with technology developers and vendors that consider functionality for all students in their design.

Implement data-based progress monitoring systems. Personalized learning requires data-based progress monitoring to provide continuous feedback for practitioners to inform decision-making.

Reconsider protocols surrounding Individualized Education Plans (IEPs) based on learner profiles. Ensure that learner profiles are in sync with IEPs. Learner profiles can include: biographical information, challenges and strengths, interests, goals, and performance data. Incorporating strengths in IEPs and tailoring interventions to the interests of students may improve student motivation and performance. Require more frequent updates to learner profiles and use these learner profiles to assist in more frequent updates to IEPs.

Rethink graduation age requirements. If implementing self-paced learning, consider raising the maximum age limit for graduation, as some students may take longer to get a diploma.
1. *The State of Learning Disabilities: Understanding the 1 in 5* is a 2017 report from the National Center of Learning Disabilities (NCLD) that provides comprehensive data and a detailed landscape of challenges and opportunities for students with learning and attention issues.

2. *Eye to Eye National* is a mentoring and advocacy organization “run by and for people with ‘learning disabilities’ such as dyslexia and ADHD.” Eye to Eye offers a variety of services including their mentoring program, summer camp, and diplomats program. Establishing chapters depends on a partnership between a local university or high school and a neighboring middle school.

3. Given genetic and environmental risk factors, a well-designed and implemented intake form/interview can flag children early in development as potentially at risk for learning disabilities. Important information includes family history of learning disabilities, difficulties in school, mental illness, behavioral problems, substance abuse, or emotional disturbance in family members. Monitoring children for delays reaching developmental milestones, impaired vision or hearing, poverty, adverse perinatal events, and forms of trauma is also essential. Social and emotional factors such as poor self-concept, motivational challenges, and behavioral disturbances should also be monitored. Be sure to exclude medical problems as contributors to poor school performance. A primary role of the physician is to rule out medical causes for learning challenges at school including neurological impairments or sensory deficits.

4. Multi-Tiered Systems of Support (MTSS) frameworks include comprehensive monitoring and support systems for all students with tiered supports for struggling students. MTSS frameworks often include Response to Intervention (RTI) and Positive Behavioral Interventions and Supports (PBIS). Both are tiered, evidence-based intervention strategies, where RTI is focused on supporting students with learning and PBIS is focused on social, emotional, and behavioral supports.

5. Suggestions for personalized learning have been adapted from NCLD’s *Personalized Learning: Policy and Practice Recommendations for Meeting the Needs of Students with Disabilities*.

6. Executive function and self-regulation skills enable students to plan, organize, and manage multiple tasks at once. *Harvard University’s Center on the Developing Child offers curated resources* for learning more about executive functioning and how to implement strategies to grow these skills.

7. *Universal Design for Learning* is a set of education design tools that provide all individuals with equal opportunities to learn. *Center for Applied Specialized Technology (CAST)* provides professional learning opportunities and *free learning tools* to help facilitate implementation of Universal Design for Learning.

8. Learner profiles are dynamic snapshots of students that include their strengths, challenges, motivations, and goals. Constantly updated, learner profiles inform interactions between educators and students.

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