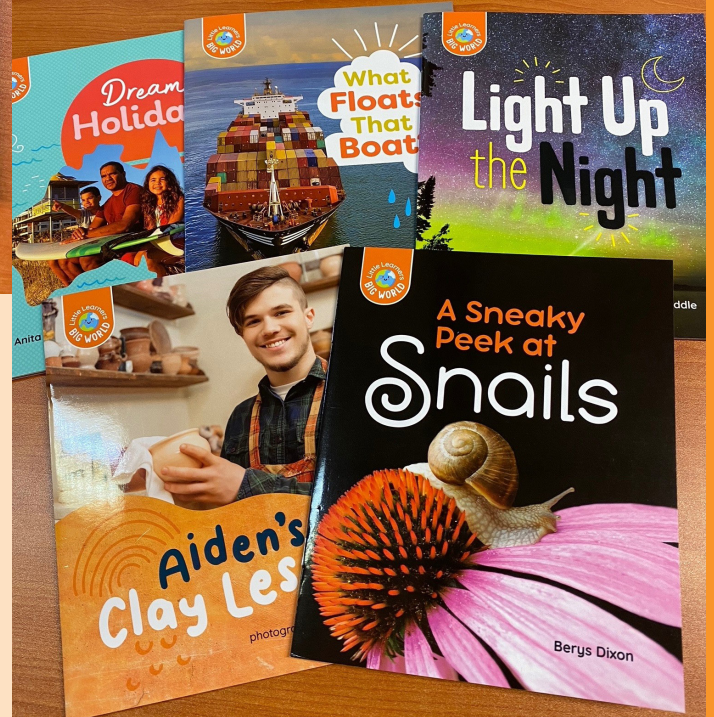


Speld NEWS QLD

Non
Fiction



Decodable
Readers



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New Speld Qld Assessment Locations!

DAYBORO, BENOWA AND BUNDABERG

To book in for a psychoeducational assessment at Dayboro or Bundaberg please complete the [assessment application form](#). Assessments at the Benowa clinic will be available from term 2.



New
Assessment
Locations!



What's so Important about 'Ph' Words?

As an Education Advisor, not a day goes by when I'm not discussing a 'ph' word with parents, teachers and colleagues – and for good reason – the 'ph' words I'm referring to are vital for reading success! The 'ph' words I'm referring to are; **Phonological awareness**, **phonemic awareness** and **phonics**. The words look similar, all beginning with phon, meaning sound. It's common to hear the



terms used interchangeably, not only due to their similar spelling, but also because they play a connected and equally important role in reading success.

There is no need to despair, **phew!** Understanding the differences as well as the connections is a great way to avoid confusion and can assist with identifying the support a

child may require to develop skills in each area.

PHONICS

Definition: The knowledge of letter/sounds and the ability to apply that knowledge when decoding unfamiliar printed words. If you are asking a child to read words and identify letters on a page, they are applying their phonics knowledge.

Developing phonics skills: Phonic skills need to be explicitly taught and schools often follow a structured, systematic phonics program.

Here is some [evidence-based examples](#).

STUDENTS WITH POOR PHONICS KNOWLEDGE MAY:

- Use the initial letters of a word to make a guess
- Mix up vowel letter/sounds eg, read lit for let)
- Exhibit slow, effortful decoding
- Add or omit sounds when attempting to decode

Although *phonics in action* is what we recognise as the 'act of reading', it's important



to recognise that without the other two 'ph' words, the process of applying letter sound knowledge to read printed words would be a struggle.

People often think that reading begins with learning to sound out letters. But most young kids are getting ready to read long before they understand that letters stand for sounds. They start by gaining a language skill called phonological awareness.

<https://www.understood.org/en/articles/phonological-awareness-what-it-is-and-how-it-works>

PHONOLOGICAL AWARENESS

Definition: Phonological awareness refers to **oral language** and is the understanding of the different ways that language can be divided into smaller parts and manipulated. Phonological awareness is made up of

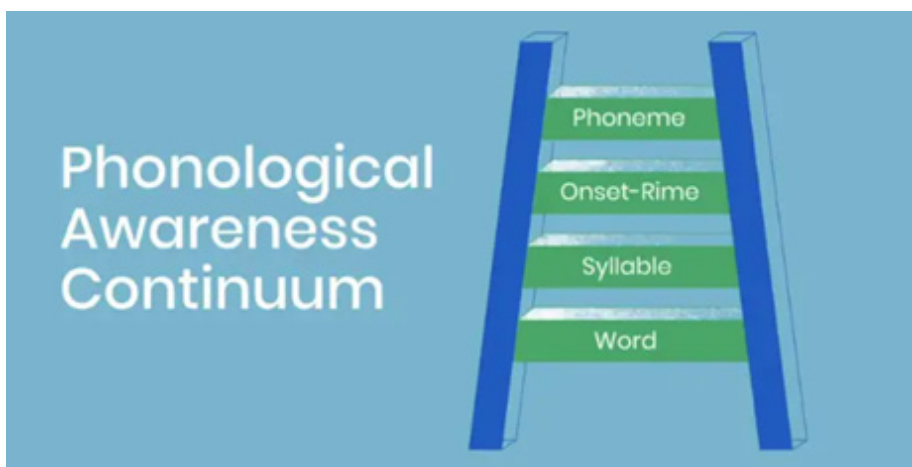
a group of subskills; beginning with word, syllable, onset/rime awareness, moving to the more complex subskills of basic and advanced phonemic awareness.

Phonological and Phonemic Awareness
<https://www.readingrockets.org/teaching/reading-basics/phonemic>

Examples of phonological awareness include; Identifying words that rhyme, counting the number of syllables in a word, recognising alliteration, segmenting a sentence into words and identifying the number of syllables in a word.

DEVELOPING PHONOLOGICAL AWARENESS:

- Read to your child
- Choose books that rhyme and repeat the same sound
- Draw your child's attention to rhyming words
- A gradual, systematic progression through a developmentally appropriate sequence of activities (Schools and Early Childhood Centres will sometimes utilise programs including Heggerty's to introduce and practise skills.)



- Use of modelling and application rather than explanations
- Use of concrete materials, including moving counters into boxes to represent syllables or sounds.

STUDENTS WITH POOR PHONOLOGICAL AWARENESS MAY:

- Have difficulty manipulating sounds
- Struggle to identify rhyming words
- Have difficulty identifying the number of syllables in words

PHONEMIC AWARENESS

Definition: Phonemic awareness is the ability to focus on and manipulate the **individual** sounds (phonemes) in spoken words. Phonemes are the smallest units comprising spoken language.

Although phonemic awareness is a subskill of phonological awareness, it's a vital component for reading acquisition. It's the most complex skill on the phonological awareness ladder. Students who are phonemically aware can hear the sounds in words as well as blend, segment and isolate the individual sounds in spoken words.

Explicit phonemic awareness instruction is important for students to understand that words are made up of individual sounds. Without this understanding, students develop the misconception that words are represented as whole units that need to be memorised.

DEVELOPING PHONEMIC AWARENESS SKILLS:

- Similar to phonological awareness, A gradual, systematic progression through a developmentally appropriate sequence of activities (use of programs including Heggerty's to introduce and practise skills.)
- Phoneme isolation – students hear and identify a sound at the beginning, middle or end of a word
- Blending – Students hear the spoken sounds then blend the sounds to make a word
- Segmenting – Students hear a whole word then break or segment the word into the individual sounds they hear.

Phonics builds upon a foundation of phonological awareness, specifically phonemic awareness. As students learn to read and spell, they develop their knowledge of the relationships between phonemes and graphemes in written language. As reading and spelling skills develop, focusing on phonemic awareness improves phonics knowledge, and focusing on phonics also improves phonemic awareness.

Phonological awareness: <https://www.education.vic.gov.au/school/teachers/teachingresources/discipline/english/literacy/readingviewing/Pages/litfocusphonological.aspx>



Now there's no need to panic when someone uses a 'ph' word in conversation!

REFERENCES

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Autism Spectrum Disorder in children

Speld Qld doesn't conduct assessments for Autism Spectrum Disorder and recommends contacting Autism Queensland for support - 07 3273 0000.

OVERVIEW

Autism spectrum disorder (ASD) is a developmental disorder that begins in early childhood and continues across the lifespan. Children with ASD demonstrate delays and differences across two main areas of functioning:

- interacting and communicating socially with others
- displaying behaviours or interests that are restricted, repetitive or fixated.

Some children with ASD display many of the signs across these two areas of difficulty, whereas others display only a few. As children with ASD grow older, the signs may change but the major areas of difference remain the same. In addition, about 65 per cent of children with ASD have an intellectual disability, and a small percentage demonstrate above average

intelligence. The needs of children with ASD therefore vary enormously; some require high levels of support, lifelong care and

supervision, while others grow up to be independent adults. Research suggests that ASD affects around 1 in 100 people. ASD is more commonly diagnosed in boys than in girls – at a rate of four to one, though research suggests girls may be under-diagnosed. ASD affects each child differently, but all children can be helped through appropriate intervention.

SYMPTOMS

Social interaction and communication

Social differences revolve around the give-and-take of normal social interactions, non-verbal social communication, and skills in developing, maintaining and understanding relationships.

Communication skills can vary greatly between children with ASD; some children may have little if any speech, while others may have well-developed language skills. However, those that do have language skills often find it difficult to communicate



effectively. They may say odd or inappropriate things, make blunt or impolite comments, talk about a specific topic for long periods of time with no awareness that others have lost interest, or say things that are not relevant to the current conversation.

Differences with non-verbal communication include difficulty in making and maintaining eye contact, and understanding non-verbal communication of others such as facial expressions and hand gestures such as pointing.

Some people with ASD seem quite aloof or detached from others, but this is not the case for all people with ASD, with some being quite affectionate and fond of company. People with ASD do often tune out when others are talking to them, or appear not to listen, especially when the conversation does not involve their favourite topic of interest.

Behaviour and interests

People with ASD can have a very narrow or unusual set of interests, or they may play in a repetitive way. They may know everything about a certain topic and talk about it constantly, want to watch the same television show over and over, or focus their play on a single toy.

They often show limited imaginative play, but may use toys and other objects in unusual ways, such as lining up objects, focusing on the

spin on the wheel of a toy car, or watching the light shine off various things. Some children with ASD engage in unusual behaviours, such as hand-flapping or rocking, which is usually a sign of excitement or agitation. Many experience difficulties coping with change, but do better when they are prepared ahead of time for changes in routine.

CAUSES

There is unlikely to be a single cause of ASD, and it is likely that environmental, biological and genetic factors may play a role. ASD is more common in people with intellectual disability, Fragile X syndrome, Down's syndrome and other developmental disorders.

ASSESSMENT

Assessment of ASD is typically conducted by a multidisciplinary team of allied health professionals. This team usually includes a paediatrician or child psychiatrist, a psychologist, and a speech pathologist. Sometimes other professionals, such as an occupational therapist or audiologist might also be involved. Usually your GP would make the referral to a paediatrician or child psychiatrist. If the paediatrician or child psychiatrist believes your child may have ASD, they may then refer your child



to a psychologist and any other health professionals for additional assessment, diagnosis, and intervention. Parents, family, and other carers play an important role in the assessment and treatment of a child. As part of the assessment, the psychologist asks the parent about the child's development, their strengths and difficulties, and their behaviour. The assessment often involves obtaining background information such as family history, as well as current information. The psychologist is likely to observe your child in different settings such as at home, at preschool or school, or in childcare to better understand their behaviour and how they interact with others. The psychologist may also conduct assessments of your child's learning, language and communication, and various day-to-day skills typical of children their age.

TREATMENT

Research shows that treatments focusing on changing behaviour and improving skills produce the best results for children with ASD. These approaches address multiple problems common to ASD such as delays and differences in language, social skills, communication, cognitive functioning and play. Most interventions focus on increasing desirable behaviours

and decreasing undesirable behaviours, and improving social behaviours, communication, play skills, coping skills and connection with others. In each of these approaches, parents and carers have a central role in intervention. If your child receives intervention, you would be involved in therapy sessions to learn ways of practising skills at home with your child. Psychologists and other health professionals in your team can also work with your child's educators to develop consistent ways of supporting learning and behaviour at home, preschool or school. As early intervention leads to better long-term outcomes, it is important to seek help early and follow up on recommendations made by the health professionals in your team.

TIPS FOR SUPPORTING CHILDREN WITH ASD

Use your child's strengths

Many children with ASD have a range of strengths. Some children with ASD may be particularly skilled at music, maths or another activity, or they may have a lot of knowledge around a particular area of interest. Try to harness these skills to motivate and stimulate your child's learning and communication by showing



interest in their activities and to foster interaction and communication.

Use your child's special interests to increase motivation in other areas

Children with ASD can have a small number of intense interests and seem quite unmotivated to engage in other important activities. Rather than focusing on diverting your child's attention from these specific areas of interest, see if they can be used as a springboard for strengthening your engagement with your child, for expanding your child's interests and increasing your child's motivation for other activities.

- Share their interests: Play alongside your child, following their lead in their play. Talk about your play and make observations about what your child is doing, and what you are doing. Your observations will help your child make connections over time between their perspective and yours. Playing alongside your child can also help them learn to take turns and to experience shared delight.
- Gradually include minor variations in the play to help expand your child's imagination and tolerance for minor changes. Introduce changes that are not too far from your child's original idea and which make sense around the theme of your child's play. For example, your child may enjoy the sensory

experience of throwing objects in the air and watching them fall back down. You might join this play by bringing a range of safe objects such as soft balls, feathers, and balloons and noting your child's reaction to this expanding play.

- Incorporate their special interest, toy or game into other activities. For example, a child may have a particular interest in Thomas the Tank Engine. The characters from these stories can be used to help your child engage in counting activities, learning colours, and even social stories where the characters are used to act out certain social interactions. Your child's desire to engage in these activities may also help them finish off less enjoyable tasks, so as to move on to their preferred activity.

Use visual aids and reminders

Children with ASD are often helped to understand routines and activities with visual timetables and visual reminders of the steps to complete tasks. For example:

- Create activity boards or step-by-step reminders for activities or routines that your child needs help with, such as making lunch or packing their school bag.
- Create reminders and step-by-step guides using written words for children able to read, or using photos or pictures to describe steps.



Prepare your child for changes

Changes to daily routines can be difficult for children with ASD, so where possible, prepare your child for any changes. This might include changing teachers when teachers are away, or changes to daily routines that can happen from time to time.

Involve your child in social activities

Being involved in social activities can help your child learn social and play skills from other children and adults. There are a range of programs you can consider, from social skills groups specifically developed for children with ASD, to social- and activity-based groups such as Scouts and Guides. Your council may have information about group activities in your local area.

SEEKING HELP

If you are concerned about your child's development a psychologist may be able to help. Psychologists are highly trained and qualified professionals, skilled in diagnosing and treating a range of developmental issues, including ASD. A psychologist can help you as a parent to develop your child's social and communication skills. Psychologists sometimes offer group programs for children with developmental disorders to help them socialise and develop skills together. If your child is referred to a

psychologist by your GP, you might be able to get a Medicare rebate. You may also be able to receive psychology services via telehealth so you don't need to travel to see a psychologist. Ask your psychologist or GP for details. There are number of ways to access a psychologist. You can:

- use the Australia-wide Find A Psychologist directory, visit findapsychologist.org.au or call 1800 333 497
- ask your GP or another health professional to refer you.

GETTING A MEDICAL CHECK-UP

A medical check-up is also important to assess other aspects of your child's development. First talk to your GP and speak with them about whether a referral to a paediatrician might be a useful next step.

FURTHER INFORMATION

[Healthdirect](#)

[Raising Children Network](#)

[Positive Partnerships](#)

This article has been sourced from [The Australian Psychological Society](#).



Academic Achievement Assessments

WHAT IS AN ACADEMIC ACHIEVEMENT ASSESSMENT?

An academic achievement assessment measures how an individual is performing in areas of academic schoolwork. Academic achievement assessments provide information regarding performance across common school subjects like reading, math, written expression, and oral language.

An academic achievement assessment, used



in isolation, does not provide information regarding a student's cognitive ability, as well as things like creativity and critical thinking skills. Commonly used academic achievement assessments are the Wechsler Individual Achievement Test – Third Edition (WIAT-III), the Woodcock-Johnson IV Australasian Adaptation Tests of Achievement (WJ ACH),

the Wide Range Achievement Test (WRAT), and the Kaufman Test of Educational Achievement (KTEA). These assessments are standardised, though not all academic achievement assessments are (generally depends on the purpose of the assessment).

WHAT IS A STANDARDISED ASSESSMENT?

A standardised assessment is any form of assessment that requires all respondents to answer the same questions, in the same way, and that is scored in a 'standard' or consistent manner, which makes it possible to compare the relative performance of individual students or groups of students. Standardised assessments are generally considered to be a fair and objective method of assessing the academic achievement of students, mainly because the standardised format, coupled with computerised scoring, reduces the potential for favouritism, bias, or subjective evaluations.

WHY USE ACADEMIC ACHIEVEMENT ASSESSMENTS?

Results of Academic Achievement Assessments can be used to:



- Identify the academic strengths and weaknesses of a student.
- Inform decisions regarding eligibility for educational services, educational placement, or used in combination with cognitive ability assessments to identify specific learning disorders.
- Design instructional objectives and plan interventions.



THE LIMITATIONS OF ACADEMIC ACHIEVEMENT ASSESSMENTS

Performance on any academic achievement assessment can be influenced by a range of factors including motivation, attention, interests, and physical health on the day of assessment. Results represent a snapshot of the student's current functioning, and their scores may be slightly higher or lower if they were tested again on a different day. Furthermore, the results from an academic

achievement assessment only form one part of what will determine a student's future success, and do not capture other important factors.

ATTENTION DIFFICULTIES AND ACADEMIC ACHIEVEMENT ASSESSMENTS

A child's ability to focus and concentrate when undergoing an academic achievement assessment will impact on their results to different degrees, depending on a number of factors, including the length of the assessment, the time of day the assessment occurs, the number of breaks etc. Psychologists and other professionals conducting the assessments will endeavour to limit the impacts as much as possible, and will also include observations regarding a student's attention and concentration levels throughout the assessment. On occasion, the results of the assessment may need to be interpreted with caution. It is also important to note, though, that a standard testing environment (i.e., quiet room with few distractions, one-on-one setting) is likely to provide fewer distractions than a classroom environment with approximately 20 other children. Therefore, any difficulties experienced by the student, in terms of focus and attention, are likely to be at least as significant if not more significant day to



day in their learning environment.



In conclusion, standardised academic achievement assessments provide valuable information for parents and schools to identify the best ways to assist and support students in their learning. Like any standardised assessment, it is important to remember the results are only 'one piece of the puzzle' for each student, who has their own unique contributions to make based on their individual strengths and interests.

REFERENCES

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Getting the Most out of Nonfiction Reading Time

Reading together remains one of the most important things adults can do with their young learner. Today, recommendations include reading information or nonfiction books with much more regularity. Nonfiction books present many opportunities to learn new concepts and vocabulary, as well as broaden a student's view of the world. Nonfiction books are written differently than picture books in that there are often more pictures, graphics, charts and photographs included within the pages. Parents can ease the transition into more nonfiction reading by encouraging your child to preview a book before reading and to be an active reader who asks lots of questions.

TAKE A "BOOK WALK"

One great way to make predictions about an unfamiliar nonfiction text is to take a "walk" through the book before reading. By looking closely together at the front and back cover, the index, table of contents, the glossary, and the photographs or other images, readers can start to get a

sense about the topic. This scanning and skimming helps set the expectation for the reading. Take the time to walk through the book before starting to read.

ENCOURAGE QUESTIONS

A second way to develop more understanding with nonfiction books is to encourage your child to be an active reader who asks lots of questions. Parents can model these behaviors by talking or thinking out loud as you turn the pages of the book. This is a helpful way for your child to see and hear what a successful reader



does when faced with difficult or unfamiliar topics.

For example, “When I looked at this photograph, I asked myself, “Where is Antarctica? Is that the same place as the South Pole?” Then talk together about how and what you would need to do to find the answer to the questions. This will reinforce that many questions can be answered by reading a text closely and by paying attention to captions and picture titles. Some children enjoy writing their questions on sticky notes and working to answer them during the reading.

Previewing a text and asking questions are two terrific ways to navigate nonfiction texts. Enjoy spending more time with some fascinating informational books!

This article has been sourced from [Reading Rockets](#).

New Speld Qld Nonfiction Library Resources!



Fact File: Countries (10 x books – South Africa, Peru, Iceland, Japan, Greece, Cook Islands, Turkey, Togo, Spain, Mexico)

Fact File: Animals (10 x books – Wolves, Mice, Slugs and Snails, Seals, Crows, Earthworms, Jellyfish, Owls, Ants, Kangaroos).

Please email the library if you would like to borrow or reserve any of these items: library@speld.org.au





Upcoming Workshops 2023

**21
Mar**

[Dyslexia](#)

Presented by Judy Hornigold

Time: 6:30 - 8:30pm

**05
Jun**

[Implementing PLD in the Middle and Upper Primary](#)

Presented by Diana Rigg

Time: 9:00am - 3:00pm

**06
Jun**

[Implementing PLD in the Junior Primary](#)

Presented by Diana Rigg

Time: 9:00am - 3:00pm

**20
Jun**

[Sounds Write Face-to-Face Brisbane](#)

Presented by Kylie Eckermann

Time: 9:00am - 3:30pm (4 days)

**04
Jul**

[Sounds Write Face-to-Face Brisbane](#)

Presented by Kylie Power

Time: 9:00am - 3:30pm (4 days)



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learning differences