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Support for students with spelling disorders in Poland, in students' and parents' perception

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Abstract

The aim of the study was to analyze how students with spelling disorders use the therapeutic systems offered in Poland, in opinions of themselves and their parents. Two questionnaires were developed, one for parents and one for children with spelling disorder. 621 parents and their 621 children with that disorder participated in the study (online reviews). Almost a half of the group attended therapeutic sessions at their schools and half of them had sessions at psychological-pedagogical counseling centers or other public or private education institutions (typically once a week). Almost half of the group trained their spelling abilities at home with different exercise books with spelling and also reading exercises (twice a week). Only 35 persons had any forms of therapy at all. Available therapeutic methods are not enough effective, interesting, attractive for their users and don't motivate to work. 84% of study participants need new therapeutic methods.

Keywords: Spelling disorder, therapy, home practice.

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1. Introduction

1.1. Importance of research into developmental dysorthography

Developmental dysorthography, understood as specific difficulties in learning proper spelling, is a developmental disorder as a result of which the child is included into the group of people with special educational needs (Pietras, 2008; Krasowicz-Kupis et al., 2015). The phenomenon of spelling disorders is important from the social perspective due to its high prevalence in a population. It is estimated that in Poland, spelling disorders in combination with symptoms of dyslexia are found in approx. 15% of the population of children and adolescents (Bogdanowicz, 2012).

Spelling disorder is also an important phenomenon from the personal point of view. It directly impacts educational career of the affected individuals and depending on the type and intensity of the deficits and on the previously applied coping strategies and their results, spelling disorder may modify adaptation process resulting from the expression of developmental needs (Arnold et al., 2005; Bogdanowicz, 2012; Talik, Krol, 2014; Brzezinska et al., 2014).

1.2. System of therapeutic support for students with spelling disorders in Poland

Students with special educational needs are entitled to diagnosis and therapy and to adjustment of forms and methods of education as well as requirements to their level (Bogdanowicz et al., 2008). This is specified by regulations of the Minister of National Education, which define legal basis and obligation to provide specialist support and to organize various forms of therapy matching students' needs, both at school and in other institutions such as psychological and educational counselling centres.

Bogdanowicz and colleagues (2008) designed a model system of therapeutic support for children with specific learning disabilities, including spelling disorder, comprising five levels of treatment, depending on the child's needs.

1/ Level one involves support provided to the child by his/her parents, supervised and monitored by a teacher. This relates to children with mild learning problems. After a child receives an evaluation report from a psychological and educational counselling centre, a teacher based on its content suggests to the parents methods of working with and managing the child, with the use of educational and therapeutic methods and aids available in the market.

2/ Level two comprises support provided in the framework of corrective and compensatory classes. This form is designed for children with more serious writing difficulties. The classes can take place at school or at a psychological and educational counselling centre, and they are conducted by a teacher, psychologist or educationist with specialist training. The classes should be supplemented with work performed at home, under parental supervision.

3/ Level three involves individual therapy conducted at a psychological and educational counselling centre or at school. It should be administered to children who require tailored and comprehensive therapeutic support.

4/ Level four comprises therapeutic classes and schools, implementing specially designed educational and teaching programs including therapeutic activities

5/ Level five involves comprehensive therapy treatment provided to a child within an inpatient therapy facility. The duration of such inpatient treatment should range from a few months to one year. Facilities of this type should provide support to children with most severe and numerous co-occurring impairments. In practice this form of support is not available in Polish system of education (Bogdanowicz et al., 2008).

In accordance with the currently operating support system each student with special educational needs, including developmental dysorthography, should receive free-of-charge therapy in the framework of the educational system. Support is offered by schools and psychological and educational

counselling centres during educational therapy, conducted by specialists, and organized for groups, or less often, for individual students. In the market of therapeutic aids to be used by students on their own for practice there is a wide range of "paper and pencil" materials such as workbooks; there are therapeutic programs, applications available for use via electronic devices, websites offering exercises specially designed for various therapeutic needs.

Yet, participation in therapy is voluntary rather than obligatory. No research has yet investigated the way students with spelling disorders benefit from the system of therapeutic support on offer in Poland.

2. Purpose

The study was designed to collect data showing in what way children and teenagers with difficulties in learning accurate spelling take advantage of the forms of therapy dedicated to this group of students and available in our country. We wanted to find out what institutions provide children and their parents with support in this process, whether students work on their problem at home, and if so, how they do it, how often they do such exercises and, finally, what the students and parents think about their effectiveness. It was also important for us to find out about the students' attitudes to their own spelling difficulties. The purpose was to verify to what extent problems related to spelling accuracy were perceived by them as a significant obstacle to their success at school.

3. Research Method and Study Group

The study was carried out using specially designed survey dedicated to parents and their children with spelling disorders. The questionnaire was adjusted to be used in a form of an online survey. The questionnaire was filled in as a part of Opinion Detector poll. It comprised 46 questions for parents and 16 questions for their children. After completing their part of the survey the parents asked their children to fill in their part as well. This way they gave their consent to their children's participation in the study. The research was conducted from April to June 2016, and involved 621 parents and 621 children with difficulties in learning accurate spelling; the respondents were from all over Poland.

The participants included 422 mothers (68%) and 199 fathers (32%). The parents' age ranged from 24 to 56 years [mean age 38.7 (SD=6.65)]. The largest group of parents was in the age group from 35 to 44 years, 49.4%; parents aged 25-34 constituted 30.6% of the study group, those aged 45 - 54 accounted for 18.7%. The oldest and the youngest parents jointly accounted for only 1.3% of the group.

The subjects represented all living environments. The lowest number of subjects, i.e. 9.5% lived in a small town; those living in rural areas accounted for 19.6%, in medium size towns 28.3%, in big town 22.2%, and large city 20.3% of the study group.

The participating parents represented all levels of education. Parents with primary education accounted for 1.9% of the subjects, those with elementary vocational/ middle-level education constituted 11.6%, secondary 29.5%, post-secondary 13.2%, incomplete higher, i.e. bachelor degree 12.9% and completed higher education 30.9% of the study group.

Children with spelling difficulties participating in the study included 226 girls (36.4%) and 395 boys (63.6%) aged from 6 to 19 years. Majority of the participating children were primary school students (70.5%), students of middle schools accounted for 20.6%, secondary general education 5.8% and secondary technical education 3.1% of the subjects.

3. Results

The data collected during the study were analysed from the viewpoint of the following thematic areas: 1/ issues related to characteristics of symptoms raising concern in parents and teachers, 2/

currently used forms and methods of therapy, 3/ subjective assessment of the applied methods of coping with the difficulties in terms of their effectiveness.

3.1. Symptoms of spelling disorders occurring in the students

Writing difficulties experienced by the examined children included spelling errors made by 419 students (67.5%), problems with transcription of spoken information and spelling errors such as swapping letters, skipping letters, distorting words in 335 children (53.9%), problems with copying from blackboard, and errors such as swapping letters, skipping letters, distorting words in 296 subjects (47.7%), slow pace of writing in 282 children (45.4%), problems remembering shapes of letters in 149 subjects (24%). 344 subjects (55.4%) had co-occurring reading difficulties.

The children assess the current intensity of their writing difficulties as average (59.3%) and high (19.5%).

In response to the question related to negative impact of writing difficulties on successful learning at school, majority of children and teenagers said it was difficult to say (40.4%), and 34.5% of the subjects thought the problem had rather negative influence.

Qualitative analysis of effects experienced by the students because of spelling difficulties made it possible to distinguish some of them. 59.7% of the students believe that due to the spelling problems they get poorer grades in Polish; 30% think they get poorer grades in foreign languages; 25.8% get poorer grades in subjects different than English or foreign languages; 12.7% blame writing difficulties for poorer relations with their classmates and peers; and 26.9% feel inferior to their classmates and peers, while 17.1% face various problems in daily life. 23.7% believe that because their spelling disorder has been confirmed with psychological and educational evaluation report, they are privileged at school and things are easier for them. These are examples of what the students said about the effects of the disorder in their lives:

"I have a fear of writing; I feel embarrassed when I write something official; My hand hurts when I write; I feel a lack of acceptance from my peers; I feel a lack of self confidence; I feel Isolated; Lack of rewards because of grades; Sometimes It is difficult to read my own writing; Tests, quizes and exams are difficult for me; Sometimes my friends, classmates laugh at me; Sometimes due to mistakes I'm not taken seriously; Sometimes I forget to type letters in an sms; Often I make mistakes and later cross them out in the notebook and it looks unsightly; Sometimes I have to think of the correct spelling of a word; I feel stressed because I can't write anything properly; I feel different from others; I feel inferior; I feel worse, Inadequate; It takes me a long time to write something; Children bug me; I'm stressed because of that; I'm less popular; Parents and teachers are angry on me; I have less time for fun; I can't write properly any homework"

505 parents (81.3%), immediately after noticing the difficulties, initiated remedial measures. 354 individuals (57%) visited a psychological and educational counselling centre, 319 individuals (51.4%) started additional practice at home, 289 individuals (46.5%) consulted the school educationist in connection with the child's problems, and in 38 cases (6.1%) a tutor was hired. Parents were describing different forms of practicing at home, for example: "We write dictations twice a week"; "my son attends speed reading course", "we often practice spelling rules in Polish language".

According to the parents the institutions which provided help in connection with their child's spelling difficulties included: a psychological and educational counselling centre in 422 cases (68.0%), school (educationist, psychologist, teacher) in 363 cases (58.5%), a foundation in 20 cases (3.2%), an association in 23 cases (3.7%) and other entities in 20 cases (3.2%).

3.2. Currently used forms and methods of therapy

Educational therapy in Poland is free of charge, and indeed parents generally to not incur any expenditures due to their children's school problems related to spelling difficulties. Only 150 subjects

(24.2%) reported such expenditures. The average amount of money parents spend monthly shows Fig. 1.



Figure 1. The average amount of money parents spend monthly on their children because of their

spelling problems

Analysis of therapies which have been administered to the children from the time of formal diagnosis shows that Polish students take advantage of all available forms of support. Therapy classes at school are attended by 303 children (48.8%), and therapy classes at psychological and educational counselling centres by 229 children (36.9%). 116 (18.7%) children attend therapy classes in both the counselling centre and at school at the same time, and neither of these two basic therapies are attended by 205 children (33%). Therapeutic activities organized by entities other than psychological and educational counselling centres (most frequently private companies providing psychological and educational services) are attended by 91 children (14.7%). As for their own work aimed at improving spelling skills performed at home, practice with the use of Ortograffiti workbooks (it is the most popular therapeutic system in the field of spelling problems in Poland) was reported by 287 children (46.2%), dictations and practice of spelling rules by 249 (40.1%), use of computer programs with spelling exercises by 192 (30.9%), and other forms of therapy by10 subjects (1.6%). 35 children (5.6%) participated in no form of therapy. Large group of children admitted they participated in more than one form of therapy at the same time: two different forms were reported by 25.9%, three forms by 22.4 %, four out of the listed forms by 11.6% and five or more by 4.5% of the surveyed students.

Analysis related to the availability of therapies for children living in villages and towns differing in size focused on participation in two principal types of therapy classes, at school and in psychological and educational counselling centres. It was determined that there was no relationship between the place of residence and participation in two, one or neither form of therapy F $_{(4; 616)}$ = 0, 355, p=0.841. It was also investigated whether the parents' education was a significant variable for the children's participation in the therapy at school and in psychological and educational counselling centre. The findings showed that this variable was of little consequence, either; F_(5;615)=1,373 p=0.233. The final variable assessed for the relationship with participation in therapy classes was the current level of education. The following three categories were considered: I - primary school, grade 1, 2, and 3; II – primary school, grade 4, 5 and 6; III – middle and secondary schools. Like in the previous analyses, current level of educational did not affect participation in two types of therapy at school and in psychological and educational counselling centre, or participation in therapy at one of these place, or participation in no therapy; F_(2;618)=0,650 p=0,523).

Given the fact that parents provide support to their children in the process of continued specialist practice performed at home, it is advisable that they are aware of the progress and familiar with the methods used during these activities. The findings show that 134 parents (44.2%) of the children attending therapy at school, and 123 parents (53.7%) of the students participating in therapy provided by psychological and educational counselling centres showed interest in the specific methods, tools or aids applied during their children's therapy. As for the children receiving therapy in a different facility than psychological and educational counselling centre, the methods applied to their children were known to 57 parents (62.6%).

Another question relates to the frequency with which therapy classes are attended. Figure 2 below shows how often children participated in various forms of therapy, both at home and in any therapy providing institutions.



Figure 2. Frequency of using various forms of therapy

Parents also estimated the time devoted by their children to practice at home. As we can see in Figure 3, the largest percentage of students spend from half an hour to one hour practising at home.



Figure 3. Time devoted by children to practice at home, relative to the form of work

The survey also asked the students to assess how systematic they were in their work aimed at improvement in spelling skills. As illustrated by Fig. 4, regardless of the type of practice, their self-assessment shows average regularity of practice.



Figure 4. The students' systematic approach to practice at home

4. Discussion

The present study was designed to acquire information showing to what extent children and teenagers with spelling disorders take advantage of the available forms of therapy dedicated to this group of students. This is because in Poland we have legal regulations ensuring access to professional therapy and an implemented system of support for students with special educational needs. Yet, there are no empirical data showing whether students affected with developmental disorders take advantage of the opportunities offered by the educational system. No therapy classes are obligatory and students can only be advised to take additional effort to eliminate the difficulties (Bogdanowicz et al., 2008). This means that to a degree requirements posed to students with dysfunctions should be increased. Otherwise, their difficulties will become more pronounced, and as a consequence they will

significantly reduce child's ability to succeed in the process of further education and in adulthood (Bogdanowicz et al., 2008).

The present findings show that students with spelling disorders indeed do take such effort and nearly all of them use selected available forms of therapy on offer from the institutions appointed with this task, i.e. schools and psychological and educational counselling centres, or by working on their own at home, under parental supervision. Less than 6% of the students do not participate in any form of therapy; this low number should be recognised as a very positive fact. These findings contradict widely publicised opinions claiming that although students with spelling disorders can obtain any support they need, in practice this support is provided rarely and it is incomplete (Bogdanowicz et al., 2008).

The children and teenagers participating in the survey do not feel serious effects of their writing difficulties. They mainly report poorer grades in Polish, one in three students links his problems to poorer grades in foreign languages, and one in four in other subjects. One in four subjects feels inferior to their classmates. Slightly less than 25% think that psychological and educational evaluation report related to spelling difficulties means certain privileges and makes things easier. This finding is surprising because evaluation report from psychological and educational counselling centre certifying specific learning difficulties, including dysorthography, should give equal opportunities to all affected students by defining certain advantages for the time of tests and external exams (Bogdanowicz et al., 2008). The acquired data, however, suggest that this type of support is not fully effective or is not appreciated in subjective opinion of children and teenagers. This result is also puzzling because it is widely believed that people with dyslexia, and in particular with spelling disorders, use psychological and educational report to justify their poor motivation for learning or to ignore their school responsibilities and poor grades (Chodyna-Santus, 2014).

Importantly, the present findings show there are no differences in how often numerous forms of therapy are used, including those on offer at school and in psychological and educational counselling centres, by groups of students at various levels of education, coming from villages and towns of various sizes, and from families with different educational background. This proves that differences in access to therapies between social groups in Poland are disappearing.

A notable fact is parents' involvement in providing support for their children. Over 80% of the parents took some action regarding their children immediately after identifying the problem, and half of the parents constantly show interest in what methods are used during therapy of their children.

Another important aspect of therapy, which largely determines its effectiveness, is the systematic approach to work. Institutional therapy most often is conducted once a week, which results from logistic capacities of schools and counselling centres. On the other hand practice at home is performed more often. Dictation, practice in the knowledge of spelling rules and computer exercises are performed by the largest group of the subjects two-three times a week or even every day. Therefore it seems advisable to introduce a wider assortment of exercises which can be done by students on their own, at home.

Yet, systematic approach to the practice performed at home seems insufficient. In their selfassessment the students most often pointed to average-level regularity, which suggests it is necessary for focus greater attention on this problem. As it has been shown by research this aspect is of key importance for effectiveness of therapy (Ise, Schulte-Korne, 2010; Skibska, 2012; Leszczynski, 2008; Bogdanowicz, 2012).

5. Conclusions

Polish students with spelling disorders generally use various forms of therapy offered by the system of education, in institutions appointed with the task, i.e. schools and psychological and educational counselling centres and by performing therapeutic exercises designed for use at home. This takes place regardless of the social environment in which the child lives. In most cases children and

teenagers with spelling disorders do not treat psychological and educational evaluation report as a way the make their life at school easier. Parents are involved in providing support for their children, irrespective of their own educational background. The problem which requires additional attention is the students' systematic approach to work at home.

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