

Dear Senator Hass,

I am writing to you to thank you for your co-sponsorship of dyslexia legislation that has just been introduced as Senate Bill 612.

I am the parent of two dyslexic children who have very different stories. My older daughter Lillian struggled through kindergarten and first grade grasping the beginning skills required to learn to read. She had difficulty recognizing letters and applying the correct sound to them, her spelling was rudimentary, and her handwriting was (and still is) illegible. Even though these are warning signs for dyslexia, her teachers encouraged us to "wait and see", telling me that it was "too early" to screen for dyslexia, and that my daughter was "too smart" to be dyslexic. In fact, kindergartners can be screened for dyslexia with 92% accuracy, and dyslexia has nothing to do with intelligence.

As she progressed into first and second grade, we continued to raise our concerns for dyslexia with her teachers, until one was finally honest enough to tell me that my daughter had not "fallen far enough behind" to qualify for any kind of testing or intervention through the school system, and that it could be years before she did, because she is very smart and had learned little tricks to compensate for her disability. We waited on a waiting list for 5 months and paid \$1200 to have her privately evaluated by a licensed clinical psychologist. Although she was in the spring of her second grade year, she tested at beginning first grade reading level, and all of her diagnostic tests were consistent with dyslexia.

At this time, teachers do not receive any training during their degree certification regarding dyslexia, and are not educated about how to identify and intervene. This is truly outrageous when one considers that almost 20% of kids sitting in elementary school classes right now are dyslexic. Private remediation for dyslexia can cost between \$20,000-\$30,000 per child, which also makes this an issue of equality. If you are a dyslexic kid whose parents can afford to go outside the school system for evaluation and research-based Orton-Gillingham tutoring, you will learn to read and succeed. If not, you will receive minimal intervention from a teacher who has not received any training with regard to this very common learning disability.

My daughter worked very hard at her tutoring during the summer after her evaluation to close the gap and maintain her reading at grade level, and since then has spent over 400 hours receiving Orton-Gillingham style tutoring in addition to her regular homework assignments to complete the entire course. My proudest moments are when I catch her snuggled in her bed, reading just for fun, and I wish that I could go back in time to erase those 2 years of daily homework struggles that left her feeling stupid and unable to relate to her peers.

Dyslexia has a very strong genetic component. If you have a dyslexic first degree relative, you have an almost 50% chance of being dyslexic yourself. At the time of Lillian's evaluation, my younger son Nate was 5 1/2 years old, and getting ready to enter kindergarten in the fall. We knew he was at risk for dyslexia, and considered his warning signs: late speech development (he didn't say his first word until he was 2 1/2), he often mixed up syllables within a word, and had a hard time with the concept of rhyme. We decided to start Orton-Gillingham tutoring with him at the same time we started our daughter, and he has learned to read solely through this method. We had him privately evaluated a few months ago, at the beginning of his first grade year, and he tested at a mid-second grade reading level, a year and a half *above* grade level.

My son Nate is a rarity - a dyslexic who reads above grade level and who has no idea what it feels like to be behind, to struggle, to be ashamed. There is no reason why all dyslexic kids can't be like my son: identified early and supplied with appropriate, research-based intervention *before* they fall behind.

Thank you for your time and recognition of the seriousness of this issue. We are so appreciative that you have considered our story, and the future of 20% of Oregon's children, with your support for SB 612.

Sincerely,
Theresa M. Sorensen, MD
14194 SE Alta Vista Dr.
Happy Valley, OR 97086

