“The chances for recovery are good,” the doctor said to the patient. “I am writing a prescription that will turn this around.” The patient took the prescription to the pharmacy. The pharmacist said, “I can offer you something similar that is research based but not yet proven.” The wise patient replied, “I want the research-proven intervention, not the one based on research.”

In medicine, and in education, research-proven interventions are always better than those based on research. Confounding the choice is whether the consumer understands the implication and the difference.

In the beginning
The development of Reading Recovery and proof of its benefits to children is rich in research.

In the early 1960s, Dr. Marie Clay begin by focusing on and observing how children actually learned to read. At that time, there was a push to identify children's reading problems as being brain-based cognitive or language learning disabilities.

Additionally, educators were looking for best practices for instruction. Then—like now—the call was for more extensive standardized assessments, reformed curriculum, improved teacher training, and remedial teaching. Dr. Clay, guided by a developmental understanding of research and children, challenged conventional beliefs by suggesting that expecting diversity in children and responding to each child's individual profile was a better starting position for schools. Rather than believing that children could not learn to read, she started from the notion that children given high-quality individualized instruction will learn to read.

Foundational research
Clay began to study the process of reading. She completed a doctoral dissertation that focused on emergent reading behaviors in 1966. As head of the Department of Education at the University of Auckland, Clay then engaged in a series of research studies in the 1970s that led to the development of Reading Recovery.

Research-proven practice
Often one hears that an intervention is research based. Rarely, however, does one hear the claim that an intervention is research proven. The difference between the two positions is significant. In the case of research based, there may be no studies to prove the practice works — anyone can claim their intervention to be research based. In the case of research proven, one can find the actual research that validates the effectiveness. Research proven is the standard for medicine because the impact of treatment is the critical consideration. It can, and should be, the same standard in education.

The standard for an intervention to be a proven practice is based on three conditions:
1. The intervention is theoretically sound.
2. The intervention is replicable.
3. Research that meets the highest standards for quality demonstrates the intervention works. Indeed, these are high standards, and few programs and practices achieve all three.
WHEN GIVEN THE OPPORTUNITY, INVEST IN RESEARCH-PROVEN PRACTICES.

READING RECOVERY IS A RESEARCH-PROVEN PRACTICE.

The theoretical foundation for Reading Recovery is described extensively in Clay’s (1991, 2002, 2015) classic text, Becoming Literate: The Construction of Inner Control. Clay describes in detail the complex processes involved in reading, relationships between reading and writing, and how children use different processes to learn to read and write.

The replicability of Reading Recovery is evidenced every year through program evaluation research. Performance data on every child taught Reading Recovery lessons are submitted to the International Data Evaluation Center every year. These data are then compiled into program evaluation reports that are shared with every school district that implements Reading Recovery. Since its inception in the United States alone, data documenting children’s performance in Reading Recovery have been collected, analyzed, and shared for well over 2 million children.

Several gold-standard research studies confirm the effectiveness of Reading Recovery. The What Works Clearinghouse (WWC), an initiative of the United States Department of Education’s Institute of Education Sciences, reviews and assesses research evidence for programs. The WWC (2013) found that Reading Recovery achieves strong results and ranks highest in evidence of effectiveness across alphabets, comprehension, reading achievement, and reading fluency. (See also RRCNA, 2019).

Independent researchers using a randomized control trial study concluded that students who participated in Reading Recovery over 5 months demonstrated a growth rate of 131% compared to the national average growth rate for first grade in literacy. These findings are reported in Reading Recovery: An Evaluation of the Four-Year i3 Scale-Up by the Consortium for Policy Research in Education (May et al., 2016). Many additional studies documenting the effectiveness of Reading Recovery can be found at the Reading Recovery Council of North America website, www.readingrecovery.org.

It is clear that schools have a choice between using research-proven programs and those that are not. Education can be like medicine — schools can choose to only invest in research-proven practices.

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**Resources**


http://repository.upenn.edu/cpre_researchreports/81


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LEARN MORE AT READINGRECOVERY.ORG

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