



RESPONSE TO

LONG-TERM IMPACTS OF READING RECOVERY THROUGH THIRD AND FOURTH GRADE: A REGRESSION DISCONTINUITY STUDY FROM 2011-12 THROUGH 2016-17

—H. MAY, A. BLAKENEY, P. SHRESTHA, M. MAZAL, N. KENNEDY

Introduction

In this paper we address the research of Reading Recovery reported by May and his co-authors at the AERA meeting, April 2022. We share comments and perspective in this response.

Reading Recovery is a dynamic enterprise, and our leadership values both internal and external investigations of Reading Recovery in order to sustain the quality of this highly effective, early literacy intervention and to direct efforts central to informing program design, implementation, and improvement efforts. This research presents the opportunity to weigh the benefits of new, larger scale investigations of both immediate and long-term effectiveness. It is of vital concern to explore the findings of this work to continue the processes of monitoring the intervention and refining our understandings of factors that influence outcomes.

There are many positive takeaways from these studies. Reading Recovery is an incredibly effective early literacy intervention with the lowest achieving first grade children. These findings replicate evidence resulting from previous, large-scale, national investigations (May et al, 2013, 2015a, 2015b) and again confirm that Reading Recovery fulfills its goals. Reading Recovery has a strong positive impact on student literacy achievement in first grade.

The implications of long-term explorations of a short-term intervention with first grade children are very difficult to interpret with confidence. As May et al (2022) point out, this is one among very few existing studies that attempts to investigate long-term outcomes of short-term literacy interventions, and many of the existing examples are focused on Reading Recovery. This leaves us without information on how other literacy intervention approaches might fare over time.

The learning goals of beginning literacy are foundational to ongoing development of proficient readers and writers. While Reading Recovery fulfills its goals, sound, classroom literacy programs are absolutely necessary to 1) take full advantage of the foundational strengths students acquire in Reading Recovery and 2) support their development as critical readers and proficient writers.

The current studies direct attention to matters that require revisiting, including the condition of classroom instruction (grades 1-3) and implications for accurate monitoring of student progress beyond first grade. These are valued considerations. Further implications impacting Reading Recovery can be drawn only from research that is both statistically and theoretically sound. These issues must be explored further in order to answer key questions: For whom is this early intervention most effective? What conditions allow the greatest impact of Reading Recovery? What evidence suggests modifications to further enhance Reading Recovery's effectiveness? Reading Recovery has and will continue to change in response to evidence gathered from a wide-range of studies of both students having difficulties with early reading and writing and their teachers.

Concerning the Methodology

We acknowledge that longitudinal studies of achievement are difficult, not only because of the huge number of intervening variables over the years of a child's life, but because of the attrition of the subjects over time. In this study, massive attrition was significant. Only about 25% of the original group were available for data collection. This level of attrition delimits any inferences that are drawn from this study. From the original sample of 38,525 Reading Recovery students, 10,019 students were excluded from the long-term data collection due to small school sample size. Of the remaining treatment students, the number for whom 3rd grade test scores were available was 25.7% of the full sample of students, and the number for whom 4th grade test scores were available was 16.5%.

The control group for this study of 3rd and 4th graders included 9,743 students who were not selected for Reading Recovery over the grade one year. That means these students demonstrated the ability to grow with regular classroom instruction during 1st grade. The control group students did not receive the intervention because they were not the lowest-achieving readers in their first grade cohorts. The control group and the experimental group were not equitable. Third grade scores were available for approximately 27% of the total sample and fourth grade scores were available for

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approximately 17% of the total number of control students. This attrition rate is a serious limitation.

The treatment group was comprised of all Reading Recovery students and included those with complete interventions (irrespective of their exiting status), and those with partial interventions (irrespective of the number of lessons received). Reading Recovery guarantees every student a full series of lesson (12-20 weeks). Many students successfully complete the intervention in fewer than 20 weeks. However, many students, who receive less than a 20-week intervention, remain vulnerable. They have not yet had an opportunity to build a beginning self-extending system that would allow them to reach the average band of their peers and continue to learn from their own efforts. This is especially true of students who received Reading Recovery the second half of the year, with fewer weeks available for instruction, and then had a summer break from school. Other treatment students, included by the researchers, were Reading Recovery students identified as needing longer-term specialist intervention (perhaps Special Education).

Reading Recovery serves as a pre-referral intervention. It is the opportunity for 20 weeks of diagnostic teaching and close monitoring of progress that reveals those students deserving of ongoing, specialized instruction. These students demonstrate limited gains during their Reading Recovery intervention and would not be expected to achieve grade-level performance in subsequent years. Reading Recovery's goals are to teach the lowest performing students, provide them the highest quality instruction, and ensure ongoing access to extra, specialist interventions for those exhibiting such learning needs. This goal defies statistical evaluation. There are no expectations of average rates of growth or grade-level performance on local or state reading assessments in the long-term. However, the early identification is highly valued by schools striving to provide programs meeting the needs of all students.

The study used the *Observation Survey of Early Literacy Achievement*, 2nd edition (OS, Clay 2002) as the selection criteria and third and fourth grade state achievement test scores, collected from the range of states represented in the student sample, to measure outcomes. The OS measures early literacy foundational skills. State achievement tests vary, but most generally focus on vocabulary and comprehension, both of which depend partially on content knowledge. Therefore, because these two forms of assessment measure different constructs, the ability to draw inferences may be limited. Also, because state measures vary greatly from state to state, using equivalence scales for these tests may not be a reliable way to determine average long-term gains across states.

Reading Recovery was not designed to be a panacea. A preponderance of over 35 years of research shows that the

intervention is successful with a majority of the lowest first grade readers and writers, who receive a full series of lessons. These students are able to continue to make satisfactory progress with the support of good classroom instruction. In the study, researchers did not report data regarding classroom programs, additional interventions, attendance, and economic and social factors affecting students. Data were not disaggregated in a way to provide information on the subgroups.

Summary & Conclusions

As educators, it is our obligation to thoughtfully consider every solid research effort and its implications for curricular and/or policy change. What can we take away from this research? One thing is clear. Reading Recovery has immediate highly positive outcomes for children selected as the most vulnerable and lowest performers in reading in the first grade classroom. These outcomes occurred even with instruction from new teachers in the training program and including every child touched by the intervention. With a program of 12 to 20 weeks, depending on the evidence of a beginning self-extending system for learning more from reading, a large majority of these children can be successful with high expectations for continuing to learn at an average or close to average rate. But in this study, the researchers included the entire population touched by Reading Recovery, even for a week or so as well as those who were identified as needing further specialist help. This had more impact as the attrition occurred. It is positive that the gains of the Reading Recovery population were only slightly below the control group (determined not to need Reading Recovery).

This study does not provide enough evidence to make policy decisions or for districts to change policies or discard an intervention that has served children well. After all, the preponderance of evidence over time and across settings suggests not only strong results in grade one but some positive long-term impact. The results from the research also cannot make the leap to hypothesize that Reading Recovery students do not get enough phonics instruction. Students, who complete a full series of lessons and meet the criteria for successful completion, have obtained phonics generalizations essential to read and write within the average of their first-grade peers and continue to learn from good classroom instruction. Evidence confirming the command of phonics gained by Reading Recovery students is revealed in a 2008 study published by the International Literacy Centre, Institute of Education, in England, which found that 75% of children who participated in Reading Recovery passed the national phonics screener compared to 81% of all children nationally (Harmey & Anders, 2018). Phonics is addressed in every component of the Reading Recovery lesson; but, there is much to learn about sounds, letters and words beyond first grade.

This study does prompt us to seriously consider some important elements by asking further questions of the data. The mean score for thousands of children does not provide enough information for real actions, and certainly not enough to make a definitive decision about whether Reading Recovery “works.” We certainly would not change to another program offering no long-term data at all.

We would like to know:

- Where does it work?
- Under what circumstances does it work?
- For whom does it work?
- What individuals seem to be particularly vulnerable?

Considering the tenets on which Reading Recovery is based, we would like to reanalyze these data to look at the children who have had (or come close to having) a full series of lessons (12 to 20 weeks) even if they have not successfully completed their series of lessons. The results will provide information about the period of intervention needed. Variation in long-term effects may well be explained by time in program.

Also, we need to know the characteristics of districts where the data were gathered. What is the status of classroom instruction? What are the demographics? What, if any, continuing extra help did children get? We may find that some children who make progress in a one-to-one intervention remain vulnerable to other factors and need further help or a different type of classroom instruction.

At the very least, the study prompts schools and districts to conduct their own examination of long-term Reading Recovery outcomes. Administrators and teachers can look at their own environment knowledgeably because they can investigate these mitigating factors to determine where outcomes are strong and where some kind of boost is needed. What really matters to educators at the local level is the outcomes for their own students.

Finally, we need to ask how we can serve children better. Do we need to establish some protocols to regularly check on progress after the intervention is discontinued? If there is a predictable “slump” for some children compared to others, and why is it likely to occur? For children who continue to progress within the average band of their peers what support systems or characteristics of classroom instruction are present. It may be foolish to expect that any literacy intervention, no matter how powerful, can work successfully as a one-time “treatment”, especially within a system that has the potential to confound progress. We know of very few other early interventions that regularly submit data on long-term effects and we cannot assume that other interventions will work better when no evidence is available.

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