

Primary Reading Pledge

A plan to have all students reading by the end of primary school

August 2020





Five from Five is a community education initiative of MultiLit Pty Ltd.

Five from Five provides educators, parents and policy makers with information and resources about evidence-based reading instruction.



AUSPELD is the Australian Federation of SPELD (Specific Learning Difficulties) organisations, which supports children and adults with learning and language difficulties, through professional learning, evidence-informed intervention, resources and assistance for schools, and policy advocacy.



Learning Difficulties Australia (LDA) is an association of teachers and other professionals dedicated to assisting children with learning difficulties, both directly and through publications and events to raise awareness of evidence-based teaching practices.

Primary Reading Pledge

Pledge:

To reduce to near zero the number of children who finish primary school unable to read by providing primary schools with the resources and training to provide effective assessment and intervention.

Rationale:

Almost 17,000 Year 7 students achieved below the National Minimum Standard (NMS) in Reading in NAPLAN in 2019. A further 35,000 students achieved only the NMS, which is a very low benchmark. In the same cohort of children two years earlier, more than 18,000 children achieved below the NMS and 32,000 achieved only the NMS in the Year 5 NAPLAN. This demonstrates that for the large majority of those children, their poor literacy had been identified but not addressed before they completed primary school. This cannot be allowed to continue.

Action:

Every child who does not meet the designated achievement benchmark in the Year 1 Phonics Check (or similar assessment), Year 3 NAPLAN Reading, or Year 5 NAPLAN Reading assessments is automatically provided with standardised reading assessments and, on the basis of those results, provided with appropriate evidence-informed interventions.



Thousands of children finish primary school each year unable to read

NAPLAN results show that almost 17,000 students in Year 7 in 2019 – 6.1% of the cohort – had reading levels below the National Minimum Standard. Another 35,000 students (11%) just met the NMS, bringing the total number of students with low literacy in Year 7 to 52,000.

Table 1. Number and percentage of Year 7 students below and at the National Minimum Standard for Reading (2019)*

	Students below NMS for Reading		Students at NMS for Reading		Total below/at NMS
	%	Number	%	Number	Number
NSW	5.3	5,066	11.7	11,184	16,250
VIC	4.3	3,280	9.8	7,525	10,805
QLD	5.0	3,407	12.4	8,508	11,915
WA	6.3	2,134	11.1	3,779	5,913
SA	6.1	1,250	11.3	2,317	3,567
TAS	8.0	532	13.6	905	1,437
ACT	5.2	299	9.1	523	822
NT	29.7	944	15.4	489	1,433
AUSTRALIA	6.1	16,912	11.3	35,158	52,070

*Does not include students who were withdrawn or absent.

Source: Student numbers estimated using Australian Bureau of Statistics, Schools Australia 2019, 4221.0 Table 42b

Every year, similar numbers of students begin their secondary education without the necessary literacy skills to enable them to succeed in education and beyond. Almost all of these students would have been identified as struggling readers in their Year 3 and Year 5 NAPLAN tests.

The NAPLAN assessments, particularly with a full transition to NAPLAN Online in 2022, provide an opportunity to identify every child in need of support and for a systematic response to be implemented. At the moment, there is little guidance and support for schools to respond to NAPLAN results for low achieving students.

The NMS represents a very low level of reading skill, which means that the reported number of children who fall below it is a conservative estimate of the true number of children who struggle with basic reading tasks. Therefore, the need for these children to receive evidence-based intervention is severe and urgent.¹ Children who achieve only the minimum standard are still not reading proficiently and are highly likely to struggle with the demands of the curriculum. They should also be screened for reading difficulties using standardised assessments, as well as provided with the appropriate intervention if required.

¹Lamb, S., Jackson, J., Walstab, A., & Huo, S. (2015). *Educational opportunity in Australia 2015: Who succeeds and who misses out*. Centre for International Research on Education Systems, Victoria University, for the Mitchell Institute, Melbourne: Mitchell Institute. <http://www.mitchellinstitute.org.au/wp-content/uploads/2015/11/Educational-opportunity-in-Australia-2015-Who-succeeds-and-who-misses-out-19Nov15.pdf>

These are the students that NAPLAN has identified as being struggling readers. However, students who have not participated in NAPLAN (who were withdrawn or absent) should not be neglected. These students may require intervention and they also should have screening assessments. In 2019, this represented another 4.5% of students in Year 3 and 4.9% of students in Year 5. Indeed, the prospect of receiving a reading intervention if required may encourage greater participation in NAPLAN.

Students who are exempt from participating in NAPLAN have by definition already been identified as needing special education or intervention and therefore do not need to be assessed through the Primary Reading Pledge process. They should already be receiving high quality learning support. Teachers may also identify additional students needing support through other assessments.

Combining the students who are at or below the National Minimum Standard for reading and the students who were absent or withdrawn from NAPLAN results in a total of 15.6% of Year 3 students and 16.9% of Year 5 students in 2019. If these are relatively accurate forecasts of the proportions of students in these categories in future years, it is not an unreasonable expectation they should receive reading assessments and intervention. Not all students assessed will require intervention but if they do, it is the responsibility of their schools to provide it.

Primary schools must take an evidence-based approach to intervention that gives all children the high quality instruction they need to be able to read

Response to Intervention (RTI) is a tiered model of instruction for students experiencing difficulties in acquiring basic skills and appropriate social behaviours.²

In the context of learning to read, with initial instruction based on evidence-based best practice ('Tier 1'), the vast majority of students will get off to a good start in learning to read and spell. Those students who begin to fall behind, often operationally defined as those in the bottom 20 to 25% of what might be expected for the age cohort, are then offered 'Tier 2' instruction.

Tier 2 instruction typically takes the form of more intensive, more targeted, small group literacy instruction, again based on what scientific research has shown to be the most effective methods and curriculum content for teaching lower-progress readers. Such instruction should ideally be provided four to five times a week for at least half an hour, and for up to 20 weeks.³ Tier 2 intervention is likely to resolve the difficulties experienced by the great majority of low-progress readers and will enable them to get 'back on track' and progressing at a similar level to their classroom peers.⁴

²Fletcher, J.M., & Vaughn, S. (2007). Response to Intervention: Preventing and remediating academic difficulties. *Child Development Perspectives*, 3(1), 30-37. <https://doi.org/10.1111/j.1750-8606.2008.00072.x>

³Harlacher, J. E. & Nelson Walker, N. (n.d.). Distinguishing between Tier 2 and Tier 3 instruction in order to support implementation of RTI. RTI Action Network. <http://www.rtinetwork.org/essential/tieredinstruction/tier3/distinguishing-between-tier-2-and-tier-3-instruction-in-order-to-support-implementation-of-rti>

⁴Wanzek, J., Vaughn, S., Scammacca, N., Gatlin, B., Walker, M.A., & Capin, P. (2016). Meta-analysis of the effects of tier 2 type reading interventions in grades K-3. *Educational Psychology Review*, 28(3), 551-576. <https://doi.org/10.1007/s10648-015-9321-7>; Hall, M.S., & Burns, M.K. (2018). Meta-analysis of targeted small group reading interventions. *Journal of School Psychology*, 66, 54-66. <https://doi.org/10.1016/j.jsp.2017.11.002>

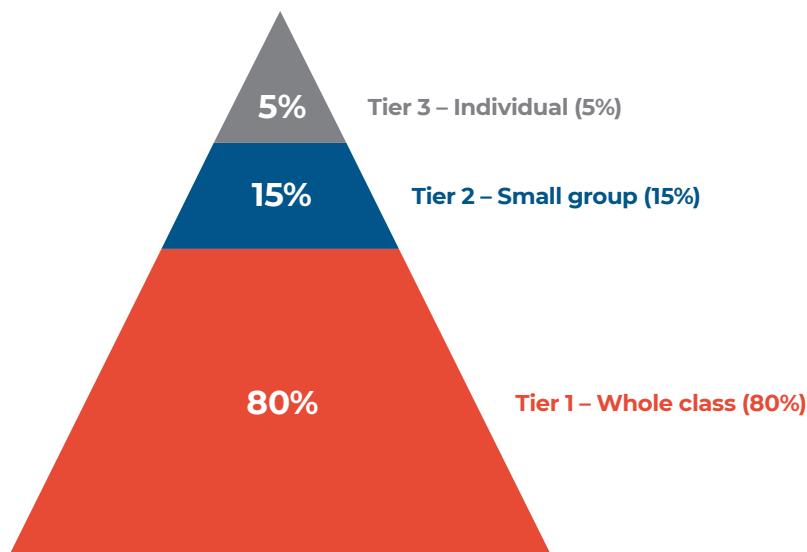
In the early years of school, Tier 2 intervention can occur within the classroom, delivered by the classroom teacher, or as small group withdrawal lessons with a well-trained tutor or teacher, but both require a well-defined curriculum of systematic and explicit instruction. If children are identified for intervention before they fall too far behind their peers, the curriculum of the intervention will be only a few months below the sequence of Tier 1 instruction and their learning will be accelerated sufficiently to be able to resume classroom lessons again.

In the upper years of primary, students who fall below or at the NAPLAN NMS often have a reading skill gap of several years below their peers. For these students, small group support within the Tier 1 classroom will almost certainly not be enough to accelerate their progress. These students will need remedial reading interventions that include development of foundational reading skills. With a high quality intervention of sufficient duration, the majority of older low progress readers will acquire reading proficiency appropriate for their age.

There will always be a small proportion of students, however, who fail to respond and make progress even when offered Tier 2 instruction; these students need specialised Tier 3 (usually one-to-one) intervention. Tier 3 intervention is even more intensive, tailored to the specific needs of the individual student, and preferably provided by a reading expert. If RTI is implemented well, a very small number of children are likely to require this level of support on a continuing basis, but they may need it for several years.

Within the RTI model, students with a specific learning disorder in reading (including those with dyslexia), may be defined as those students who present with persistent and enduring difficulties in reading, and, despite the provision of at least six months of targeted intervention, fail to reach age-appropriate levels and/or fail to improve at the same rate as their peers.⁵ These are typically the students who are likely to need continuing literacy support, possibly over many years.

Figure 1. Response to Intervention model



⁵American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). <https://doi.org/10.1176/appi.books.9780890425596>

In the context of the Primary Reading Pledge, intervention for struggling readers in Year 1 should follow the standard RTI protocol where Tier 2 is the first stage of intervention. For Year 3 and Year 5 students, the decision to provide Tier 2 intervention first, or go directly to a Tier 3 intervention, should be based on a) whether they have already had a Tier 2 intervention, and/or b) the severity of their difficulties.

Schools and systems must ensure that all children receive the evidence-based instruction they need

State and territory NAPLAN results for 2019 estimate the numbers of children who would be eligible for intervention through the Primary Reading Pledge. While the proportions of children requiring intervention is high in the Northern Territory, the absolute numbers are lower than in other jurisdictions.

The costs associated with intervention on this scale are considerable but not unrealistic, especially if managed efficiently at a systemic or sector level. The costs of not intervening through intergenerational impacts on employment, income, health, and welfare are greater.⁶ Students with low literacy in Year 7 have rates of school completion approximately half that of their peers and it has been estimated that at current rates each annual cohort of early school leavers costs the economy \$12 billion over their life time.⁷

Table 2 shows the numbers of children identified as struggling readers (below or at NMS) in Year 3 and 5, but intervention should be provided in schools as a matter of course much earlier than Year 3. Because there are currently no national tests prior to Year 3, intervention decisions are made at the school level for the early years of school. Year 3 is currently the first point at which systemic action can be taken in most states and territories.

The exception is South Australia, where all primary schools implement the Year 1 Phonics Screening Check (PSC). In 2019, 48% of South Australian Year 1 students did not achieve the benchmark score of 28/40.⁸ This indicates that while some improvement has already occurred from the previous year (57%), further significant improvements are required to classroom reading instruction (Tier 1 in the Response to Intervention model). The governments of New South Wales and Tasmania announced trials of the Year 1 Phonics Screening Check in 2020. If the results in those states show similar proportions of students with low phonic decoding skills, substantial adjustments to initial reading instruction will be required. The federal government has made available an optional online version of the Year 1 Phonics Screening Check. All schools not using a systemic state-based implementation of the Check are encouraged to use it.

⁶Shomos, A. & Forbes, M. (2014). *Literacy and numeracy skills and labour market outcomes in Australia*. Productivity Commission Staff Working Paper, Canberra. <https://www.pc.gov.au/research/supporting/literacy-numeracy-skills/literacy-numeracy-skills.pdf>; Vignoles, A. (2016). What is the economic value of literacy and numeracy? IZA World of Labor, 229. <https://wol.iza.org/uploads/articles/229/pdfs/what-is-economic-value-of-literacy-and-numeracy.pdf>

⁷Lamb, S. & Huo, S. (2017). *Counting the costs of lost opportunity in Australian education*. Mitchell Institute Report No. 02/2017. Mitchell Institute. <http://www.mitchellinstitute.org.au/wp-content/uploads/2017/06/Counting-the-costs-of-lost-opportunity-in-Australian-education.pdf>

⁸Government of South Australia (2019). *2019 Phonics Screening Check*. <https://www.education.sa.gov.au/sites/default/files/2019-phonics-screening-check-fact-sheet.pdf>

Table 2. Percentage and number of Year 3 and Year 5 students below and at NMS for reading in 2019

	Year 3 reading			Year 5 reading		
	Number (%) below NMS	Number (%) at NMS	Total	Number (%) below NMS	Number (%) at NMS	Total
NSW	3,357 (3.4%)	8,097 (8.2%)	11,454	4,793 (4.9%)	8,706 (8.9%)	13,499
VIC	2,673 (3.4%)	4,482 (5.7%)	7,155	3,196 (4.1%)	5,536 (7.1%)	8,732
QLD	2,719 (4.0%)	6,390 (9.4%)	9,109	3,515 (5.1%)	6,755 (9.8%)	10,270
WA	1,521 (4.4%)	3,561 (10.3%)	5,082	1,943 (5.7%)	3,137 (9.2%)	5,080
SA	1,060 (5.2%)	2,018 (9.9%)	3,078	1,421 (6.8%)	2,069 (9.9%)	3,490
TAS	345 (5.4%)	781 (12.2%)	1,126	494 (7.2%)	720 (10.5%)	1,214
ACT	234 (4.0%)	457 (7.8%)	691	230 (4.1%)	353 (6.3%)	583
NT	959 (27.3%)	488 (13.9%)	1,447	1,075 (31.6%)	387 (11.4%)	1,462
AUST	12,868 (4.1%)	26,237 (8.3%)	39,105	16,667 (8.3%)	27,773 (8.8%)	44,440

Source: Student numbers estimated using Australian Bureau of Statistics, Schools Australia 2019, 4221.0 Table 42b

This does not mean that struggling readers in Year 1 should not be offered evidence-based intervention in the absence of a standard test, or because the numbers of children achieving below the benchmark are high. *Schools not using the Year 1 PSC should nominate an alternative scientifically validated screening test to be used in Year 1.*

In schools with large numbers of struggling readers in Year 1 due to socioeconomic and other environmental disadvantages, the proportion of children needing intervention may be more than 25% of the year group if Tier 1 instruction is not high quality and/or if there is high mobility in the student population. However, the provision of intervention at this age will reduce the number of children requiring intervention in Year 3 and Year 5, at which stage their difficulties will be more difficult and more expensive to remediate.

Standardised screening assessments must be used to determine the subskill deficits that underlie a child's reading difficulties

The reading assessment in NAPLAN is a general comprehension measure. If a student obtains a low score, the test does not provide any information about the particular aspects of reading with which they are having difficulty (for example, decoding or

language comprehension, or both) and therefore can only be used as an indicator of low reading ability that needs investigation through further assessment. If this assessment reveals no serious problems and indicates that the NAPLAN result was not an accurate reflection of the child's reading ability, there is no need to intervene.

Standardised screening assessments are used to identify specific strengths and weaknesses in the reading abilities of individual students. (See Appendix 1 for a list of recommended assessments.) They assess reading and language subskills in order to pinpoint the underlying factors in a student's reading difficulty and provide the basis for intervention decisions. Some of these assessments can be administered by the class teacher or learning support teacher, while others can only be administered by a psychologist or speech pathologist.

If students who have been provided with high quality reading intervention continue to perform poorly, or progress at an unusually slow rate, they may have a specific learning disorder (SLD) or a developmental language disorder (DLD). *Diagnostic assessments* are more comprehensive and specialised instruments used (often also with reference to standardised norms) to identify specific difficulties in the reading profiles of individual students. Most diagnostic assessments are administered by allied education and health professionals, such as psychologists and speech pathologists.

Diagnostic assessments are necessarily time-consuming. They should usually be used only for students for whom more detailed information is required than can be provided by more general assessments of reading that are appropriate for their age and stage of learning (for example, from curriculum-based assessments and standardised tests).

Reading interventions must be evidence-informed and precisely targeted

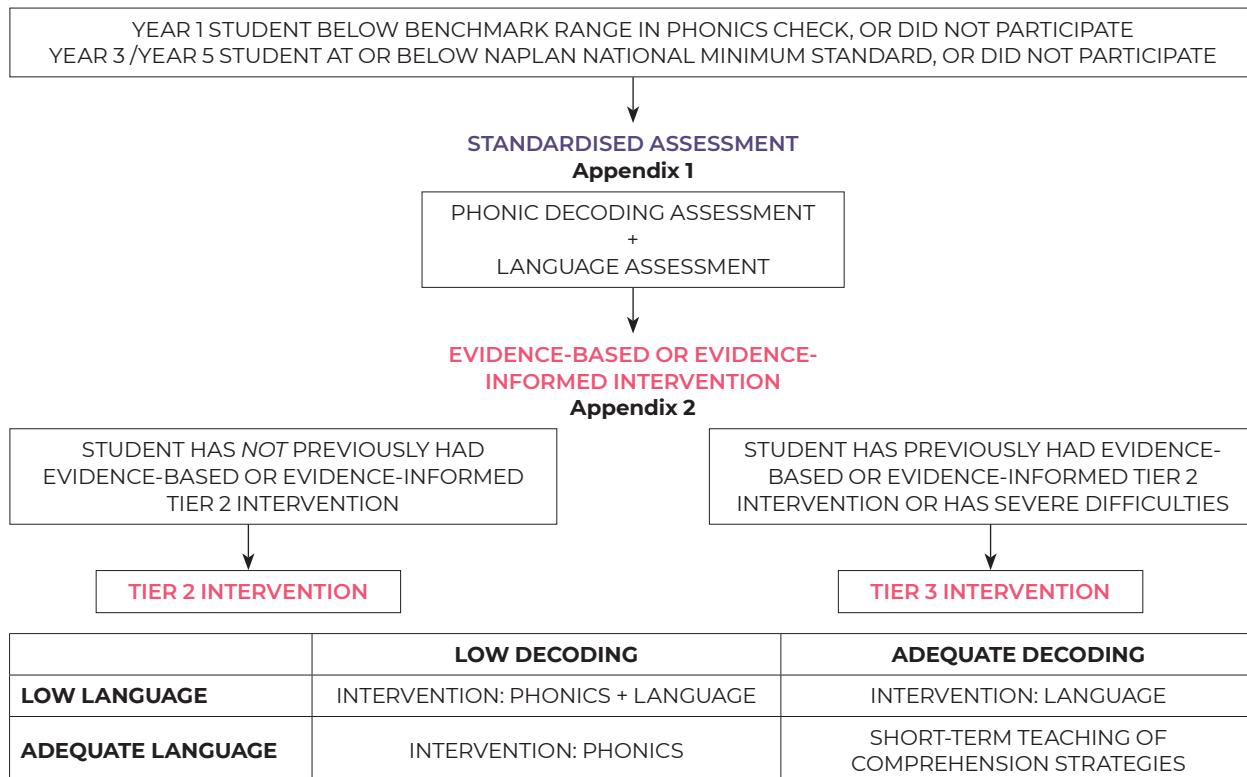
The results of standardised screening assessments should be used to determine which type of intervention a child needs. The Simple View of Reading offers an empirically validated model of reading that can be used to make evidence-based decisions about interventions.⁹ The Simple View of Reading states that reading comprehension has two broad components: word identification (decoding) and language comprehension. A child who has low proficiency in either one (or both) of these areas will have poor reading comprehension.

Students who have difficulties at the word level will often guess what the word might be from the first one or two letters of the word, the context or picture clues. Their reading is likely to be effortful and not automatic. As a consequence of the effort that goes in to reading each word, their comprehension of the text suffers. These students need a phonics-based intervention that will assist them to become accurate and fluent readers. In cases where students demonstrate strong accuracy and fluency (that is they do not rely on guessing and they read at a reasonable rate) but they struggle

⁹Hoover, W.A., & Tunmer, W.E. (2018). The Simple View of Reading: Assessments of its adequacy. *Remedial and Special Education*, 39(5), 304-312. <https://doi.org/10.1177%2F0741932518773154>

to comprehend both what they read and what people say, then a language-based intervention to develop vocabulary and understanding of text and oral language structures is needed.

Figure 2. Assessment and intervention decision framework



Numerous reading interventions are available and are currently being used by schools. Almost all schools offer reading support in some form. However, reading intervention is not consistently evidence-based and targeted, and is often limited to the first few years of school – sometimes due to lack of knowledge of evidence-based intervention and sometimes due to lack of resources and support. Children who continue to struggle with reading after receiving some early support will be among the children identified as being below or at the minimum standard in NAPLAN.

Schools should therefore be provided with guidance about which intervention programs, and which types of intervention programs meet the criteria for being evidence-based, or at least evidence-informed. Intervention programs must use materials and pedagogy that are age appropriate.

Evidence-based interventions have been developed using scientific research on reading instruction and development and have been found to be effective through quantitative evaluations using strong research protocols. These programs have a high likelihood of success with struggling and low-progress readers.

Evidence-informed interventions have been developed using scientific research on reading instruction and development but may not have been subjected to the same level of rigorous evaluation. Many of these programs have, however, been found to have high levels of success with struggling and low-progress readers through evidence gathered from practice.

Departments of education and non-government school authorities should provide a list of interventions that meet evidence-based and evidence-informed criteria, and guidelines for how to make decisions about which intervention will be most effective for each child who requires it, similar to the diagram in Figure 2.

Education ministers and school sector authorities must make the Primary Reading Pledge: that children will receive the support they need to learn to read in primary school.

It is a constitutional responsibility for state governments to provide education to all children. Article 13 of the International Covenant on Economic, Social and Cultural Rights, a treaty to which Australia became a signatory in 1976, recognises “the right of everyone to an education” and that “education shall enable all persons to participate effectively in a free society”.¹⁰ Arguably, there is no education without literacy.

Thousands of children each year are being denied this basic right, most of whom are casualties of a system that has become accustomed to an unacceptable rate of failure.

There is no excuse for children spending seven years in full-time education without learning to read. Every state and territory education minister must make a pledge to provide the keys to literacy to every child before they leave primary school.

¹⁰Department of Foreign Affairs. (1976). International covenant on economic, social and cultural rights. Australian Legal Information Institute. [http://www.austlii.edu.au/other/dfat/treaties/1976/5.html](http://www.austlii.edu.au/au/other/dfat/treaties/1976/5.html)

Appendix 1. Valid assessment

Appropriate assessment depends on the stage of reading development and the purpose of the assessment.

The reading assessments listed here are examples of standardised assessments appropriate for use in a Response to Intervention model. It is not suggested that all are necessary. For example, choose one phonics assessment and one language assessment, or an instrument that assesses both.

Tier 2 screening assessments for intervention can be delivered by teachers whereas Tier 3 diagnostic assessments can only be delivered by psychologists, speech pathologists or, in some cases, teachers who have had special training (ie. User B). This is specified by the test developers.

Foundation to Year 2

	Examples of standardised assessments	Skill(s) assessed
Screening for intervention Curriculum-based phonics and oral language assessments; curriculum-based fluency measures		
	Phonics and oral reading fluency	
	<i>Castles and Coltheart-2</i>	Phonics
	<i>Educheck (Neal Phonemic Skills Screening Test)</i>	Phonics
	<i>Wheldall Assessment of Reading Nonwords (WARN)</i>	Phonics; oral reading fluency
	<i>Wheldall Assessment of Reading Lists (WARL)</i>	Oral word reading fluency
	<i>Letter Sound Test (MOTif)</i>	Phoneme-grapheme knowledge
	<i>Diagnostic Reading Test for Nonwords (MOTif)</i>	Phonics
	<i>Foundations of Early Literacy Assessment (FELA)</i>	Phonological awareness; phonics
	<i>CUBED Dynamic Decoding Measures</i>	Phonics
	<i>DIBELS Nonsense Word Fluency</i>	Phonics
	<i>UK Year 1 Phonics Screening Check</i>	Phonics
	Language	
	<i>Grapheme and Phonology Screening (GAPS)</i>	Oral language
	<i>Clinical Evaluation of Language Fundamentals-5 Screening Test (CELF-5)</i>	Oral language
	<i>CUBED Narrative Language Measures (Language)</i>	Oral language

	Examples of standardised assessments	Skill(s) assessed
	Multi-component	
	<i>Dynamic Indicators of Basic Early Literacy Skills</i>	Phonics, vocabulary, fluency, comprehension
	<i>York Assessment of Reading for Comprehension – Early Reading</i>	Phonological skills, alphabetic knowledge, word reading
Assessment for Tier 3 intervention Diagnostic assessments	<i>Clinical Evaluation of Language Fundamentals-5 (CELF-5)</i>	Semantics, pragmatics, morphology, syntax
	<i>Test of Integrated Language and Literacy Skills (TILLS)</i>	Phonemic awareness, phonics, vocabulary, listening comprehension
	<i>Peabody Picture Vocabulary Test-5</i>	Receptive vocabulary
	<i>Wechsler Individual Achievement Test-III (WIAT-III)</i>	Oral language, listening comprehension, decoding, word reading, reading comprehension
	<i>Woodcock Johnson Tests of Achievement – IV</i>	Phoneme-grapheme knowledge, reading accuracy, fluency, phonics, comprehension, spelling and written expression
	<i>Woodcock Johnson Tests of Oral Language – IV</i>	Phonological processing, story retell, oral vocabulary

Year 3 to Year 6

	Examples of standardised assessments	Skill(s) assessed
Screening for intervention Curriculum-based phonics and oral language assessments; curriculum-based fluency measures	Phonics and oral reading fluency	
	<i>Castles and Coltheart-2</i>	Phonics
	<i>Wheldall Assessment of Reading Passages (WARP)</i>	Oral reading fluency
	<i>Martin and Pratt Nonword Reading Test</i>	Phonics
	<i>Letter Sound Test (MOTif)</i>	Phoneme-grapheme knowledge
	<i>Diagnostic Reading Test for Nonwords (MOTif)</i>	Phonics
	Language	
	<i>Clinical Evaluation of Language Fundamentals-5 Screening Test (CELF-5)</i>	Oral language
	<i>CUBED Narrative Language Measures (Language)</i>	Oral language

	Examples of standardised assessments	Skill(s) assessed
	Multi-component	
	<i>CUBED Narrative Language Measures (Reading)</i>	Decoding, comprehension, vocabulary
	<i>York Assessment of Reading for Comprehension – Passage Reading (YARC-PR)</i>	Reading accuracy, rate, reading comprehension
	<i>Tests of Reading Comprehension (TORCH)</i>	Vocabulary, reading comprehension
	<i>Neale Analysis of Reading Ability (3rd Edition)</i>	Reading accuracy, rate, reading comprehension
	<i>Dynamic Indicators of Basic Early Literacy Skills (DIBELS)</i>	Phonics, vocabulary, fluency, comprehension
Assessment for Tier 3 intervention	<i>Clinical Evaluation of Language Fundamentals-5 (CELF-5)</i>	Semantics, pragmatics, morphology, syntax
Diagnostic assessments	<i>Wechsler Individual Achievement Test-III (WIAT-III)</i>	Oral language, listening comprehension, decoding, word reading, reading comprehension
	<i>Waddington Diagnostic Standard and Advanced Reading and Spelling Test</i>	Speech irregularities and potential word reversals, syntactic/semantic based skills, correct use of indirect picture cues/comprehension of complex sentences
	<i>Test of Integrated Language and Literacy Skills (TILLS)</i>	Phonemic awareness, phonics, vocabulary, listening comprehension
	<i>Woodcock Johnson Tests of Achievement – IV</i>	Phoneme-grapheme knowledge, reading accuracy, fluency, non-word reading, comprehension, spelling and written expression
	<i>Woodcock Johnson Tests of Oral Language – IV</i>	Phonological processing, story retell, non-word repetition, oral vocabulary

Appendix 2. Evidence-based and evidence-informed intervention programs and resources

A non-categorical approach to intervention

According to the non-categorical model, instruction should be tailored to the specific instructional needs of the individual child, not to the perceived needs of categories of student. In this sense, it is truly ‘child-centred’. There is likely to be as much variation within categories of reading difficulties or disabilities than there is between them. Children with specific disabling conditions do not need programs based on their condition but rather a program that is based on the best scientific evidence for efficacy of instruction.

This is not to say that ‘one size fits all’ but rather to argue that ‘a coat should be cut according to the cloth’. What differs is the child’s initial instructional level and the progress that they may make. Some children, regardless of profile or category, may need more, and more intensive, instruction than others. Some children will quickly master the sequence of instruction while others may need many repetitions. The RTI model, described earlier, provides a paradigm for this, the appropriate tier of instruction being determined by continual monitoring of student performance and progress using appropriate curriculum-based assessments (see Appendix 1).

While the selection of an appropriately targeted and high quality intervention program or resource is important, it does not abrogate the need for teachers to be well informed about evidence-based reading instruction and intervention. The best results will be achieved by a combination of the two. Tier 2 and Tier 3 interventions will also be most effective if they are consistent with, and supportive of, Tier 1 instruction.

Criteria for selecting intervention programs

Consistent with the non-categorical approach to reading intervention, children who are struggling with reading rarely need a different type of instruction. The differences between evidence-based Tier 1 and Tier 2 instruction, other than the logistics associated with group size, are the intensity and duration of instruction.

Therefore, evidence-informed Tier 1 programs can be used effectively with smaller groups of children as long as fidelity to the key elements is preserved.

AUSPELD provides guidance for teachers and parents in selecting effective reading programs for instruction and intervention.¹ The criteria associated with the highest likelihood of effectiveness are:

1. Evidence-based or evidence-informed

It is important that the program is based on current research evidence and, ideally, that its effectiveness is supported by independent reviews (i.e. not evaluated solely by the program manufacturer). Structured synthetic phonics (SSP) programs are

¹AUSPELD. (n.d.). Selecting a successful intervention program. <https://uldforparents.com/contents/selecting-a-successful-intervention-program/>

considered to be evidence-based because very strong independent research collected worldwide shows that SSP programs provide the best opportunity to produce significant literacy improvement.

2. Explicit and direct instructional methods

Content is taught clearly and directly, not in an embedded or implicit manner. Explicit instruction directs student attention towards specific learning in a highly structured environment.

3. Incorporates dual coding

Programs that involve concurrent visual and verbal encoding, referred to as dual coding, aid retention and recall of information, as the learner creates multiple retrieval routes to the same information.

4. Cumulative sequence

Builds on what has already been learned and previous learning receives further practice.

5. Sequential

A prescribed sequence of learning targets presented in small steps.

6. Repetitive

Regular systematic review of concepts and over-learning to ensure learning is retained in long term memory.

7. Systematic

Concepts and skills are taught in a step-by-step manner. For example, in a structured synthetic phonics program, a complete set of phoneme-grapheme relationships are taught sequentially, cumulatively and systematically.

8. Appropriate pace

It is important to introduce concepts and skills in small steps but at a reasonable pace. Each component is taught on its own with ample opportunity for practice. In subsequent sessions (preferably daily) – previous learning is reviewed, new concepts and skills are taught, and – again – ample opportunity for practice is provided.

9. Cover all areas of instruction needed

For example, possible areas for literacy remediation include: instruction targeting phonemic awareness, phonics, decoding, fluency, comprehension, spelling, grammar, sentence structure, and vocabulary.

10. Assessment

Regular ongoing assessments of concepts taught to ensure the student is provided with instruction, resources and activities at the right level.

Evidence-based and evidence informed reading programs and resources that can be used as Tier 2 or Tier 3 interventions for struggling readers in primary school

Note: This is not a definitive list and schools should investigate each option carefully to ensure it meets their needs.

Program/Resource²	Suitable Primary School Years³
Ants in the Apple	F-6
Barton Reading and Spelling System	F-6
Corrective Reading*	3-6
Cracking the ABC Code	F-6
Early Intervention in Reading*	F-2
Fitzroy Method	F-6
Fundations	F-3
Get Reading Right	F-2
Jolly Phonics/Jolly Grammar*	F-6
Let's Decode	F-6
Letters and Sounds	F-4
Little Learners Love Literacy	F-6
MiniLit*	1-2
MacqLit*	3-6
MultiLit Reading Tutor Program*	2-6
Nessy Reading and Spelling	F-6
Orton Gillingham*	F-6
Phonic Books Readers	F-6
Phonics International	F-6
PLD Structured Synthetic Phonics	F-6
Read Write Inc. One-to-One Phonics Tutoring	F-3
Read Write Inc Fresh Start	3-6
Reading Doctor*	F-6
Reading Mastery*	F-5
Sounds-Write	F-6
SPELD-SA Intensive Literacy Program	3-6
Teach Your Child to Read in 100 Easy Lessons	K-3
Toe by Toe	2-6

²Programs marked with * have been shown to be effective in experimental trials published in peer-reviewed journals.

³Some programs and resources are suitable for use with children in preschool or students in secondary school.

Primary Reading Pledge

“ To reduce to near zero the number of children who finish primary school unable to read by providing primary schools with the resources and training to provide effective assessment and intervention. ”



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