The impact of parents' implementation of a structured parent reading program on their children's reading fluency

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THE IMPACT OF PARENTS' IMPLEMENTATION OF A STRUCTURED PARENT READING PROGRAM ON THEIR CHILDREN'S READING FLUENCY

A Thesis
Submitted to the Graduate Faculty of the Louisiana State University and Agricultural and Mechanical College in partial fulfillment of the requirements for the degree of Master of Arts in The Department of Psychology

by
Jennifer Luella Resetar
B.A., University of Louisiana at Monroe, 2001
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Abstract

This study investigated the effectiveness of a method of parent training and parent reading tutoring that built on past research. Parents of five first grade children, who were reading below grade level, participated. Parents were trained to implement a three-week tutoring procedure that included modeling, practice, phonics, fluency, accuracy, comprehension, and reinforcement components. According to permanent product examination, parent intervention implementation never fell below 82% integrity. A multiple baseline across participants design was used to analyze results. According to visual analysis, four of the five children showed significant gains in words correct per minute on tutored reading passages. There was no clear evidence of generalization to untutored passages at school, home, and follow-up.
Introduction and Review of Literature

The Nation’s 2000 Report Card revealed that only 32% of fourth graders were performing at the proficient reading level (United States Department of Education, National Center for Education Statistic [NCES], 2000). Over half of the nation’s children were reading below the basic level, and there had been no significant improvement since the last report (NCES, 2000). Reading problems have been reported to be the most frequent reason children are referred to special education and retained (Learning First Alliance [LFA], 1998). In comparison to other industrialized countries, U.S. fifteen year olds averaged lower in reading literacy in 2000 than fifteen year olds in Canada, Finland, and New Zealand (NCES, 2000).

The Learning First Alliance, an organization consisting of national education affiliations, asserts that first grade is the most influential for beginning readers. Regrettably, research has shown that many schools are still using curricula in first grade that are not supported by empirical evidence for their efficacy. The Alliance’s reading action plan outlines possible changes and additions to current first grade practices that are supported by research. They offer many suggestions regarding phonics instruction, comprehension teaching, class size reduction, curriculum based measurements, and grouping strategies for first grade teachers. Following these suggestions, they include tutoring and home reading as two crucial components needed to produce an effective environment for reading development. Through this, parents are identified as a necessary partner in reading support and growth (LFA, 1998).

The idea that parent involvement has a positive influence on reading is not unique or unfounded (Fawcett, Rasinski, & Linek, 1997; Senechal & Lefevre, 2002; Shaver &
Walls, 1998; Weinberger, 1996). Through a five-year longitudinal study, Senechal and Lefevre (2002) found that parent involvement in teaching reading was correlated to emergent literacy. In another longitudinal study of home reading practices, Weinberger (1996) found that children whose parents contributed less reading support and time devoted to reading were more likely to have reading problems at school. Another study showed that high parent involvement in a Title I program was related to reading achievement and reading comprehension, among other academic factors (Shaver & Walls, 1998). Finally, a survey of elementary and middle school teachers showed that 92% felt that parent involvement was important for reading development (Fawcett et al., 1997).

Parent involvement is a cost effective and time efficient method for teaching children. Many public schools lack the resources for the intensive small group teaching some children with reading difficulties may require (Fitton & Gradler, 1996; LFA, 1998). These children could be provided additional instruction at home. One study by Hewison (1998) found parent involvement to be more effective in increasing reading performance than special small group reading instruction at school. In this study, reading performance in children whose parents increased school involvement were compared with children who received extra reading instruction at school from a reading specialist in small groups. Hewison (1998) found that after three years, the students whose parents increased their school involvement made significant gains proportionate to the national average, while the children that received help from the reading specialist showed no significant gains compared to a control group. A meta-analysis on parent book reading with preschoolers by Bus, Ijzendoorn, and Pellegrini (1995) found that home book reading was related to
reading achievement, emergent literacy, and language growth. The United States government has also recognized parents as valuable resources in reading education and encouraged schools to increase parent involvement through programs such as Title I (Boston, 2000).

One way to increase parent involvement in reading instruction is to train parents to tutor their children and implement effective reading interventions. It is still unclear what type of parent tutoring or intervention is the most simple and effective and what type of parent training and instructions produce the greatest positive effects on reading performance (Bus et al., 1995; Edwards & Panofsky, 1989; Fitton & Gredler, 1996; Toomey, 1993). Toomey, in his 1993 article, suggested that past studies have built a case that parents of low performing readers do not use proven methods of reading instruction such as praise and allowing for self corrections when reading with their children. Toomey (1993) argued that these parents could benefit from specific training.

Parent Reading Interventions - Training

Many methods of training have been used to teach parents to properly and consistently implement reading interventions and tutoring procedures. Methods of training have included group and/or individual sessions using role-play, modeling, discussions, written materials, and/or checklists (Edwards & Panofsky, 1989; Faires, Nichols & Rickelman, 2000; Kelly-Vance & Schreck, 2002; Love & Biervliet, 1984; Mehran & White, 1998; Taverne & Sheridan, 1995; Thurston & Dasta, 1990; Wilks & Clarke, 1988). The length of training examined has ranged from thirty minutes to four hours in total spanning over one day to two months (Edwards & Panofsky, 1989; Faires, Nichols & Rickelman, 2000; Love & Biervliet, 1984; Mehran & White, 1998; Taverne &
Sheridan, 1995; Thurston & Dasta, 1990; Wilks & Clarke, 1988). Finally, several studies have measured parent reading involvement when no training at all is offered (Anderson, 2000; Kelly-Vance & Schreck, 2002; Wilks & Clarke, 1988).

In a study conducted by Edwards and Panofsky (1989), two training procedures were compared: an importance condition and a modeling condition. The amount of time dedicated to training for both conditions was three hours broken up into one-hour sessions. The importance condition’s training included discussions concerning the importance of reading and viewing of videotapes promoting reading. The modeling condition’s training included watching videotaped and live modeling of reading strategies followed by discussions. Mothers in both conditions increased initiations and questioning, but the increase for the modeling condition was more pronounced. The modeling condition also increased commenting across sessions. Increases in reading at home, treatment integrity, and the intervention’s effect on the children’s reading performance were not addressed. This limits the conclusions that can be drawn based on this study. It appears that the modeling condition may be productive, but this study does not allow for specific generalizations to home based reading programs.

Wilks and Clarke (1988) examined whether trained parent tutors used more effective tutoring methods than parents who had not been trained or who were only simply encouraged. The training consisted of hour long weekly sessions for four weeks. During these sessions, information on effective reading practices was explained and discussed. Parents were encouraged and asked to practice the newly introduced procedures after each session. Homework was also assigned. The encouraged group met for two one-hour sessions during the first two weeks. Information was provided to them,
but no suggestions or homework was given. The control group received no training or encouragement of any kind. Parent participants in all three groups were given pre and post questionnaires to fill out concerning the reading and tutoring procedures that were used at home. The authors found a statistically significant difference between pre and post tutoring procedures used by the training group. The authors also considered how training of parents affected children’s reading accuracy and comprehension. The *Neale Analysis of Reading Ability Test* was used as a pre and post measure for reading performance. A statistically significant change in comprehension scores was found for the children whose parents were in the trained group. Encouragement and control groups did not produce any significant changes and were not statistically different from one another. No change in accuracy was found for any group. This study showed that specific training and practice did make a difference in parents’ self-reported tutoring methods. It also showed that these changes in tutoring procedures affected reading comprehension but not accuracy. This could be due to a neglect of training associated with methods for increasing reading accuracy. The training procedures were not explained in enough detail to be certain of the reason for the lack of change in children’s reading accuracy.

Taverne and Sheridan (1995) sought to increase interactive book sharing in at risk homes by training six mothers of children who were three to five years old both individually and in groups over a seven-week period. In an initial home visit, the investigator explained the reading procedure, conducted an interview, and went over how data would be collected. Approximately ten days after the initial visit, when baseline had ended, the investigator returned to review the progress and aid the parent in setting up a schedule. Following intervention implementation, there were weekly skills training
sessions for five weeks. These sessions included role-playing, modeling, and feedback. Five of the six parents reported increases in tutoring frequency and duration from baseline. Four of the six parents showed a significant main effect of training as evaluated by a time series analysis. There was 90% treatment integrity for participants. The treatment was also found to be acceptable as measured on a parent response form. Pre and post scores on the *Peabody Picture Vocabulary Test – Revised* showed an average gain of 15.6 standard score points for the children in the study. Although no follow-up data were reported, the results suggest that the study’s procedures lead to changes in parental behavior that were beneficial to the children.

Faires et al. (2000) also aimed to train parents to use a tutoring procedure. This method was based on the Reading Recovery Model and was called “Books in Bags.” Training included two sessions of forty-five minutes each. During the first session, a teacher modeled a sample lesson. The lessons consisted of six separate components: reading two familiar books, letter identification, writing sentences, arranging words into a story, reading a new book, and an optional activity. These lessons were to be thirty minutes in length and implemented three times a week for five weeks. The second session was an individual training session with the parent and child. During this session, another lesson was modeled but this time with the child. No treatment integrity data were taken, but pre and posttest measures indicated a significant difference between the experimental and control groups. The authors were unsure whether this difference should be attributed to the procedure or to parent involvement in general. Unfortunately, the lack of treatment integrity limits conclusions that can be drawn.
Another example of effective training was established by Thurston and Dasta (1990). They trained parents to implement reading, math, and spelling tutoring procedures in a series of three studies. For the reading procedure, training took one and a half hours on average. In the training session, the parents were taught praise and correction methods as well as three comprehension questions. The parent practiced these with the trainer until he or she correctly used the procedure eight times. It was reported that parents read more with their children and used more of the trained methods following training. *Children’s Slosson Oral Reading Test* and *Peabody Individual Achievement Test* reading comprehension scores increased at posttest, yet oral reading fluency remained fairly stable.

In another study, Love and Biervliet (1984) attempted to train parents of four children with mild mental retardation to use a reading tutoring procedure. Their training program was based on excerpts from the book *Remedial Reading at Home* by Glynn, McNaughton, Robinson, & Quinn (1979). First, parents were taught how to find an appropriate reading place. Then, they were told to just listen to their child read until an error was made. When an error was made, the parent was told to wait 10 seconds or until the sentence was completed before correcting the child. The parents were taught to use various prompts for correction depending on the type of error committed. If the child did not self correct after two prompts, the parent was told to model the word. The training occurred twice a week for about 5 weeks during which each session lasted around 30 minutes. On the first visit of the week, the investigator read a chapter pertaining to a specific reading problem and discussed it with the parent. The parent was given a copy of the chapter and a tutoring procedure diagram for further reference. On the second visit of
the week, the experimenter observed a 10-minute reading session at the participant’s home. Parents were reminded to keep daily records of the four other five-minute sessions that occurred during the week. Measures taken on tutor’s prompting, attention delay to errors, and praise showed an increase from baseline to training. Modeling, on the other hand, was shown to decrease from baseline to training. The reason for this decrease was not addressed. After the parent training and tutoring, the children exhibited increases in the percentage of words self corrected. This study displayed that parents of special populations can be trained to correctly implement an appropriate procedure.

Unfortunately, not all training methods have been found to increase parent involvement. Mehran and White (1988) based their parent-tutoring program on the book *Reading Made Easy* by Harrison (1981). Their procedure focused on phonemes, blending, sight words, and decoding. The parents were trained for two sessions lasting approximately fours hours each. Follow-up meetings were held, but attendance dropped over time to about half of the participants. It is possible that the training sessions were inconvenient, too long, or too complicated. In the first meeting, the program was explained and discussed. At the second and follow-up meetings, parents’ mastery of the procedure was assessed. Parents were given feedback until they reached the mastery level. Parents were asked to implement the intervention three times a week for fifteen minutes and log their progress. Parent reports were used as a measure of the number and length of tutoring sessions. Thirty-three percent of the parents implemented the tutoring procedure one or fewer times per month on average for seven months. The children whose parents reported implementing the procedure almost as much as planned made statistically significant gains on the post-test as compared to controls. This leads one to
believe that the problem was not with the method of training used per se. It is possible that if the tutoring procedure had been explained more clearly or been made simpler with provided instructions, more parents would have participated.

A study by Anderson (2000) provided no training sessions for parents who agreed to participate and demonstrated the need for training to ensure implementation. Letters were sent home to parents asking them to read with their child one day a week for six weeks. The first week, 100% of the parents read with their children. The school supplied a book this week. The second week, parents were supposed to take their child to the library to check out a book, but only 17% of the parents did. Week three only 3% participated, and the following week no one participated. The intervention was terminated due to lack of participation and weeks five and six were not attempted. This study shows that when parents are not given any type of training or instruction they will not implement procedures with integrity.

Kelly-Vance and Schreck (2002) did not offer training sessions, but tips were sent home, and parents were given a schedule of library hours. They wanted to see if this would effect how parents read to their children at home. Parents were also alerted to after school reading activities. Children whose parents participated were given curriculum based measure probes at the beginning and end of the six-month intervention. The only measure taken for treatment integrity was a questionnaire filled out by parents. A significant difference in increase of reading rate was found between experimental and control groups, but a possible selection bias may be present. Only 42% of the parents surveyed reported that they increased the reading time spent with their child. The lack of
specific training and implementation monitoring may have been one reason there was such a small percentage of parents who followed through.

It has been shown that some training is definitely better than none (Wilks & Clarke, 1988) and that training which included modeling was more effective than training that did not (Edwards & Panofsky, 1989). Examining the literature, it seems that a mixture of several training methods used during hour-long sessions over several weeks may be most effective (Faires, Nichols & Rickelman, 2000; Love & Biervliet, 1984; Mehran & White, 1998; Taverne & Sheridan, 1995; Thurston & Dasta, 1990; Wilks & Clarke, 1988). Finally, many articles have suggested that more specific and simple methods of training, which include written checklists or instructions, may be the most beneficial (Edwards & Panofsky, 1989; Love & Biervliet, 1984).

Parent Reading Interventions – Procedures

Past literature has compared the effectiveness of several types of parent reading interventions (Leach & Siddall, 1990). Some studies have looked at the types of tutoring materials used (Powell-Smith, Shinn, Stoner, & Good, 2000); others have focused on one specific type of intervention (Hook & DuPaul, 1999; Miller & Kratochwill, 1996; Murad & Topping, 2000). A few studies have even examined the generalizability of gains from home tutoring procedures (Duvall, Delquadri, Elliott, & Hall, 1992; Hook & DuPaul, 1999). A review of past tutoring procedures shows that some have proven to be more effective than others (Fitton & Gredler, 1996).

There has been some question whether interventions should be literature or curriculum based. Powell-Smith et al. (2000) compared the effectiveness of two different types of parent reading interventions. One intervention was based on children’s literature
books and the other was based on individual classroom reading materials. The child participants were poor readers nominated by their teachers. Training packages were given to parents to help them with the tutoring procedure. The training packets only differed between groups regarding how to choose books or stories. Parents in the literature condition were allowed to choose any books they wished. Parents in the curriculum condition were provided with reading materials from their child’s text. For both conditions, two minutes were allowed for the parent to ready materials and explain the activity to the child. Then, the child read aloud for ten minutes while the parent corrected errors and gave praise for correct reading. Finally, an activity such as the parent reading, relating the story to real life, or a question and answer session about the story was done for eight minutes. The total procedure took twenty minutes and was to be carried out four times a week for five weeks. Treatment integrity was measured by tutoring checklists, weekly phone calls, and observation of the procedure at the end of the treatment phase. Reading performance was measured at school twice a week with one curriculum based measure and one total oral reading fluency passage for each child. No significant main effect or slope of reading fluency was found for either training procedure. They also failed to find a significant difference between CBM and TORF scores. Chi square analyses showed that reading performance increased for more experimental children than controls. Treatment integrity ratings were from 75-92%, but many parents reported skipping the preview portion of the procedure.

Leach and Siddall (1990) conducted the largest comparison study thus far of four commonly used types of parent implemented reading interventions: listening to the child read, paired reading, pause, prompt, and praise, and direct instruction. Each group, except
for the listening condition, had a one and a half hour training session in which the particular procedure was explained and demonstrated. The listening condition was only given written suggestions and guidelines. Each condition required parents to implement the intervention for ten to fifteen minutes a day on school days for ten weeks. The analysis showed that there were significant differences between posttest scores on the *Neale Analysis of Reading Ability* for conditions. The pause, prompt, and praise and direct instruction groups both showed larger increases in reading performance. The authors contended that the difference in effectiveness of these conditions could be attributed to the specific instructions and correction procedures included with these interventions. This study suggests that procedures that are structured and specific may be a better choice.

Hook and DuPaul (1999) demonstrated that parents could implement efficacious procedures for special children. They tested the effectiveness of a parent tutoring procedure for children with ADHD. Stories that were used in class instruction for that day were sent home for parents to use in their tutoring procedure. The procedure required parents to listen to and time their children reading for five minutes. Parents were required to correct reading errors during these five minutes and to praise correct reading. After five minutes had elapsed, parents asked their children to read the portion of the passage that had just been completed once more until ten minutes were up. This was the practice portion of the procedure. Finally, parents timed their child reading the same passage for one minute while marking errors. Three training sessions were conducted to teach parents about the tutoring procedure. In the first session, behavior management procedures were discussed, and a reinforcement contingency was set up. Parents were told to use a weekly
chart and to place stickers on it for every completed tutoring session. When a full week of tutoring had taken place, the child was given a reward. Session two was a videotape of a parent and child carrying out the tutoring procedure. In the final session, parents and children completed the procedure with the researcher giving feedback. Treatment integrity was measured by reviewing audiotapes of the sessions. Treatment integrity was 80% or above throughout the study. Curriculum based measures showed an increase in words correctly read per minute for both home and school measures.

A couple of studies have examined parent implemented paired reading interventions in particular. Paired reading is a technique in which the parent and child read aloud together. When the child signals to the parent that he or she wishes to read alone, the parent stops reading and praises the child. The child reads alone until an error is made. The tutor then says the word correctly and begins to read along with the child once more (Miller & Kratochwill, 1996; Murad & Topping, 2000).

Miller and Kratochwill (1996) used a paired reading method as their experimental condition. The parents in this condition were taught the procedure during two group training sessions. Parents were required to implement the paired reading procedure for approximately 10 minutes a day, five times a week, for eight weeks. The control parents were on a wait list and were taught nothing. The experimental parents were asked to audiotape all sessions. Treatment integrity was evaluated by checking a random selection of tapes for correct implementation. Pre and post measures of reading accuracy, rate, and comprehension were obtained by administering the Gray Oral Reading Test – Diagnostic. No significant difference in improvement was found between experimental and control groups. A significant difference was found between improvement scores for
experimental children whose parents returned all eight tapes and matched controls, but they did not significantly differ from the other experimental children. Only 24% of experimental parents returned all eight tapes. Thirty-three percent of the parents returned none, while the rest of the group returned some. This study did not demonstrate paired reading to be a productive parent intervention.

Another inquiry into the paired reading method was carried out in Brazil by Murad and Topping (2000). Parent participants in this study were asked to implement a paired reading session for at least five minutes, five days a week, for eight weeks. At no time was the parent allowed to teach or use phonic instruction to aid reading. Pre and posttest measures were taken on the time a pair took to read a specific book. The time the child spent reading alone and in the pair was separated. These times were used to determine reading fluency and comprehension. Both the experimental and control group improved significantly in reading fluency. The control group and experimental group differed significantly only on the paired reading time with parents. This may be due to the fact that the experimental group had more practice with the technique. Paired readers showed a significant difference in improvement as compared to controls, but only when reading in a pair. Due to the lack of clarity associated with the assessment, the effectiveness of the paired reading intervention remains ambiguous.

A few articles have added scores for generalization from home tutoring performance to school to their primary study (Hook & DuPaul, 1999). Duvall et al. (1992) focused specifically on generalization across time, with follow-ups, and generalization to untutored passages. Unfortunately, they did not detail their training methods, but they did explain the intervention method. Parents were to implement ten-
minute reading sessions after baseline. For the first four minutes, parents listened to their child read a passage and offered praise and corrections when warranted. After four minutes, the children re-read the same portion of the passage about two to three more times. The parent checked the final reading of the passage for accuracy and did not offer corrections this time. A reversal design was used, so after the first treatment phase, baseline was reinstated. Following the second baseline, the second treatment phase was identical to the first. Sessions were taped and checked for treatment integrity.

Generalization measures for passages were obtained by having the children read untutored passages and scoring reading rate. By administering separate passages a few months later, generalization was accessed across time. Increases in correct reading rates were seen in three of the four children. Reading gains as measured by the *Woodcock Johnson Psycho-educational Battery* were shown for all children. It was also reported that generalization was demonstrated for all children at home and increases were apparent at school for three of the children.

The Leach and Siddall (1990) article showed that methods involving instruction and modeling, such as direct instruction and pause, prompt, and praise, were more effective than paired reading or listening to the child read. Studies evaluating paired reading have yet to show overwhelming and convincing evidence for the effectiveness of that method (Leach & Siddall, 1990; Miller & Kratochwill, 1996; Murad & Topping, 2000). Finally, studies utilizing methods similar to the ones supported by the Leach and Siddall (1990) article have shown that gains made at home can generalize across time, passages, and environments (Duvall et al., 1992; Hook & DuPaul, 1999).
Rationale and Purpose

The current study built upon the previous literature and aimed to detail an effective technique based on proven methods. The literature on parent training for reading interventions showed that some training was better than none and that specific training that includes modeling was likely to be the most productive (Anderson, 2000; Edwards & Panofsky, 1989; Faires et al., 2000; Mehran & White, 1988; Taverne & Sheridan, 1995; Thurston & Dasta, 1990). Based on the information obtained from these studies and suggestions by McNaughton, Parr, Timperly, and Robinson (1992) and Toomey (1993), this study used a simple but specific training method that included modeling. The parents were also given a detailed and structured checklist along with precise instructions for the implementation of the intervention. The parents were able to use these materials at home to ensure that the procedure was implemented correctly.

Past studies also suggested that the most effective parent tutoring procedures utilized instruction, reinforcement, modeling, and/or correction methods (Duvall et al., 1992; Hook & DuPaul, 1999; Leach & Siddall, 1990; Love & Biervliet, 1984; Thurston & Dasta, 1990). Noell et al. (1998) demonstrated the effectiveness of combining all these components into a single reading intervention. Two of the three participants showed a significant increase in words correct per minute (WCPM) when reinforcement, modeling, and practice were all employed. These findings were replicated by Noell, Freeland, Witt, and Gansle (2001). The current study used a parent tutoring intervention based on the Noell et al. (2001, 1998) procedure. No previous study on parent reading interventions had attempted to combine all of these elements.
Two additional items were also added to this intervention based on research conducted by the United States Department of Education, NCLB (2002), National Institute of Child Health and Human Development (2000), and Learning First Alliance (1998). This intervention included three of the essential components of reading as identified by the “No Child Left Behind” policy adopted by legislature: phonics, reading fluency, and reading comprehension. This was carried out by adding phonics and reading comprehension to the Noell et al. (1998) intervention.

To ensure that parents were motivated to implement the procedure with integrity, the consultant communicated the importance of the intervention to the parent at the outset. The consultant devised a method along with each individual parent to help him or her to remember to implement the intervention, such as checking off days on a calendar or placing the binders in an area where they would be seen. The consultant held a phone conference with each parent at least once a week during intervention implementation to discuss the child’s progress and any concerns the parent may have had. The consultant also set up a time and location with each parent to drop off raw data weekly. Past studies have shown that when a consultant talks with parents on a regular basis, treatment integrity is usually higher (Hook & DuPaul, 1999; Taverne & Sheridan, 1995).

As shown by Powell-Smith et al. (2000), interventions using either literature or curriculum based materials have not been shown to produce different effects. Therefore, neither has been proven a more desirable method. In this study, curriculum-based materials selected from the children’s reading texts were used.

Finally, based on research concerning measurement of reading fluency, accuracy, and comprehension, curriculum based measures (CBMs) were used to measure progress.
and generalization (Shinn, Good, Knutson, Tilly, & Collins, 1992). Many past parent
reading intervention studies limited measures to pre and post tests (Faires et al., 2000;
Leach & Siddall, 1990; Mehran & White, 1998; Miller & Kratochwill, 1996; Taverne &
Sheridan, 1995; Thurston & Dasta, 1990) and the use of standardized tests has been
common (Leach & Siddall, 1990; Miller & Kratochwill, 1996; Taverne & Sheridan,
1995; Thurston & Dasta, 1990). Marston, Fuchs, and Deno (1986) found that CBMs
showed more student growth than the reading comprehension and language subtests of
the *Stanford Achievement Test* and the vocabulary and comprehension subtests of the
*Science Research Associates Reading Achievement Test*. CBM slopes were also shown to
be more sensitive to treatment effects than pre and post measures taken from the reading
comprehension subtest of the *Stanford Achievement Test* (Fuchs, Fuchs, & Hamlett,
1989). CBMs have been argued to be less expensive and more time efficient than
standardized tests. In addition, unlike standardized tests, frequent measures could be
obtained with CBMs (Elliott & Fuchs, 1997; Madelaine & Wheldall, 1999). Shinn et al.
(1992) found that CBMs were a good measure of reading fluency and comprehension.
CBMs have been found to exhibit criterion validity, construct validity for reading
comprehension, and concurrent validity with other informal measures (Fuchs, Fuchs, &
Maxwell, 1988).

This study’s purpose was to examine whether children would exhibit a significant
increase in reading performance if their parents accurately implemented a structured
reading procedure. If the parents did implement the prescribed intervention with integrity,
it was predicted that the children would show significant gains in WCPM. Finally, these
reading gains were expected to generalize to untutored passages at school and home.
Methods

Participants, Selection Criteria, and Setting

The participants were five children (Matt, Luke, Hailey, Michelle, and Lacey) enrolled in regular education first grade classrooms in southeastern Louisiana. All students attended the same elementary school in a rural area. All children were from families where both parents had completed a high school degree. Two of the participating mothers had completed some college and/or technical training, and two parents (one father and one mother) had received Bachelor’s degrees. All children were of Caucasian race and either age 6 or 7. None of the participants had ever been retained. One child (Matt) was diagnosed with ADHD, which was reported to be controlled by Adderall.

Selection of child participants began at a meeting between five teachers of first grade classrooms and the principal. Before this meeting, the purpose of the study was explained to the principal. The teachers were informed about the study at this meeting and instructed to continue with their usual curriculum. Appropriate days and times for baseline, tri-weekly generalization, and follow-up assessments of the child participants were agreed upon. Finally, teachers were asked to list a student or students in their class that they believed would benefit from parent tutoring at home. Teachers were reminded that children already receiving special reading instruction or being considered for special services should not be included on the list.

After all five teachers turned in their lists, the second part of the selection process was carried out by administering Curriculum Based Measures (CBMs) of Oral Reading Fluency (ORF) to the eight children that were chosen. Before the assessments began, parental consent was received. A note was sent home with the children, and the parents
indicated on the form whether or not their child could be assessed (see Appendix A). All eight children brought back their forms and were assessed. The consultant assessed all eight of the children selected for possible participation in the study using ORF probes that were created using the children’s reading text. The consultant followed a script when assessing the children for participation. Children were assessed separately in a quiet room with no distractions. The consultant designated an empty room at the school for this assessment.

A standardized procedure was used when administering the CBMs (see Appendix B). The child sat beside the consultant, and a CBM was placed on the table for each of them. One was for the child to read, and the other the consultant used to score the child’s reading performance. Scripted explanations were used to tell the children what would be expected. Then, the consultant asked the child if he or she was ready. When the child stated that he or she was ready, the consultant said, “start” and began timing. The child read for one minute, while the consultant marked any errors. Errors consisted of any words misread, skipped, or not read after three seconds. Help was only given when a child did not read a word after three seconds. When this occurred, the consultant said the word and then motioned for the child to continue. When the minute was up, the consultant said, “stop” and took the child’s copy of the CBM. The consultant then told the child that he or she did a good job and scored the probe for words correct per minute (WCPM). WCPM were calculated by counting the total number of words read and subtracting the number of errors. Then, this entire procedure was repeated with a separate probe.
Finally, an oral reading fluency was administered to filter out performance deficits. The consultant performed this assessment in the same manner as the first three (see Appendix C). The major difference was that this time the child was told before reading began what his or her last score was. Then the child was told that if he or she could beat the old score that he or she would receive a reward from the goody box. If, on this probe, the child scored fifteen or more WCPM than the mean WCPM of the other two probes, the child was considered to have a performance deficit and would not be included in the study (Noell et al., 2001). Only children with skill deficits would be considered for this study. A child with skill deficits was defined as one that did not greatly increase his or her ORF score from a standard probe trial to one where reinforcement was available (Noell et al., 2001) and who read less than forty WCPM in grade level materials (Fuchs & Deno, 1982). After this assessment was complete, the consultant or reading specialist took the child back to his or her classroom.

The mean ORF score was calculated using the scores of all three probes given and was taken as the indicator of reading performance. From the mean ORF score, children were selected to participate in the study. Selection was based on the child’s reading level according to the Fuchs and Deno (1982) instructional levels. Skill deficit children who were found to be in the frustrational level (less than forty WCPM) were considered for the study.

None of the children was judged to have performance deficits. Seven of the eight children assessed showed skill deficits and qualified to participate in the study. One of the eight children assessed did not qualify because he read at grade level. He was, therefore, not in need of a reading intervention according to the criteria set for the study.
All children who were assessed received a note home informing their parents about their reading performance. The seven children who fit the selection criteria were also given a form explaining the study and a permission slip to take home to their parents (see Appendix D). Parents were encouraged to contact the researcher if they had any further questions. Six of the seven parents agreed to participate in the study. One of the seven parents did not return the permission slip, so that child was not eligible to continue in the study. After receiving parental consent, the study was explained to the children using developmentally appropriate language.

All parent tutoring sessions took place in the home of the child and parent participants. Only one parent within the home was to implement the procedure. During training, it was stressed by the consultant that sessions should take place in a quiet area with minimal distractions. Parents chose a time each day that fit their schedules to implement tutoring. The tutoring procedure was implemented Monday through Friday for fifteen to twenty minutes a day for fifteen days. After implementing the procedure for a week, one of the six parent participants decided that she could not afford the time needed to implement the procedure and decided to drop from the study. Five of the parent participants (one father, four mothers) implemented the procedure until completion.

Materials

Oral reading fluency probes were used to assess WCPM for participant selection, baseline, tutoring sessions, generalization, and follow-up. These ORF probes were constructed by choosing stories from the elementary school’s first grade story series. The series used was Houghton Mifflin’s Reading: A Legacy of Literacy (2001) for first grade. According to Houghton Mifflin, the books in the series ranged from readability level 1 to
1.5 (first grade level). Probes were chosen randomly for assessments and tutoring from stories with sixty or more words. For several examples of the probes, see Appendix E. In the selection, baseline, generalization, and follow-up assessments, the oral reading fluency probes were only used for progress monitoring.

Most of the parent tutoring materials were located in one of two one-inch binders. Each binder had identifying sheets in the transparent pocket attached to the front cover. The black binder was labeled the “pre-test binder,” and the white binder was designated the “tutoring binder.” The black binder included twenty ORF probes (two each of all twenty, one for the child and one for the parent) for daily generalization measures of untutored passages. Twenty log sheets were also included. An example of the log sheet is available in Appendix F. Located in the front of the binder were tips for sounding out words using common phonetic rules, examples of common letter sounds, and basic comprehension questions. The phonetic tips and common letter sounds sheet were to be used as references by the parent during the practice portion of the tutoring procedure (see Appendix G and H). There were two comprehension question sheets. One consisted of six general questions for narrative text, and the other had three basic questions for expository text. The parents were to choose three of the supplied questions to ask during the comprehension portion of the tutoring procedure (see Appendix I). Also placed in the front of the binder were detailed, step-by-step directions for the daily tutoring procedure (see Appendix J). After the instructions and other daily use sheets, twenty daily performance log sheets were inserted. These logs were used during each daily tutoring session to ensure the integrity of the procedure and monitor the child’s performance. See Appendix K to view requirements that determined integrity scores. The binder also
contained forty ORF sheets constructed from the children’s reading text in the order that they were to be used. They were inserted in a random order. There were two each of all forty probes in the binder, one for the parent to mark, and one for the child to read. Along with the binder, the parents were given digital kitchen timers so that they could time WCPM. They received a small tape recorder and audiocassettes to tape each session. A goody box was given to each parent participant to use as a part of the tutoring procedure. The goody box was a plastic school box that included small trinkets that the child indicated that he or she liked. Some examples of the rewards used were colored pencils and pens, small toys, candy, erasers, stickers, and coupons for certain activities such as computer time, art time, story time, and television time. When meeting with the consultant for training, each parent checked off the goodies he or she felt would be appropriate for his or her child from a list of possible reinforcers. The child was then asked by the consultant which goodies he or she would like to receive from those approved by the parent (see Appendix L). These chosen goodies and activity coupons were the particular reinforcers that were included in the child’s goody box.

Target Behavior Definitions and Data Collection

Reading Performance. This dependent measure was the number of words read correctly in a minute’s time during parent tutoring. The oral reading fluency probes that were used for this measure were adapted from the school’s current first grade reading book. After modeling and practice, this measure was recorded by the parent and noted on the progress-monitoring sheet. Words that were skipped, incorrectly read, or not read after three seconds were considered wrong and marked through. The parent counted all words read and subtracted the number of errors to get the total number of WCPM for
each probe. It was possible to implement two probes in one day. If more than one probe
was implemented, then the average of the scores for that day was calculated by the
consultant.

Generalization to Untutored Passages at Home. This was measured five days a
week before each tutoring session by the parent tutor at the child’s home. ORF probes
constructed from the children’s text were used for this assessment. These passages were
not to be used at any time for tutoring. WCPM was the dependent measure.

Generalization to Untutored Passages at School. This dependent measure was
assessed tri-weekly by ORF probes created using the children’s text. The assessment was
administered by the consultant in a quiet room separate from the classroom. WCPM was
the recorded measure.

Interscorer Agreement. Twenty-eight percent of assessments (selection, baseline,
generalization, and follow-up) were independently scored by a trained graduate student.
Interscorer agreement was calculated by dividing all agreements by the sum of
agreements and disagreements multiplied by one hundred. The overall interscorer
agreement across all assessments was 98.98%. Sixty percent of the participation
eligibility assessments were scored by separate observers, and the interobserver
agreement was 99.25%. For the baseline and school generalization assessments, 25.25%
were examined, and reliability was 98.64%. Finally, 22.22% of the follow-up
assessments were examined, and there was 100% agreement among observers.
Agreement was checked for 17.39% of Matt’s assessments, 43.48% of Luke’s, 37.04% of
Hailey’s, 19.35% of Michelle’s, and 37.03% of Lacey’s. Interobserver agreement for
Matt’s assessments was 98.78%. Luke’s was 99.52%. Hailey’s was 100%. Michelle’s was 97.45%, and Lacey’s was 98.50%.

Acceptability. Acceptability of the intervention was assessed using pre and post data collected with a revised form of the Intervention Rating Profile (IRP-15) developed by Martens and Witt (1982). The scale was revised to apply to parents and reading rather than teachers and behavior problems. The basic questions remained intact. The answers were to reveal how effective and reasonable the parents believed the tutoring procedure to be. See appendix L to view the revised form.

Follow-up. Follow-up measures of WCPM were taken for all participants one week after the end of intervention and again one month later for all participants except Lacey. Lacey’s intervention was not implemented until later in the school year, and school ended before her one-month follow-up assessment could be done. The ORF probes used for this measure were constructed from the children’s text. A procedure identical to that which was used for the generalization to school measures was utilized. The assessments were completed by the consultant.

Procedure

Experimental design. A multiple baseline across participants design was used. Baseline consisted of tri-weekly measures of WCPM as assessed by oral reading fluency probes administered by the consultant. Baseline was conducted until a stable trend was established (at least a week). Following baseline, the parent tutoring procedure was implemented for three weeks and parents recorded WCPM progress. At the same time, tri-weekly measures of progress were taken by the consultant during school time to test for generalization. Finally, follow-up WCPM were measured by the consultant one week
after the termination of the tutoring procedure and again after one month for all participants except Lacey.

Baseline. During baseline, the parent did not receive any training. Baseline assessment was conducted by assessing the child participant using oral reading fluency probes at a teacher preferred time tri-weekly. Baseline assessments were administered by the consultant until a stable trend was apparent. The procedure was much the same as the skill deficit selection assessments. The consultant brought the child into a quiet testing room and sat beside the child. There was the same probe in front of the consultant and the child. The probes were created using the children’s text and used without repeating any probes. The consultant read the child the scripted instructions and asked the child if he or she was ready to begin. When the child indicated that he or she was ready, the consultant said, “start” and began the digital kitchen timer. As the child read, the consultant marked the errors. Errors were deemed words that were misread, skipped, or not read after three seconds. The consultant only helped the child with the word if he or she paused for three seconds. When the minute was up, the consultant said, “stop” and took the child’s paper. The consultant then praised the child for participating and brought him or her back to his or her classroom. WCPM were scored to determine the child’s usual progress over time before the parent tutoring procedure was implemented.

Parent Training. When a child’s baseline was fairly stable, that child’s parent was trained to implement the parent tutoring procedure. Each parent participant was trained separately by the consultant in the same way. The training was done in a quiet room at the school at an agreed upon time. Training generally took about an hour.
Before training began, the consultant explained to the parent the importance of implementing the procedure correctly and as scheduled so that the child would benefit. The consultant also helped the parent come up with a method to ensure that he or she would remember to complete the intervention. Parents chose various ways to help them remember such as marking off completion on the calendar, keeping materials visible, and tutoring the same time every day. The consultant then set up a method to obtain the raw data, go over the child’s progress, and address any questions that may arise during the three weeks of implementation. Some parents were able to meet briefly with consultant in person, but phone check-ups were the most frequent method of communication.

When training began, the consultant showed the parent the ORF generalization binder and explained its purpose. The log sheets and ORF probes were also discussed. The consultant then introduced the contents of the parent tutoring binder. The consultant pointed to the binder’s first page and read over the standardized instructions and implementation order. The consultant told the parent to use this sheet every time she or he implemented the tutoring procedure. Once the parent was familiar with the exact instructions and order, she or he was to use the sheet as a checklist to ensure that every step was being carried out. Once all questions were addressed concerning the instructions, the consultant turned to the second set of pages in the binder. The consultant then went over a brief phonics explanation with the parent. Phonics rules were addressed, and two sheets with these basic rules were included in the parent tutoring binder. Then, the comprehension questions were read and discussed. Next, the consultant turned to the blank progress monitoring sheets. The consultant explained all portions of the sheet and told the parent that it was extremely important that she or he filled out this form.
completely everyday so that there would be a record of the child’s performance. After all questions concerning these sheets were clarified, the consultant showed the parent the ORF probes that occupied the rest of the binder. It was explained to the parent that these were the sheets that would be used for the tutoring procedure and that these sheets were to be kept in order. At this point, modeling began.

The consultant implemented the tutoring procedure with a graduate student acting as the child tutee while the parent watched. Before beginning, the consultant showed the parent how to use the tape recorder and turned the tape recorder on to record the session, just as the parent was expected to. Also, the consultant said the date and “pre-test” into the tape recorder before beginning. The consultant then took two ORF probes and the generalization log sheet out of the black binder. The consultant gave the tutee the copy of the probe without numbers on it and kept the one with the numbers to mark errors on. The consultant explained to the parent that the numbers aided in the counting of total words read. The consultant read the tutee the scripted instructions and then set the timer for one minute. When the consultant started the timer and said “ready”, the tutee began to read. When the timer signaled that the minute was up, the consultant stopped the tape recorder, recorded WCPM and the date on the probe and then on the log sheet in the designated spot. The consultant placed the materials back in the binder and put it to the side.

Next, the consultant opened up the white binder and took out two ORF passages, one for her and one for the tutee. The consultant also removed a progress-monitoring sheet for herself, all the while consulting the written checklist. At this point, the consultant started the tape recorder once again, said the date into it, and said, “tutoring”.

Then, the consultant read the passage to the tutee. The consultant asked the tutee to practice reading the passage aloud. The tutee made several of each possible error so that the parent could see the consultant’s corresponding action. When the tutee made a mistake or paused for more than three seconds, the consultant helped her phonetically sound out the word and then blend it. After the tutee finished practicing the passage, the consultant timed her reading the passage aloud for one minute. The consultant marked through all errors and put a closing bracket after the last word read. The consultant counted all the words read and subtracted the errors from that number to obtain the WCPM. The consultant wrote the date, WCPM on last reading, and WCPM this session on the progress-monitoring sheet. The consultant circled “yes” or “no” on the progress-monitoring sheet to indicate whether or not the previous WCPM score was beaten. The consultant modeled both possibilities. When the tutee beat her score, the consultant praised her. Praise included phrases like: “That’s right!” “Very good!” and “Great job!” Before comprehension questions were asked, the consultant told the tutee to read the passage one last time silently and that she will be asked questions about it. The consultant then asked the tutee three comprehension questions judged to be the most relevant out of the six possible comprehension questions. When the tutee gave a reasonable answer as deemed by the tutor, she was given praise. The consultant then modeled that the tutor should circle “yes” on the progress-monitoring sheet. When the tutee was partially correct, incorrect, or did not respond, the consultant said, “No, that’s not right. The correct answer is (inserted answer here).” It was also modeled that the “no” would then be circled on the progress monitoring sheet, and the consultant asked the tutee to repeat the correct answers. At this point, the consultant turned off the tape recorder.
The consultant explained to the parent that this same procedure would be repeated with different probes for fifteen to twenty minutes a day. The consultant told the parent that he or she could implement two probes in one day if time permitted. The consultant also explained to the parent that if the child beat his or her score at least once during the procedure, he or she would be allowed to choose one goody from the goody box.

After the procedure was modeled in its entirety, the parent was given the opportunity to practice. The parent was also asked if he or she had any questions regarding the tutoring procedure. After all questions were answered, the consultant gave the materials (the binders, audiotapes, recorder, timer, and goody box) to the parent to bring home and provided the parent with a way to reach her so that any additional questions could be answered. Finally, the parent was instructed when to begin tutoring.

Pre-acceptability. Directly after training, the consultant gave the parent the revised IRP-15 to fill out. The consultant explained to the parent that the survey asked questions about his or her current perception of the reading intervention. Then, the consultant left the room so that the parent could complete the survey. After five minutes had passed, the consultant returned to get the completed survey, and the meeting was over.

Generalization to Untutored Passages at Home. Before the tutoring session began, generalization to untutored passages was measured with a new ORF probe. The procedure was to be done in the child’s house in a quiet room with adequate lighting and no distractions. This assessment was administered by the parent once every school day, Monday through Friday just before tutoring. The parent took out the black binder and removed two passages, one for her or him and one for the child. The parent turned on the
tape recorder and said the date and “pre-test”, read the child the scripted instructions, and began timing when the child started reading. The parent drew a line through any errors the child made while reading and marked the last word with a closing bracket. When the timer signaled the end of the minute, the parent turned off the recorder, subtracted the errors from the total number read, and recorded the date and WCPM on the bottom of the probe and on the log sheet.

Parent Tutoring. The parent tutoring procedure was implemented once every school day, Monday through Friday, for fifteen to twenty minutes. The procedure was to be completed in the child’s house in a quiet room with adequate lighting and no distractions. First, the parent took out the white binder. The parent removed two new oral reading fluency passages, one for himself or herself and one for the child from the white binder. The parent also took out a progress-monitoring log sheet for himself or herself. The parent turned on the tape recorder and said the date and “tutoring” into it and then began tutoring. Tutoring started with the parent reading the next designated passage to the child. This part was considered the modeling portion similar to that used by Noell et al. (2001, 1998). After that, the child practiced reading the passage with the parent correcting any mistakes. The parent used the phonic skills taught to him or her during training to help the child sound out and blend the words. When practice was finished, the parent read the child the standardized directions, said, “start,” and set the timer for one minute. The parent marked through any words that were skipped, misread, or not read after three seconds. The only help that the parent could give would be to tell the child the word after a three second pause so that the child could continue. When the timer beeped, the parent said, “stop” and marked the last word read with a closed bracket. At this point,
the parent counted the total number of words read and subtracted the errors to get the WCPM. The parent recorded the date, the last score, and this session’s score on the progress-monitoring sheet. The parent then circled whether or not the child beat his or her last score. If the child beat his or her score, the parent gave the child praise. Praise included phrases like: “That’s right!” “Very good!” and “Great job!” Then, the parent told the child to read the story silently and that he or she would be asked to answer questions about it. Finally, the parent chose three relevant comprehension questions out of the six provided and asked them. If the child reasonably answered the questions, his or her response was considered correct and the child was praised. The parent then circled “yes” under comprehension on the progress-monitoring sheet and the first session was over. If the child was partially incorrect, incorrect, or did not answer at all, the child was told the answers. The parent said, “No, that’s not right. The correct answer is (inserted answer here).” The parent then circled “no” and asked the child to repeat the correct answer.

This process was repeated a second time if fifteen minutes were not up. The parent turned off the recorder after the procedure was complete. When the session ended, the parent allowed his or her child to choose a reward from the goody box if the child beat his or her score at least once during the tutoring procedure. At this point, the tutoring procedure was complete.

Treatment Integrity. Treatment integrity of the parent tutoring sessions was measured by checking the completion of the progress-monitoring log for each day. Each week the parents brought the completed progress monitoring logs, oral reading fluency probes, and audiotapes to the school for the consultant to pick up. The materials were
then picked up by the consultant and examined. If there was no completed progress-monitoring sheet for a particular day, the treatment integrity for that day would be considered 0%. The different portions of the progress monitoring log counted toward the possible 100 points for 100% treatment integrity, so it was possible to receive partial credit. See Table Appendix K for all possible points and the accompanying actions. Also, all tutoring sessions were audiotaped. A random 25% of all tutoring sessions were listened to and checked for correct procedure implementation by the consultant. As long as all procedure steps were completed in the correct order, the tutoring sessions were judged to be correctly implemented.

Generalization to Untutored Passages at School. The consultant monitored each participating child’s progress three times a week. First grade ORF probes were constructed from the children’s text and used for this purpose. The assessments took place in a quiet room separate from the child’s classroom. The consultant retrieved the child from his or her classroom at the designated time and brought him or her to the testing room. The consultant and child sat side by side at a table, and the consultant read the standardized instructions to the child. After that, the consultant asked the child if he or she was ready to begin. When the child was ready, the consultant said, “start” and started the timer. The consultant marked through all errors and only helped when the child failed to read a word after three seconds. If the child did not read a word after three seconds, the consultant told the child the word and motioned for him or her to continue. When time was up, the consultant said, “stop” and recorded the WCPM. The consultant praised the child’s effort by using phrases like: “You worked really hard today!” or
“Good job!” When the assessment was complete, the consultant brought the child back to his or her classroom.

Post-acceptability. After the three weeks of implementation were up and the intervention was over, each parent met separately with the consultant again in the same room in which training occurred. The consultant gave the revised IRP-15 to the parent and asked the parent to fill it out according to his or her perception of the tutoring intervention after having implemented it. The consultant then left the room, and the parent was allowed about five minutes to finish the survey. When the consultant came back, she asked the parent if he or she had any further questions. When all questions were answered, the parent meeting ended.

Follow-up. Follow-up measures were taken one week and one month after the end of parent intervention implementation when possible. Follow-up assessments were administered to each participating child in a manner that was identical to the one used for the generalization to school assessment.
Results

Treatment Integrity

Based on permanent products (progress monitoring log sheets), all parents implemented the tutoring procedure with a mean integrity at or above 82% (range 82% to 100%). Matt’s father implemented the procedure with a mean integrity of 82%. Luke’s mother implemented 96.7% of the procedure on average. Hailey’s mother averaged 100% integrity, while Michelle’s mother implemented at a mean of 99.3%. Finally, Lacey’s mother implemented tutoring with 98% average integrity. Therefore, treatment was judged as being sufficiently implemented by all five parents.

Baseline

Baseline data for Figures 1, 2, and 3 were taken at school. The same baseline data were used for all three figures. Lacey had the highest baseline mean at 41.6 WCPM (range 11 to 80 WCPM). The next baseline mean was Luke’s at 36.3 WCPM (range 22 to 58 WCPM). He showed an upward trend in WCPM towards the end of baseline. Matt’s average for baseline was 29.4 WCPM (range 24 to 35 WCPM). Hailey, Michelle, and Lacey’s WCPM scores were somewhat variable during baseline. Hailey scored a baseline mean of 22.1 WCPM (range 11 to 45 WCPM). Finally, Michelle’s baseline was lowest with an average of 16 WCPM (range 9 to 30 WCPM).

Parent Tutoring Reading Intervention

Intervention effects on WCPM by session across participants are illustrated in Figure 1. There was an overall increase in average WCPM from baseline to treatment for all five children during parent tutoring. However, Luke’s data cannot be interpreted as an
Figure 1. Words Correct per Minute by Session Across Participants for Tutored Passages.
improvement in WCPM due to treatment because of the upward trend at the end of baseline. The other four participant’s baselines remained fairly stable. During treatment, Matt (M = 59.6 WCPM, range 39 to 74 WCPM) and Hailey’s levels of WCPM (M = 51.7 WCPM, range 37 to 84 WCPM) showed a steady increase. Luke (M = 52.9 WCPM, range 34.5 to 74 WCPM) and Lacey’s levels of WCPM (M = 56.1 WCPM, range 35 to 94 WCPM) were both variable in the beginning and then trended slightly upward later in treatment. Finally, Michelle’s WCPM level during treatment (M = 41.5 WCPM, range 23 to 65 WCPM) remained somewhat variable throughout while still remaining above baseline overall.

Generalization to Untutored Passages at School and Follow-up

Figure 2 displays generalization to school for WCPM by session across participants. Generalization to untutored passages at school was not shown for any participant. Both Matt and Hailey showed an average increase in WCPM from baseline. For Matt (M = 40.4 WCPM, range 24 to 70 WCPM), this increase could not be judged as significant based on visual data analysis, which showed variability in generalization phase scores. According to visual analysis, caution should also be used when interpreting Hailey’s WCPM scores (M = 38.8 WCPM, range 30 to 46 WCPM) due to variability in the baseline data. Luke (M = 34.4 WCPM, range 24.3 to 41 WCPM), Michelle (M = 22.2 WCPM, range 5 to 35), and Lacey’s generalization data (M = 40 WCPM, range 24 to 70 WCPM) remained mostly stable from baseline to treatment, showing no significant difference from baseline WCPM. For all assessed participants, a decrease was seen in WCPM at 1 week and 1 month follow-up.
Figure 2. Words Correct per Minute by Session Across Participants for Untutored Generalization Passages at School and Follow-up.
Generalization to Untutored Passages at Home

Figure 3 represents generalization to untutored passages at home data across participants for WCPM by session. For all participants WCPM were variable across sessions. Insignificant drops in average WCPM levels from baseline to treatment were seen for Luke (M = 27.6 WCPM, range 13 to 36 WCPM) and Lacey (M = 37.5 WCPM, range 25 to 56 WCPM). Average WCPM read for Matt (M = 32.8 WCPM, range 17 to 58 WCPM) and Michelle (M = 18.5 WCPM, range 6 to 33 WCPM) increased insignificantly, and remained at levels similar to baseline WCPM. Hailey was the only one to show average gains (M = 36 WCPM, range 14 to 59 WCPM), but the meaning of these average gains in WCPM is unknown due to data variability.

Acceptability

Acceptability levels of the parent reading tutoring intervention were measured after training, before the intervention and after intervention completion. On a rating scale from 1 to 6, the average pre intervention rating of the tutoring procedure by the parents was 5.4. The mean rating of the reading tutoring procedure did decrease post intervention, but it remained fairly high at 5.2. Matt’s father rated the intervention lowest on average both before (M = 4.9) and after (M = 3.8) intervention implementation. Michelle’s mother gave the highest mean rating before implementation (M = 5.7), while Lacey’s mother rated the intervention highest on average after its completion (M = 6.0). On average, Matt’s father and Hailey’s mother rated the intervention lower upon completion, Michelle and Lacey’s mothers rated the intervention higher, and Luke’s mother rated the intervention the same. The average rating for item 4
Figure 3. Words Correct per Minute Across Participants for Untutored Generalization Passages at Home.
(I would suggest this intervention to other parents.) and item 6 (Most parents would find this intervention suitable for the reading skill concerns described.) remained the same from pre (M = 5.4; M = 5.0) to post (M = 5.4; M = 5.0) intervention. The mean rating for item 5 (The child’s reading skill concerns are severe enough to warrant use of this intervention.) increased from pre (M = 4.4) to post (M = 4.8) intervention, while all other item mean ratings decreased.
Discussion

This study was similar to past research in that it aimed to train parents to tutor their children in reading. As in several past studies, it was shown that parents could and would implement reading tutoring procedures (Hook & DuPaul, 1999; Taverne & Sheridan, 1995; Thurston & Dasta, 1990). Also like past research, it was found that the children increased their reading fluency on tutored passages (Hook & DuPaul, 1999).

There are several differences between this study and the past research on parent training and reading tutoring. First, this study was the first to report a father as one of the parent participants. This type of information is important to determine differences between mother and father’s effectiveness as tutors. Second, all parent training was done individually rather than in groups as most studies have done (Edwards & Panofsky, 1989; Faires et al., 2000; Mehran & White, 1988; Taverne & Sheridan, 1995; Wilks & Clarke, 1988). Third, training only occurred one day for each parent and lasted about an hour. Previous studies have suggested that training sessions spanning several weeks are highly effective (Love & Biervliet, 1984; Taverne & Sheridan, 1995), but due to time constraints, this type of intensive training was not possible. Fourth, this study used CBM as the method of assessment and progress monitoring. This differs from past research that has mostly used pre and post standardized tests to determine progress (Leach & Siddall, 1990; Miller & Kratochwill, 1996; Taverne & Sheridan, 1995; Thurston & Dasta, 1990; Wilks & Clarke, 1988). Finally, this study recorded data on generalization to untutored passages at school, home, and follow-up. This was important since only two other published parent reading tutoring studies have even addressed generalization (Duvall et al., 1992; Hook & DuPaul, 1999).
Parents implemented the reading tutoring intervention with integrity based on permanent product examination for results to be examined. Therefore, visual analysis was carried out to determine whether the intervention was effective in increasing WCPM as was hypothesized. Based on average WCPM, all five children increased their reading performance on tutored passages, but based on visual analysis, it could only be determined that four of the five children (all except Luke) significantly increased WCPM on the tutored passages from baseline to treatment with the parent tutoring intervention. This suggests that the intervention itself positively affected WCPM read for tutored passages for Matt, Hailey, Michelle, and Lacey. These data fit with previous findings that show parents can and will implement reading interventions (Hook & DuPaul, 1999; Powell-Smith et al., 2000). These conclusions also replicate the literature examining the effectiveness of this type of reading intervention (Leach & Siddall, 1990; Noell et al., 2001; Noell et al., 1998).

It was hypothesized that if positive effects on WCPM were seen due to the reading intervention, generalization effects would also be seen. Unfortunately, no clear evidence of generalization to untutored passages at home, school, or follow-up was displayed in this study. This does not replicate past parent reading intervention generalization findings (Duvall et al., 1992; Hook & DuPaul, 1999). Duvall et al. (1992) reported that all four children in their study showed generalization at home and that three of the four children also showed generalization to school. By follow-up assessment, they also showed generalization effects across time. Hook and DuPaul reported in their 1999 study that children demonstrated increases in WCPM not only at home but also at school.
The current study was unable to find any clear evidence of generalization to home, school, or across time.

There are several possibilities that could explain why this study’s generalization effects are not similar to past research. First, this may be explained by the file drawer problem. It is possible that only the studies that found generalization effects have been published. Second, this lack of effect could be due to the fact that none of the generalization readings was reinforced with the goody box as the tutoring readings were. If the children had been offered reinforcement for beating their scores on generalization readings, it is possible that they would have performed better. Finally, the wide range of readability levels of passages used in tutoring assessment could have affected learning and/or could have masked progress.

Another purpose of this study was to determine whether parents would implement a reading tutoring procedure with integrity. It is important that interventions are implemented with integrity so that lack of integrity can be ruled out as a factor. Without treatment integrity, results cannot be accurately interpreted (Yeaton & Sechrest, 1981).

Matt’s father stated that the procedure was hard to work around all of Matt’s after school activities, and this caused him to miss the last three days of implementation. He also said that Matt was often tired from his long day by the time tutoring started. Matt’s father also told the consultant that Matt sometimes became hostile when corrected and frustrated when he didn’t beat his score. Evidence of this can be heard when listening to some of Matt’s taped tutoring procedure sessions. It seems that the procedure may have been stressful for Matt and his father. This could have affected performance and learning.
During intervention implementation, Luke’s mother contacted the consultant on several occasions. His mother was concerned that he showed little interest in the tutoring procedure. She stated that she had let him skip the practice section of the procedure multiple times to put an end to his complaining. The consultant suggested offering Luke a special reward (such as time to play his favorite video game) contingent upon completing the tutoring procedure in its entirety without complaint. The consultant talked with Luke’s mom the next day and was told that the suggested reward seemed to work. After listening to all the audiotapes of Luke’s tutoring sessions, it was determined by the consultant that the procedure was not always implemented properly. This could not be seen when examining the permanent products alone, and it was not caught when the consultant examined random audiotaped sessions for correct procedure.

Luke’s mother admitted another error in the tutoring procedure to the consultant. She stated that some days she had been too busy to implement the procedure and had instead implemented it twice or three times in one day to make up for it. She also reported that she had said the scheduled date into the tape recorder and wrote the scheduled date on the progress-monitoring sheet instead of the actual date of implementation so that it would appear that directions had been followed. Finally, the Mardi Gras holidays fell in the middle of Luke’s treatment, and the procedure was skipped those days and made up by adding extra days to treatment. These indeed were limitations in the study.

Hailey’s mother called the consultant often to discuss Hailey’s tutoring progress and the tutoring procedure. When listening to the taped sessions, it sounded as though both she and Hailey enjoyed the procedure. Hailey’s mother was extremely thorough and
carried out the procedure properly. Some days were skipped due to illness, but they were made up later.

When listening to Michelle’s tapes, one can hear that tutoring took place in a less than optimal setting. During some sessions, music and the television can be heard in the background. There were also several distractions from some of Michelle’s siblings. Other than the noise and distractions, it appears that Michelle’s mother followed the procedure directions. After tutoring implementation was complete, Michelle’s mother asked for more passages to read with Michelle on their own time.

Lacey’s mother reported to the consultant that they both enjoyed the tutoring sessions. By listening to the taped sessions, one can hear that Lacey’s mother correctly followed tutoring procedures and directions. Lacey often told the consultant about how much she enjoyed reading with her mother.

It should be noted that Lacey’s tutoring implementation went through the Easter holidays, and there was a whole week where no tutoring occurred. It is possible that this week without tutoring affected overall tutoring progress. Lacey may have read more WCPM if she had three uninterrupted weeks of tutoring.

Future studies should also rely less on permanent products to determine treatment integrity. As seen in this study, permanent products fail to bring to light procedure and order errors that may greatly affect outcome. The use of audiotape and/or videotape to determine treatment integrity would take more resources and time, but the accuracy would be worth it.

There are some limitations noted in this study that could have contributed to the lack of generalization. First, although passages were all taken from the children’s first
grade textbook, these passages were chosen randomly. Upon completion of the study, the passages were ran through the Spache Readability Index, and it was found that readability levels ranged from 1.7 to 4.0. When considering this range, one could question whether the passages were right for building a new reader’s skills. Perhaps not enough of these passages contained words that were salient and common to facilitate generalization. This could explain why the data in Figures 2 and 3 are fairly variable.

Second, contingencies used in this study were not indiscriminable. Children were rewarded from the goody box every time they beat their score during tutoring. During generalization at home and at school, rewards were not offered at all, even if WCPM increased. The children may have learned that they were only rewarded from the goody box when they increased their WCPM score during tutoring and responded accordingly. During generalization assessments, reinforcement through attention was offered more frequently when the child made errors while reading. This also could have inadvertently reinforced children to perform less well.

Finally, it is possible that the parent reading tutoring procedure would have been more effective if carried out for a longer period of time. Three weeks of intervention may not have been intensive enough for these children to pick up all the necessary skills to become a proficient reader.

Taking the studies limitations into account, there are many possible suggestions for improving this procedure for future use. It seems that the procedure may be more beneficial if the passages follow one another in difficulty so that what is learned can be built upon. Children may perform better if all the material used is at a similar and appropriate readability level with repeating words (National Institute of Child Health and
Human Development, 2000). Similar words throughout passages could serve as common stimuli and act as mediators of generalization. Passages with repeating Dolch words could be used to ensure children learn the words they will most frequently come into contact with. Future research could compare the generalizability of these similar passages as compared to random passages across time and environments.

It is possible that this form of reading tutoring would have been more effective if basic phonetic rules were taught that children could have used to figure out words in any given story. To strengthen the reading intervention, different phonetic strategies and specific reading instruction could be added as the primary focus. This type of tutoring would offer children numerous ways to tackle difficult and unfamiliar words. Praise could also be given contingent upon the child’s use of phonetic strategies correctly when sounding out words. Self-mediated stimuli could also be used to facilitate generalization. In this case, the children could be given a set of common phonics rules and examples to carry with them and refer to. More praise and attention could also used to reinforce increases in WCPM and reading well.

In this study, parent acceptability of the reading intervention dropped after implementation. Acceptability remained fairly high, but the reason for the drop should be addressed. Parents should be asked specifically what they like and dislike about this intervention and what can be done to make it more acceptable to them. Also, adding an acceptability measure for the child participants would be useful.

Finally, weekly group parent meetings should be used in place of phone conferences. Phone conferences often were brief and distracted by childcare responsibilities. Group meetings would allow parents to share concerns openly with the
consultant and other participants. Parents could also be required to bring finished weekly
tutoring materials to the group meetings. The meetings would not only be a source of
support but also a reinforcer to implement tutoring with integrity.

Future research in this area should address which components of the parent
tutoring intervention are most important and their individual effects. What’s the best way
to train parents? How can we get parents to implement the procedure with integrity? How
can we increase acceptability? Is this procedure more effective with a certain type of
parents? Does the parent and child dynamic affect the amount of gains that can be made
by reading tutoring? If so, which dynamic fairs best? What type of materials are best to
use – phonics rules, reading passages, storybooks, etc.? These are just a few questions
that need to be answered concerning parent reading tutoring interventions.

In summary, this parent tutoring reading intervention proved to be effective in
significantly increasing WCPM read from baseline to treatment for tutored passages for
four of the five participants. Yet, no clear generalization was displayed for untutored
passages at school, home, or follow-up. The lack of generalization could be attributed to
study limitations such as differing readability levels and lack of reinforcement for
performance. Adding components such as direct phonics instruction, using passages with
similar words and readability levels, reinforcing performance for all progress monitoring
and generalization assessments, and closer consultant monitoring of treatment integrity
are a few suggestions the could possibly strengthen this type of intervention. Many
questions remain about what is the most effective way to train parents and what makes
parent reading tutoring interventions work. Further investigation of parent reading
tutoring interventions and the generalizability of their effects is warranted.
References


Dear Parent,

I am writing to request your permission to assess your son or daughter’s reading skills. Your son or daughter has been nominated by his or her teacher for possible participation in a home-based reading tutoring program. The school principal has approved your child’s participation in this study with your consent. If you agree, an assessment of your child’s reading performance will be performed. The information obtained from this assessment will only be used to determine whether or not your child is eligible to participate in a study examining parental reading tutoring that is being conducted by the Behavior Intervention Team at Louisiana State University. This assessment will not affect your son or daughter’s school grade or standing. The assessment time will be determined along with your son or daughter’s teacher to ensure that no important school activities will be missed. The assessment will only take about ten minutes. During the assessment, your child will read three passages to an assessor.

You will receive a note home detailing your son or daughter’s performance after the assessment has taken place. The results will also be shared with your child’s teacher, but not with anyone else. This note home will let you know whether or not your son or daughter is eligible for further assistance in reading from the Behavior Intervention Team. If he or she is eligible and you choose to be involved in the study, training and materials concerning how you can help improve your child’s reading performance will be offered to you. You may choose not to participate in the study if you prefer. You may withdraw your child from this activity at any time with no penalty to yourself or your child.

If you have any questions about this assessment, please feel free to contact us at your earliest convenience.

Sincerely,

Jennifer L. Resetar
BIT Consultant
Phone Number

George H. Noell, Ph.D.
Associate Professor
Phone Number

XXXXXX
School Principal
Phone Number

BIT Consultant
School Principal
Phone Number

Please Check one

________ Yes, I give my permission for my child’s reading to be assessed.

________ No, I do not have my permission for my child’s reading to be assessed.

Print Name: _________________________________________________________________

Signature: __________________________________________________________________

If you have additional questions about participants rights or other concerns regarding the research component of this activity you can contact: Robert C. Mathews, Institutional Review Board, Louisiana State University, (225) 578-8692.
Appendix B

Oral Reading Fluency Assessment – Skill Deficit

1. Get out the two designated probe sheets for today’s assessment. The probe with the numbers is for you and the probe without numbers is for the child. Write the student’s name, the date, and your initials on your probe. Start the tape recorder and say the date, student’s name, and the type and number of the assessment.

2. Begin the assessment by saying, “I would like you to read a story for me today. When I say, “start,” begin reading aloud at the top of the page and continue across (point while explaining). Try to read each word as best as you can. If you do not know a word, try to sound it out. I will tell you the word if you need help. Do you have any questions?”

3. Set your timer for one minute then say, “Start.” Follow along while the student reads the passage. If the student pauses on a word, wait for 3 seconds and then tell the student the word. Mark through any words that are skipped, read incorrectly, or that you tell the student as an error.

4. When the timer beeps, say, “Stop.” Mark the last word read with a closing bracket. Stop the tape recorder.

5. Fill out the area in the right bottom corner of your probe. Count the total number of words read. Then, count the total number of errors. Subtract the total number of errors from the total number of words read to calculate the words read correctly per minute.

6. Praise the student for his or her effort. You could say, “Thanks for reading to me!” “You worked really hard!” or “You did a really good job!”
Appendix C

Oral Reading Fluency Assessment – Performance Deficit

1. After completing two regular assessments, you are ready for this assessment. Turn on the tape recorder and say to the student, “Now I want you to do some more reading for me, but this time it’s going to be a little different. Last time you read _______ words correctly. This time, if you read more than _______ words correctly, you can pick anything you want out of the goody box.” Open the goody box, and let the student look through it briefly.

2. Ask the student, “Did you see anything in the goody box that you think you may like to earn?” If the child does not seem excited about any of the goodies, you may offer free time, outside time, computer time, or a helper duty.

3. Once you are sure the child is motivated by whatever is offered, say, “When I say, “start,” begin reading at the top of the page and continue across (point while explaining). Try to read each word as best as you can. If you do not know a word, try to sound it out. I will tell you the word if you need help. Do your best reading so that you can beat your score and receive a treat. Do you have any questions?”

4. Set your timer for one minute then say, “Start.” Follow along while the student reads the passage. If the student pauses on a word, wait for 3 seconds and then tell the student the word. Mark through any words that are skipped, read incorrectly, or that you tell the student and count them as errors.

5. When the timer beeps, say, “Stop.” Mark the last word read with a closing bracket. Turn off the tape recorder.

6. Fill out the area in the right bottom corner of your probe. Count the total number of words read. Then, count the total number of errors. Subtract the total number of errors from the total number of words read to calculate the words read correctly per minute.

7. If the student beats his or her score, let him or her select one item from the goody box. In any case, praise the student for his or her effort.
Appendix D

Participation Consent Form

Behavior Intervention Team
Louisiana State University
February 7, 2003

Dear Parent(s),

Your child was found to be eligible to participate in a study that is being conducted at your child’s school by a team from the Department of Psychology at Louisiana State University. When your child was assessed, we found that your child was having difficulty reading and recognizing words that he/she would be expected to be familiar with based on his or her grade. We are examining an approach to helping students improve their reading achievement that involves working with their parents. A parent carries out this intervention for 20 minutes a day, 5 days a week, for 4 weeks. The intervention would require you to read to your child and listen to your child read stories provided for you.

If you agree to participate, you will be taught how to implement the intervention by the consultant from the LSU team. Your child’s principal has approved this intervention with your consent. There are no known risks associated with this study. Any data collected concerning your child will be remain confidential and your child’s name will not be included in any research reports. The LSU Institutional Review Board (which oversees research) may inspect the study’s records. Your child’s records will not be released to anyone outside the research team without your permission. All materials and information will be provided to you and any questions will be answered. The consultant will work with you and monitor your child’s progress at school. You will be able to meet with the consultant weekly to discuss any concerns or questions that you may have. You may choose to withdraw from this study at any time at no penalty to yourself or your child.

If you are interested in participating in this study, please check yes, include a phone number at which the consultant can reach you, and return the bottom of this page to your child’s teacher. The consultant will contact you shortly to set up a meeting at the school to go over the intervention with you. If you have any questions about the study or the intervention, please feel free to contact us at your earliest convenience.

Sincerely,

Jennifer L. Resetar
BIT Consultant
Phone Number

George H. Noell, Ph.D.
Associate Professor
BIT Supervisor
Phone Number

XXXXXXXXX
School Principal
School Name
Phone Number

Check one

________ Yes, I would like to participate in this study and help my child with his/her reading skills by implementing this intervention.

________ No, I would not like to participate in this study. I do not have the required time available to implement this intervention.

Print Name: ___________________________________________________________________________________

Signature: ____________________________________________ Date: _____________________

Telephone number(s) at which you can be contacted: ____________________________________________

If you have additional questions about participants rights or other concerns regarding the research component of this activity you can contact: Robert C. Mathews, Institutional Review Board, Louisiana State University, (225) 578-8692.
Appendix E

Curriculum Based Reading Probes

Moving Day: Baseline 5

This shell is snug. This shell is tight. I will find a shell that’s right. 15

This shell is too big. This shell is too small. Too big, too small, these shells will not do at all. This shell is too long. This shell is too wide. 46

Too long, too wide, too big, too small, these shells will not do at all. 61

This shell is too heavy. This shell is too light. Too heavy, too light, too long, too wide, too big, too small, these shells will not do at all. 75

90

Number of Words Read: _____________________

Number of Errors: __________________________

Number of Words Correctly Read: _____________
Hot Fox Soup – Tutoring Story 1


Number of Words Read: ________________________

Number of Errors: ___________________________

Number of Words Correctly Read: ____________
Once Dan got a box. What can fit in the box? A tan fox can fit. A pig in a wig can fit. A big hat can fit. A lot can fit in the box. Dot got the box. What can Dot find in the box? Dot can find a tan fox. Dot can find a pig in a wig. Dot can find a big hat. A lot can fit in a box.
“Frog,” asked Cat, “what’s up on this fine spring day?”

“I am jumping in mud!” croaked Frog. “Duck,” asked Cat,

“what’s up on this fine spring day?” “I am learning to dive!”

quacked Duck. “Bird,” asked Cat, “what’s up on this fine

spring day?” “I am building a nest,” cheeped Bird. “Pig,”

asked Cat, “what’s up on this fine spring day?” “I am eating

up roots!” grunted Pig. “Bug,” asked Cat, “what’s up on this

fine spring day?” “I am climbing on spring flowers!” said

Bug. “Bee,” asked Cat, “what’s up on this fine spring day?”

“I am looking at hives!” buzzed Bee. “Cat!” buzzed Bee.

“What’s up on this fine spring day?” “I am going home to

nap on this fine spring day!” said Cat.
Appendix F

Tutoring Progress Monitoring Sheet

Please fill out the appropriate blanks and circle the appropriate answers.

Date: ____________

**First probe**

What was the last score? ____________

What was today’s score? ____________

Circle yes or no to indicate whether the old score was beaten: YES     NO

Circle yes or no to indicate whether the comprehension questions were answered correctly: YES     NO

**Second probe**

What was the last score? ____________

What was today’s second score? ____________

Circle yes or no to indicate whether the old score was beaten: YES     NO

Circle yes or no to indicate whether the comprehension questions were answered correctly: YES     NO

**Please circle the appropriate boxes below.**

Was the intervention done today?     YES     NO

Was a reward given to the child today?     YES     NO
Appendix G

Clues For Sounding Out Words

I. Words are made up of consonants and vowels. Consonants usually make one sound with the following exceptions:
   A. The letter [c] can make two sounds.
      1. When the letter [c] is followed by [i], [e], or [y], the [c] makes the /s/ sound.
         For Example: [city] or [cent] or [cyclone]
         *The [i], [e], and [y] are referred to as the stick vowels.
      2. When the letter [c] is followed by an [a], or an [o] or a [u], the [c] makes the /k/ sound. For Example: [cat] or [cot] or [cut]
         *The [a], [o], and [u] are referred to as the round vowels.
   B. The letter [g] can make two sounds:
      1. When the letter [g] is followed by a stick vowel, the [g] makes the /j/ sound. For Example: [gentle] or [giant] or [gyro]
      2. When the letter [g] is followed by a round vowel, the [g] makes the /g/ sound. For Example: [gap] or [got] or [gut]
   C. The letter [y] can act as a vowel or as a consonant.
      1. At the beginning of a word, the [y] acts as a vowel. For Example: [yellow]
      2. In the middle of a word or at the end of a word, the [y] acts as a vowel.
         a. If the [y] comes after a consonant, the [y] either makes the /i/ or the /l/ sound. For Example: [yclone] or [gym]
         b. If the [y] comes after the vowel [a] or [e], the [y] makes the /â/ sound. For Example: [hay] or [they]
         c. If the [y] comes after an [o], it makes the /oi/ sound.
            For example: [boy]
   D. When the letters [l], [r], or [w] follow a vowel, they act as vowels. For Example: [all], [stalk], [toll], [cold], [car], [short], [perch], [dirt], [hurt], [saw], [show], [how]
   E. The letter [q] is always followed by a [u] and makes the /kw/ sound. For Example: [quick]
   F. When the letters [ph] or written together, they make the /f/ sound.
      For Example: [phone]
   G. When some consonants are paired together, one of the consonants is silent. [–mb, mn, kn, wr, gh] For Example: [comb], [hymn], [knee], [wrist], [ghost]
   H. When a word has one vowel, the vowel is a short vowel, and the word ends in the /k/ sound, write [-ck] at the end.
      For Example: truck

II. We call the letters [a, e, i, o, u] vowels. We give them special names because they make special sounds. If we don’t know a word, we need to ask: How many vowels do we see in the word? Is this word a jelly bean word or is this word an elephant word? Do we see two vowels walking and are they a vowel team? Is there a magic [e] in the word that can help the vowel on the left of the consonant say its name?
* The sounds of words are usually controlled by the vowels in the words and the position of the vowels in the word. We mark the vowels to show their sounds.

A. When a vowel makes its long sound and says its name, we mark the vowel by putting a straight line above it. I tell the students that the vowel is making its big, long, grown-up sound, so we put a strong straight mark above it.

For Example: câke

**There are different ways a vowel can be long.**

1. If the word has only one vowel, we need to ask: Is the vowel taking a long walk or a short walk? For Example: hç
   In the word [he], the vowel [e] is taking a long walk, because there is no consonant after it to stop it from taking a long walk.
   * When asking this question, remember the vowel walks just like our eyes move when we read, from left to right.

2. If the word has one of the following vowel teams, the vowel team will create a long vowel sound: ai, -ay for /â/; ee, ea, ie, ey for /ei/; ie for /î/; oa, -ow, -oe for /ô. For Example: [râin], [plâ y], [sç e], [tc ach], [kç y]. [ie] is an exception [piece], [p ie], [bôat], [shôw], [tôe]
   With the vowel teams, remember: When two vowels go walking, the first vowel does the talking and it says its name or its long sound.

3. If the word has the –VCE Pattern, in which the V stands for any one of the five vowels, the C stands for any consonant, and the last letter in the word is an [E]. The vowel in front of the consonant says its name or its long sound and the [E] at the end of the word is silent. The [E] at the end of the word gives all of its magical powers to the vowel that is in front of the consonant.

4. There are special combinations of vowels and consonants that always cause a certain vowel sound to be created. For Example: -eigh =â as in [eight], -igh = î as in [sigh], -ind = î as in [kind], -ild = î as in [wild], -oll =ô as in [toll], -old = ô as in [cold]

B. When a vowel makes its short sound or its baby sound, we mark the vowel by putting a curved mark above it. I tell the students that the vowel is making its short baby sound, so we put a little baby smile above it. For Example: [cã t]

If the word has only one vowel, we need to ask: Is the vowel taking a long walk or a short walk? For Example: [cã t]

In the word [cã t], the vowel [a] is taking a short walk, because there is a consonant after it so it can only take a short walk.

C. There are special combinations of vowels and vowels with consonants that are known as diphthongs. The sign for a diphthong sound is an oval ( ) above the vowels. For Example:

1. [oo] has two sounds, [look] and [boo]
2. [oi] and [-oy] both make the same sound /oi/
3. [ow] and [ou] both make the same sound /ou/
4. [au], [-aw], and [augh] all make the same sound /au/
5. [-ew], [-ue], and [ui] all make the same sound /-ew/

E. In R-Controlled Vowels, the vowel is in front of the [r]. The [r] is polite and lets the vowel go first, but it bosses the sound that they create together. The bossy [r] and the vowel that it bosses are marked with [~] above it. Both [ar] and [or] make the /or/ sound.

[er], [ir], and [ur] are called the triplets and they all make the /ur/ sound. The triplets names are: Gerty, Shirley, and Curly.

III. Sight words/Tricky Words

A. Sight words are words that do not follow the sound rules.
Steps for teaching a sight word:
1) Parent says the word.
2) Parent uses the word in a sentence.
3) Have child repeat the word.
## Appendix H

### Most Common Letter Sounds

<table>
<thead>
<tr>
<th>Letter</th>
<th>Sound</th>
</tr>
</thead>
<tbody>
<tr>
<td>A*</td>
<td>As in apple or apron</td>
</tr>
<tr>
<td>B</td>
<td>As in ball</td>
</tr>
<tr>
<td>C</td>
<td>As in cat</td>
</tr>
<tr>
<td>D</td>
<td>As in dog</td>
</tr>
<tr>
<td>E*</td>
<td>As in egg or eagle</td>
</tr>
<tr>
<td>F</td>
<td>As in fall</td>
</tr>
<tr>
<td>G</td>
<td>As in gold</td>
</tr>
<tr>
<td>H</td>
<td>As in hat</td>
</tr>
<tr>
<td>I*</td>
<td>As in igloo or ice</td>
</tr>
<tr>
<td>J</td>
<td>As in jam</td>
</tr>
<tr>
<td>K</td>
<td>As in kid</td>
</tr>
<tr>
<td>L</td>
<td>As in lion</td>
</tr>
<tr>
<td>M</td>
<td>As in mouse</td>
</tr>
<tr>
<td>N</td>
<td>As in no</td>
</tr>
<tr>
<td>O*</td>
<td>As in octopus or oak</td>
</tr>
<tr>
<td>P</td>
<td>As in pot</td>
</tr>
<tr>
<td>Q</td>
<td>As in question</td>
</tr>
<tr>
<td>R</td>
<td>As in rabbit</td>
</tr>
<tr>
<td>S</td>
<td>As in snake</td>
</tr>
<tr>
<td>T</td>
<td>As in time</td>
</tr>
<tr>
<td>U*</td>
<td>As in umbrella or unicorn</td>
</tr>
<tr>
<td>V</td>
<td>As in van</td>
</tr>
<tr>
<td>W</td>
<td>As in water</td>
</tr>
<tr>
<td>X</td>
<td>As in box</td>
</tr>
<tr>
<td>Y</td>
<td>As in yes</td>
</tr>
<tr>
<td>Z</td>
<td>As in zoo</td>
</tr>
</tbody>
</table>

* Vowels

- Every vowel makes a long and short sound
- When vowels are together, they usually make a long sound.
  - For example: paid, bake, road, broke, speak
- Y can act as a vowel when at the end of a word. For example: boy, say, really
Comprehension Questions for Narrative Text
(Narrative text tells a story; for example, “Goldilocks and the Three Bears”).

1. **Who were the characters in this story?** (The characters are the people or animals that the story is about.) In “Goldilocks and the Three Bears”, the characters are Goldilocks, Mamma Bear, Papa Bear, and Baby Bear.

2. **What is the setting for this story?** (Where did this story take place?) In “Goldilocks and the Three Bears”, the setting is the forest and the bears’ home.

3. **What is the plot for this story?** (What is the action or what is happening in this story?) “Goldilocks and the Three Bears” is about a little girl who goes into the bears’ house while they are not at home. She meddles with and breaks things that do not belong to her. She falls asleep in the bears’ home. The bears come home and are upset to find out that someone has meddled with and broken their things. When baby bear finds Goldilocks, she awakens and runs away.

4. **Has something like this every happened to you or does it remind you of another story you have read or movie that you have seen?** (If the story were “Goldilocks and the Three Bears”, a response might be: My mother always tells me not to meddle with other people’s things.)

5. **Can you think of a different ending for this story?** (If the story were “Goldilocks and the Three Bears”, a different ending might be: Goldilocks apologized for all of the trouble she caused and she got her father to fix baby bear’s chair.)

6. **Did you like this story or not? If you liked this story, what was your favorite part? If you didn’t like this story, why didn’t you? If your friend asked you if you knew of a good story to read, would tell them about this one?**
Comprehension Questions for Expository Text
(Expository text gives you factual information; for example, “Who’s in a Family?”).

1. **What did this story give you information about?** (In “Who’s in a Family?” you learn about the people who make up a family.)

2. **What were three facts or bits of information that this story gave you?** (In “Who’s in a Family?” three facts were: Families can be big or small; Families share love; Families do things together.)

3. **Did you like this story? If you did, tell me why? If you didn’t tell me why not? If your friend asked you if you knew of a good story to read, would tell them about this one?**
Appendix J

Daily Tutoring Procedure Directions

1. **Fill out the date and your child’s last score** in the space provided on the Tutoring Progress Monitoring sheet. Be sure to start a new sheet each day, and use that same sheet for the day’s tutoring session.

2. **Pass out the next reading worksheet** to your child and get out the copy of the same worksheet with numbers for yourself.

3. **Start the tape recorder** and say, “Tutoring” and the date.

4. **Read to your child.**
   During this step, read aloud the reading worksheet to your child. Read several sentences past the number of words that your child was able to read in the previous session.

5. **Have your child practice reading** the worksheet to you.
   If he or she reads a word incorrectly or comes to a word that he or she does not know, give him or her at least 3 seconds to try to read the word by him or herself first. After 3 seconds have passed, help him or her sound it out phonetically. **Don’t forget to use the provided phonics sheet as a guide.**

6. **When you help your child sound out a word phonetically, use one of the following cues** to help him or her figure out the word:
   - Does that look/sound right?
   - What sound/letter does it start with?
   - Point to the word, say the sounds of the letters.
   - Did that match?

7. **Test your child** on this same worksheet for 1 minute.
   - Set the timer for 1 minute
   - If your child incorrectly reads a word, do not correct him or her. Just mark through the word on your sheet.
   - If your child comes to a word that he or she does not know, tell it to him or her after 3 seconds and mark through the word on your sheet.
   - Also, mark through words that he or she skips.
   - After the timer rings, tell your child to stop and mark the last word he or she read with a closed bracket on your sheet.

8. **Count up the total number of words** your child read. Then **count up the total number of errors.** Subtract the total number of errors from the total number of words read to **calculate the number of words read correctly;** this should be done on the bottom right hand corner of your reading worksheet.

9. **Write the total number of words read correctly** on the provided blank on the Tutoring Progress Monitoring sheet.
10. **Circle yes or no** on the Progress Monitoring Sheet to indicate whether or not your child beat his or her last score.

11. **If your child beat his or her last score, be sure to praise** him or her. You can say things like, “Nice reading!” “Very good!” “Great job!”

12. **Ask your child to read the story silently** one more time. Tell him or her that you will be asking questions about the story after he or she is finished reading.

13. After your child finishes reading the story, **Ask him or her 3 questions from the comprehension question page** that you believe apply to the story.

14. **If your child gives reasonable answers, give him or her praise**, saying things like, “That’s right!” “Good job!” and “You got it!” **If your child was partially correct, incorrect, or did not respond**, say, “No, that’s not right. The correct answer is _____.”

15. **Circle yes or no** the Progress Monitoring Sheet to indicate whether or not your child correctly answered the three comprehension questions you chose to ask.

16. **If 15 minutes have not passed, you can repeat the process** once more with the next story. You can complete up to two stories per day.

17. **Circle yes or no** at the bottom of the Progress Monitoring Sheet to indicate whether or not the intervention was implemented today.

18. **Let your child choose one reward from the goody box only if he or she beat his or her score at least once.** (If he or she did not beat his or her score during any of the sessions, he or she will not receive a reward today. If this occurs, encourage him or her to beat his or her score next time so that he or she may choose a goody out of the goody box.)

19. **Circle yes or no** on the Progress Monitoring Sheet to indicate whether or not you gave your child a reward.

20. **The session is complete. Turn off the tape recorder.**
Appendix K

Treatment Integrity

1. The intervention was visibly done at least once today. (Scores are filled in on the Progress Monitoring Sheet.) 50%

2. Filled in the date. 10%

3. Circled yes or no to indicate whether or not the old score was beaten. 10%

4. Circled yes or no to indicate whether or not the comprehension questions were answered correctly. 10%

5. Circled yes or no to indicate whether or not the intervention was done today. 10%

6. Circled yes or no to indicate whether or not the child received a reward. 10%
Appendix L

Reward List

Below is a list of items we generally provide as rewards for hard work. Please look at the list and place a line through any you do not wish to use. All goodies will be provided.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Candy</td>
</tr>
<tr>
<td>2</td>
<td>Chocolate</td>
</tr>
<tr>
<td>3</td>
<td>Pencils</td>
</tr>
<tr>
<td>4</td>
<td>Erasers</td>
</tr>
<tr>
<td>5</td>
<td>Pens</td>
</tr>
<tr>
<td>6</td>
<td>Stickers</td>
</tr>
<tr>
<td>7</td>
<td>Awards</td>
</tr>
<tr>
<td>8</td>
<td>Bookmarks</td>
</tr>
<tr>
<td>9</td>
<td>Small toy</td>
</tr>
<tr>
<td>10</td>
<td>Hair decorations</td>
</tr>
<tr>
<td>11</td>
<td>Colors</td>
</tr>
<tr>
<td>12</td>
<td>Play jewelry</td>
</tr>
<tr>
<td>13</td>
<td>Small game</td>
</tr>
<tr>
<td>14</td>
<td>Small cars</td>
</tr>
<tr>
<td>15</td>
<td>15 minutes cartoon time</td>
</tr>
<tr>
<td>16</td>
<td>15 minutes play time</td>
</tr>
<tr>
<td>17</td>
<td>15 minutes coloring time</td>
</tr>
<tr>
<td>18</td>
<td>15 minutes reading time with parent</td>
</tr>
<tr>
<td>19</td>
<td>15 minutes computer time</td>
</tr>
<tr>
<td>20</td>
<td>15 minutes music or art time</td>
</tr>
</tbody>
</table>
Appendix M

Parent Intervention Rating Profile

Please rate the tutoring procedure along the following dimensions. Please circle the number which best describes your agreement or disagreement with each statement.

<table>
<thead>
<tr>
<th>Statement</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.  This would be an acceptable intervention for concerns about a child’s reading skills.</td>
<td>Strongly Disagree</td>
<td>Disagree</td>
<td>Disagree Slightly</td>
<td>Slightly Agree</td>
<td>Agree</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>2.  Most parents would find this intervention appropriate for reading skill concerns in addition to the one described.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>3.  This intervention should prove effective in improving a child’s reading skills.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>4.  I would suggest this intervention to other parents.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>5.  The child’s reading skill concerns are severe enough to warrant use of this intervention.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>6.  Most parents would find this intervention suitable for the reading skill concerns described.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>7.  I would be willing to use this intervention in the home setting.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>8.  This intervention would not result in negative side effects for the child.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>9.  This intervention would be appropriate for a variety of children.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>10. This intervention is consistent with those I have used at home before.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>11. The intervention was a fair way to handle the child’s reading skill concerns.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>12. This intervention is reasonable for the reading skill concerns described.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>13. I like the procedures used in this intervention.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>14. This intervention is a good way to improve this child’s reading skills.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>15. Overall, this intervention would be beneficial for a child.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
</tbody>
</table>
Vita

Jennifer L. Resetar grew up in Albany, Louisiana. She received her Bachelor of Arts degree in psychology from the University of Louisiana at Monroe in May 2001. She is currently a candidate for the degree of Master of Arts in school psychology at Louisiana State University where she works under Dr. George H. Noell. After receiving her master’s degree, she plans to continue her education and pursue a doctoral degree in school psychology.