

December 11, 2019

**Ontario Human Rights Commission** 

180 Dundas St. West

Toronto, ON M7A 2G5

Dear Commissioner Mandhane,

Re: Right to Read public inquiry

Congratulations on launching the Right to Read inquiry into reading instruction in Ontario's public schools. I am writing on behalf of PONDA (Physicians of Ontario Neurodevelopmental Advocacy) to support the need for substantial improvement and consistency in how reading is taught, particularly to those at risk of learning disabilities.

Children who struggle in school with learning, mental health and behavioural difficulties are often brought to their physician for advice. Frequently, one of the main reasons these children are struggling is a neurobiological difference in how their brains are wired which affects their learning. Most of the time this learning difference affects reading. The frustration and poor self-esteem that results from delayed reading skill acquisition is a big factor in why children are presenting with behavioural and mental health problems. As you are no doubt aware by this point, not all schools screen students to determine who is going to have a hard time learning to read. There is inconsistent provision of evidence-based interventions like SRA or Empower, for those who lag behind with reading development. Some school boards make available an appropriate range of interventions, yet often they are not used early enough, or consistently in all schools. Outdated strategies continue to be used in many school boards, despite scientific evidence of inadequate benefit. As a physician, it is heartbreaking to meet children, sometimes in their late teens, who cannot read, and have significant self-esteem issues, depression, school refusal and poor social engagement. The scientific literature is full of studies showing the health and social outcomes for these individuals often includes unemployment, incarceration, long term mental health problems, addictions, and more.

The good news is that the science is clear on what is effective. In addition, we have excellent tools, including a made in Ontario program, Empower, from the researchers at the Hospital for Sick Children, that has been shown to effectively remediate reading disabilities, especially when used early. This program is used in some schools in the province, including the Demonstration Schools for learning disabilities, to good effect. Sadly, there are many students in the province who do not have access to this intervention, or any other for that matter.



As a developmental paediatrician, I and my colleagues at PONDA have advocated for evidence based reading intervention in a number of ways. This has included advocating directly with school boards, with the Ministry of Education by having a representative sitting on the Minister's Advisory Committee on Special Education (MACSE), and in daily practice with individual patients. I feel our efforts have been helpful, but change is slow. Across the province, system change is needed to ensure consistency in access to appropriate screening, teaching and intervention. This truly is a human rights issue.

From my perspective, these are some of the keys components that need to change:

- 1. The Ontario Curriculum needs to insist on structured literacy to teach reading to all students in all schools in a systematic way based on the scientific research.
- 2. All children should be screened for phonological awareness difficulties in senior kindergarten.
- 3. A tiered approach to intervention needs to be required, (not just suggested as in ppm 8), with early implementation of Direct Instruction using evidence based tools that are available in **all** schools. The Ministry of Education should fund these programs directly so schools cannot claim they are too expensive to implement.
- 4. Teachers need to learn the science of how reading is taught in Teacher's College.

As a wealthy nation, and a society that prides itself on inclusion and equal opportunity, it is inconsistent with our values that we allow this inequitable approach to reading instruction to continue. We have the knowledge and the tools to help thousands of students avoid a lifetime of unnecessary suffering. The time is now to right this wrong.

Thank you for this opportunity. I look forward to reading your report.

Sincerely,

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Developmental Paediatrician

Past Chair, PONDA

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