THE STORM AND STRESS OF ADOLESCENTS WITH READING DISABILITIES: IMPLICATIONS FOR TEACHERS AND PARENTS

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Abstract
Adolescence is a distinct stage of life that has attracted the attention of researchers globally. In 1904, Hall presented the idea of adolescence as a period of storm and stress. Sequel to this idea, increased empirical data caused this notion to stagger. However, the internalizing and externalizing problem behaviours of adolescence indicate that this idea cannot just be discarded in the light of modern psychology. Stress, which is the physical, mental and emotional human response to a particular stimulus, can arise in adolescents with reading disabilities as a result of hormonal changes of adolescence and the increased demands of school. Stress can actually exacerbate signs of learning disabilities that adolescents were able to manage or mask when they were younger. Some adolescents encounter problems with decoding, fluency and comprehension. Others may exhibit motivational issues, behaviour concerns and self-concept problems that may result in dropping out of school. This present paper therefore recognized and described the storm and stress of adolescents with reading disabilities. Teaching and parental role implications of the present concept were discussed. In the same vein, strategies for fostering reading skills of adolescents with reading disabilities at word recognition level, language comprehension and the use of self-regulatory and executive processes were discussed. Above all, it was emphasized that for adolescents with reading disabilities to become competent readers, teachers should provide a balanced reading instruction by ensuring that instruction is explicit, scaffolded and sequenced. Parents should support, encourage and assist adolescents’ reading development by acting as teachers, showing parental love and care, encouraging uptake of challenges and participating in in-school programmes.

Keywords: Adolescence, storm and stress, reading disabilities, teachers’ and parents’ strategies

INTRODUCTION
Adolescence is a relatively short transitional period between childhood and adulthood. From all indications, adolescence is a period of heightened physical, cognitive, socio-emotional, psychological and moral development. Within this time, the individual is supposed to successfully complete all developmental tasks that characterize the passage from child to adult. Lewis (2007) stated that although most authorities believe that adolescence refers to the teenage years from thirteen to eighteen years of age, puberty decides the onset of adolescence therefore, adolescence occurs in some children as early as nine years of age. During adolescence, a growing child experiences considerable acceleration in growth normally known as growth spurt. In addition, adolescence is the period during which the reproductive system matures a process characterized by a marked increase in sex hormones, (Lewis, 2007).

Adolescence has often been depicted as a period of “storm and stress,” a time in development in which behavioural, emotional, and relationship conflicts, especially with parents reach their peak. Reasons for “storm and stress” as first indicated by Hall (1904) and corroborated by the psychoanalytic tradition (Sparknotes, 2012) and Erickson’s definition of adolescence as a time of identity crisis (Businessballs, 2013) have ranged from evolutionary considerations to accumulated life stresses. According to this view, adolescence is characterized as an inevitably turbulent process; accompanied by negative moods, a problematic relationship with parents and risky behaviour, including delinquency (Deković & Buist, 2004; Gecas & Seff, 1990; Goossens, 2006a). Since the 1980s, improved empirical data has caused the view of adolescence as a period of storm and stress to stagger (Arnett, 1999).

Concerned about the veracity of the idea of adolescence as a tumultuous period Arnett (2006) assessed the publication of Hall’s two-volume work on adolescence from the perspective of modern psychology. In his conclusion, Arnett revealed that Hall’s (1904)
views continue to be part of the core knowledge of the field of adolescent psychology, in many areas including the prevalence and sources of depressed mood in adolescence; the rise in crime rates during the teens and specific patterns of delinquency; heightened sensation seeking in adolescence and its relation to risk behaviour; susceptibility to media influences; increased orientation toward peers and relational aggression in girls; and biological development during puberty- among others.

A thorough look at foreign and local examination results has shown the combined effect and enormity of adolescence turbulence and reading disabilities. On the foreign scene, every year, approximately one-third of United States of America (U.S.A) public high school students failed to graduate (Bridgeland, Dilulio, & Morison, 2006). Carbo (2010) stated that many of these students give up on school because they have borderline reading skills that make learning stressful and difficult. On the local scene, Lazarus (2009) noted that the West African Senior Secondary Certificate Examination (WASSCE) and the General Certificate Examination (GCE) ordinary level yearly results released by the West African Examination Council (WAEC) are altogether appalling, (especially, between 2003 and 2008). According to Lazarus (2009) most students’ results fall below the expected standard of five credits and above in English Language, Mathematics and any other three subjects. Thus, the overall picture of adolescent reading performance in Nigeria is not promising and these stakes are even more discouraging among adolescents with reading disabilities.

Furthermore, Bryant, Smith and Bryant (2008) opined that in U.S.A, national attention is now focused on older students who continue to demonstrate problems learning to read sufficiently to be able to read content area textbooks found in the upper primary grades and secondary schools. But in Nigeria no definite step has been taken, in spite of various meetings and discussions by stakeholders in education. Against this background, the present paper is conceptualized to discuss the problem of reading disabilities among adolescents and the stress it produces in the life of adolescents at school, home and community.

**Reading Disabilities and Resultant Stress among Adolescents**

Reading requires decoding, accurate and fluent word recognition, and comprehension at word, phrase, sentence, and text levels. Each student requires fundamental proficiency in the skill of reading if he is going to access the content presented in basic general education curriculum. Failure to read efficiently will result in severe academic achievement deficits especially in the basic academic skills of reading, writing and mathematics. In most cases, such a student lacks the skills and strategies that enable him to effectively process the content information. In classes where the textbook is the major source of information for students, comprehension and vocabulary problems can greatly affect the student's ability to succeed at the secondary level (NJCLD, 2008).

An adolescent with a reading disability demonstrates difficulties in reading skills that are unexpected in relation to age, cognitive ability, quantity and quality of instruction, and intervention. However, the reading difficulties are not the result of generalized developmental delay or sensory impairment (Lundberg & Hoien, 2001; Mather & Goldstein, 2001). For students with a reading disability, the reading difficulties are persistent and attributable to neurological disorders that may remain for the life of the individual.

Reading disability may be characterized by:

(i) Difficulties in single word reading;
(ii) Initial difficulties decoding or sounding out words;
(iii) Difficulties reading sight words;
(iv) Insufficient phonological processing; that is, understanding that sentences consist of words, words are made up of syllables, and syllables are made up of individual sounds and phonemes;
(v) Expressive or receptive language difficulties; and
(vi) Difficulties with comprehension (Saskatchewan Learning, 2004).
Likewise, Lazarus (2009) stated that adolescents with learning disabilities in reading, exhibit substantial deficits in reading comprehension such as slow reading, problem in remembering the gist, facts, and details of text material, as well as trouble interpreting and making inferences about information presented. Reading comprehension results from proficiency in two key reading components namely word recognition and linguistic or language comprehension. Some do not often understand increased vocabulary. Some are not motivated to put forth time and energy to improve their proficiency in reading comprehension. As a result, these students experience difficulty in comprehending difficult and diverse texts.

The special education category of learning disabilities and particularly, specific reading disability makes adolescents prone to all manners of stress and frustration. According to Sincero (2012) stress is the physical, mental and emotional human response to a particular stimulus, otherwise called as ‘stressor’. In addition, Rubenzer (1988) described stress as the psychological and emotional reaction to psychological events. Stress is often experienced as a consistent, exaggerated, and overwhelming sense of urgency, often coupled with frustration. In his opinion, school-related stress is the most prevalent, untreated cause of academic failure in schools.

Hormonal changes of adolescence and the increased demands of school can exacerbate signs of learning disabilities that adolescents were able to manage or mask when they were younger. Once they reach junior and senior school, adolescents with reading disabilities are at increased risk of school failure if the problems are not understood or addressed. Moreover, there is an assumption that adolescents can integrate skills and transfer literacy knowledge to this higher level of thinking without direct intervention. However, many adolescents with reading disabilities transition to secondary education with under-developed language, literacy, and executive functioning skills, and struggle to meet grade-level expectation (National Joint Committee on Learning Disabilities, 2008). Adolescents who continue to struggle with the demands of reading may exhibit motivational issues, behavioural concerns, and self-concept problems that may result in dropping out of school. These students may have limited strategies or techniques for figuring out multi-syllabic words. Strategies for breaking words apart, sounding out the parts, and blending the parts together to read the word may be lacking. Adolescents with reading disabilities may also suffer from self-concept confusion resulting from the vast gap between being able to keep up with the class in some models (for example, oral discussion, group work, artistic and creative expression, and athletics) and discrepantly poor academic performance in other modes (reading, writing, board work, and standardized achievement tests).

Stress in adolescents with reading disabilities can also occur when the adolescent is resistant to instructional support. For example, some adolescents manifest a desire for independence and expression of personal identity, they often resist dependent relationships with adults who are able to provide needed services and support. On the contrary, these students have a compelling need for peer group acceptance and access to peer social interaction. Adolescents on their own part may also reject being singled out in any way from their peers and strive to belong. Perceived social competence, which may be diminished in adolescents with reading disabilities, is a reliable indicator of school success and long term life adjustment and satisfaction (NJCLD, 2008). An adolescent with reading disability can become hesitant to ask clarifying questions because of the fear of drawing further criticism. If such happens, his academic challenge worsens and this may eventually lead to frustration. Some adolescents may get discouraged because of labels (formal or otherwise) attached to them by teachers, other students and even family members. There is also the issue of isolation and rejection associated with being a special education beneficiary. In spite of the position of Heward (2003) that the fundamental, defining characteristic of students with learning disabilities is specific and significant deficiency in the presence of adequate overall intelligence, significant others like parents, teachers and siblings may become insensitive to the needs of adolescents with
reading disabilities. These individuals may choose to treat these adolescents as if they chose not to perform, when in fact they cannot perform at their ability level. Berkowitz (2004) noted that unrelieved, cumulative, physical strain generated by psychological stress can harm the body. He argued that when negative stress becomes excessive or out of control, it becomes harmful. Physically, improved muscle strength may lead to increased muscle contractions and strain. This manifests itself through head and back aches, soreness and stiff necks, digestive problems, and spasms. If left unchecked, increased adrenaline flow can lead to an inability to concentrate, lack of sleep or constant fatigue, an unwillingness to eat or continual hunger, and a variety of nervous symptoms (such as, grinding teeth, tapping fingers and clenching fists). Stress can also cause physiologically behavioural changes such as emotional distress, fear, forgetfulness, panic attacks, general irritability, and either an inability to communicate or excessive talking.

Besides, Rubenzer (1988) enumerated warning stress signals such as: sudden dramatic increase or decrease in effort in school; major change in attitude or temperament (irritability, lack of enthusiasm, carelessness); withdrawal or outbursts; overactive or distracting behaviours (fidgeting, making unnecessary trips to the pencil sharpener or bathroom, nervous tics, jumping from task to task, showing difficulty in concentrating, being prone to accidents, and sighing), complaints of fatigue and vague illnesses; problem with sleeping, headaches or stomachaches; drug use or abuse; increase in allergic or asthmatic attacks; avoidance of school or testing situation by direct refusal or convenient illness (an unnecessary trip to the nurse); loss of appetite or excessive eating, nail biting, refusing to do chores and antisocial or disruptive behaviours.

This study is anchored on Deshler and Hock’s (2006) comprehensive, yet simple theory of adolescent reading which is based on a global view of the reading process. The Adolescent Reading Model depicted in Figure 1 below recognizes and builds in part upon, the significant body of reading research conducted on younger populations under the auspices of the National Institute for Child Health Development (NICHD) (for instance, Lyon, Alexander, & Yafee, 1997; McCardle & Chabara, 2004). Deshler and Hock (2006) explained that this model is a framework for testing the generalizability of the findings for younger readers with an adolescent population and seeks to determine the unique power of specific components of reading for older learners.

Figure 1: Adolescent Reading Model by Deshler and Hock (2006)
Adapted from “Adolescent literacy: Where we are, where we need to go” by D.D. Deshler and M.F. Hock (2006). Shaping literacy achievement. New York: Guilford Publications. Retrieved on February 28, 2009, from www.ldonline.org/article/Adolescent_Literacy:_Where_We_Are_Where_We_Need_to_Go_.

This theory states that a balanced combination of word-level, comprehension and executive process should define the nature of adolescent reading interventions and the process of reading to learn. An initial assumption underlying the model is that although most adolescents have acquired the foundational word recognition and decoding skills associated with early reading instruction depicted in the left portion of Figure 1 (that is, phonemic awareness, decoding, sight word reading and fluency) in materials written at the 3rd grade level, some struggling readers still need intervention in this area. Thus, Deshler and Hock (2006) recognized that instruction for adolescents should include a “Bridging Strategy” that provides explicit instruction and scaffolded support to help struggling readers with word-level interventions that improve word recognition and fluency.

At the same time, and in conjunction with word-level interventions, explicit instruction in language comprehension and reasoning (background knowledge, and syntax, vocabulary) should be provided. This is depicted in the middle portion of Figure 1. Since the role of self-regulating of executive processes is considered a key component of language comprehension in Kintsch’s situational learning model, these theorists included a third component in their reading theory (see the right side of Figure 1) that highlights this important element. Integration of cognitive and metacognitive strategies requires that the reader takes strategic action and puts forth effort to make meaning of the integration of text material and prior knowledge. Thus, reading is an active process requiring word level, language comprehension, and the conscious use of executive processes associated with reading for meaning and learning. The intended outcome of this balanced, interactive model is a significant increase in the reader’s ability to integrate and fuse his or her understanding of text with prior knowledge and apply that new knowledge to novel learning situations (see the bottom portion of Figure 1).

This theory has serious implications for teachers and even parents of adolescents with reading disabilities. When adolescents with reading disabilities fail to acquire word level skills at younger age, achievement stress aggravates. Teachers are therefore enjoined to provide a balanced reading instruction to adolescents with reading disabilities by ensuring that these students master word recognition skills before they proceed to higher reading skills.

Implications of Stress among Adolescents with Reading Disabilities for Teachers and Parents

Teachers of adolescents with reading disabilities often feel frustrated, sad and burned out while teaching adolescents with reading disabilities in their classrooms. Without applying research-based strategies with these students teachers will spend majority of their lesson time dealing with the negative behaviours of adolescents with reading disabilities such as anger, frustration and withdrawal (Carbo, 2010). In this light and given the theoretical framework of this paper, teachers of adolescents with reading disabilities should ensure that they provide explicit reading instruction and scaffolded support so that their students will become competent readers.

Teachers should design reading programmes that are geared to the ability levels of adolescents with reading disabilities. For example, if a 16 year old adolescent is reading at fifth-grade level, reading instruction for that adolescent would be geared to the fifth-grade level. The implication is that just as Deshler and Hock (2006) recommended in their model described above, an adolescent with reading disabilities can be helped to build and/or
improve his word recognition and fluency if he has deficiency in these areas. Then, the adolescent will be given explicit instruction in language comprehension and reasoning. Next, the teacher will provide explicit instruction in self-regulation of executive processes. By so doing, the teacher applies a balanced approach to reading, teaching systematically from word level, to language comprehension, and the conscious use of executive processes associated with reading for meaning and learning.

Many parents of adolescents with reading disabilities go through a lot of emotional disturbances before and after acknowledging that their adolescent is having reading disabilities. Some of them usually deny it when they get to know that their adolescent has reading disabilities from teachers. Sometimes they may be overwhelmed with feelings of anger about the adolescents’ disability.

Moreover, worry and grief often go hand-in-hand with parents of adolescents with reading disabilities. They worry about adolescents’ self esteem, achievement and ability to make it through school and become successful in life. These parent characteristics have implications for teachers and adolescents themselves. No matter the number of emotions expressed by parents they still remain the most powerful influence on adolescent’s literacy development, and when parents are involved in reading programmes, adolescents become better readers. Parents should therefore facilitate actions to support the reading of adolescents at home, school and community.

Recommendations

Having recognized the problem of reading disabilities among adolescents and adolescence as the period of storm and stress, the following recommendations are suggested.

Teachers should endeavour to engage in careful observation and assessment to ascertain adolescents’ reading strengths and weaknesses. Teachers should identify the reading style of each adolescent and present reading programmes that match the reading styles. Teachers should differentiate instruction for adolescents with reading disabilities. Differentiation should be a priority because reading process is complex and adolescents with reading disabilities present variation in their rates and manners of assimilation. Differentiated instruction can be in form of conducting small group reading lessons or individual lessons based on students needs. Furthermore, teachers should integrate reading and writing because they mutually reinforce one another and rely on some of the same cognitive processes.

Moreover, to build adolescents vocabulary and language knowledge, teachers can adopt the reading aloud strategy. Teachers can use game formats, high-interest challenging stories and books to teach students with reading disabilities. Instruction should include hands-on activities, opportunities to engage in reading for authentic purposes, and texts with a clear structure and vivid, concrete examples. It is also essential that teachers communicate the importance of parent involvement to parents, view parents as teaching partners, and understand that even parents with limited education or those who do not speak English are valuable resources.

Parents on their own part should foster their adolescents' reading competence and reduce adolescents' storm and stress by acting as adolescents first and best teachers, read to their adolescents, listen to their adolescents and discuss reading assignments with their adolescents. Similarly, parents should build adolescent's self esteem and spend quality time with them. They should set limits in household behaviours, encourage uptake of challenges, and be available for help in academic and personal affairs. At home, adolescent reading can be enhanced through family literacy activities such as reading newspapers or novels as entertainment, reading TV Guide, writing publications, signing greeting cards, writing and reading e-mails, and communicating with friends and relatives over the Internet.

Parents are implored to demonstrate daily living routines, such as making shopping lists, paying bills, and leaving messages for family members that involve reading and writing.
Parents should participate in in-school programmes such as attending parent-teacher conferences, attending adolescent's extracurricular activities, becoming involved as teaching partners in the classroom, as resource people, and serving on school boards.

Conclusion
Given that adolescence is a transitional stage when growing children experience storm and stress symptoms, the effect of reading disabilities on the adolescent, teachers and family is enormous. This paper therefore has highlighted the turbulence of adolescence, the impact of reading disabilities on the adolescent, warning stress signals, and Deshler and Hock’s (2006) comprehensive adolescent reading model (which indicated that adolescents' storm and stress can be reduced if teachers tailor reading instruction to the ability level of their students and then progress to other reading levels).
Besides, the implications of stress among adolescents with reading disabilities for teachers and parents were discussed and recommendations made.

References

