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REMEDICATION OF PERCEPTUAL DIFFICULTIES

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Inability To Follow Lines of Print

Studies of eye movement during reading indicate faulty directional habits of children who display the following symptoms: repetition of words, omission of words, transposition of words, skipping lines of print, and jerky oral reading. The child's inability to follow a line of print from left to right can be caused chiefly by a lack of adequate experiential background. There may be little in the child's previous experiences to prepare him for this new, and for him, different situation. The child's concepts of up and down, left and right may have been inadequately developed. Incorrect responses may have been reinforced and faulty habits might have been established. Relearning must occur and new and correct habits must be implemented. When children begin to read, they must be taught correct directional orientation. They should be assisted to learn that words are to be observed from left to right and lines of print are to be read from left to right. The teacher must make certain that these directional habits are firmly established at the start of the reading process.

Faulty perception of direction may be modified by the utilization of the following procedures:

- Oral reading of experience charts with sweeping movement of a pointer from left to right.
- Choral reading so as to enhance perception and expression of ideas from left to right. The chorus of voices accentuates the left-to-right flow of ideas.
- Encourage the children to type sentences which they have written. This procedure will motivate and interest children and develop left-to-right movement.
- Tachistoscope exercises making use of words, phrases, and brief sentences. The teacher should show the children where to focus their eyes on the screen or surface used for projection. The teacher explains that the child should look at the projected image from left to right, attempting to get an eyeful at each exposure.
- Reinforce any and all correct responses with praise and commendation.

Faulty Perception of Words

Reversals are common among children at all ages and especially among severely retarded readers. Reversals are symptoms of an inadequate ex-

periential background and of severe eye defects in some cases; in many situations they have been found to be intensified by improper phonetic instruction and structural analysis techniques. Reversals do not cause poor reading but they are related to it.

A visual, auditory, kinesthetic, and tactual approach to word study can be helpful in the remediation of reversal tendencies. The following procedures are recommended:

- Have the child look at the word from its beginning to end. The analysis of the elements within words should be limited to those prefixes, roots, inflectional endings, and suffixes which transmit direct meaning.
- Have the children pronounce the word silently, making certain to associate each syllable with its corresponding sound and being careful that the correct sequence of syllables is maintained.
- Spell the word silently, making certain careful attention is given to each syllable.
- Trace the word with the index finger.
- Write the word.
- Compare the word written with the word selected for study.
- Repeat this process until the word can be spelled and written properly.

Words taught in this fashion should be used in context. The teacher may also use the sound-dictation technique. The child is asked to write words as the teacher dictates the sounds and then rereads those dictated. The technique works in this fashion:

- The teacher says to the children in preparation for the teaching of words, "The words are all short 'a' words."
- The word *man* is pronounced by the teacher.
- It is said slowly so that the child can hear the separate sounds.
- The child then says the word slowly as he writes the letters of each sound.

Some additional suggestions for the teacher include the following:

- Try using games with anagrams.
- Encourage the children to write or print words, phrases, and short sentences on the chalkboard or overhead projector.
- Use the dictionary to establish left-to-right habits.
- Alphabetizing.
- Typing.
- Word beginnings. At all times stress should be placed on word beginnings rather than word endings.
- Avoid analytic techniques. An undue stress on phonetic and structural analysis before the child is sufficiently mature may promote reversal tendencies.
- Visual examination. A possibility of a visual abnormality should be investigated by an ophthalmologist.

Loss of Place and Omission of Words

Some children lose their place when reading. They jump lines and

words, and their reading errors consist of omissions of words, omissions of sounds, reversals, and repetitions. Their perception of what is on the printed page is hindered.

Treatment, following careful diagnosis, may be enhanced by these suggestions:

- Exclude the possibility of an ocular difficulty with an examination by an ophthalmologist.
- Permit children who habitually lose their place to use a liner. This crutch should be eliminated as soon as possible.
- Make the child aware that he often omits words and loses his place by the use of a tape recording of his reading. This can be accomplished by having the child listen to his recording as he silently reads the text.
- Encourage the child to want to improve his reading ability. An awareness of the success he is experiencing can assist.
- Emphasize flexibility of reading rate and not speed. Encourage a slower rate of reading until accuracy is obtained. Some children think that a good reader reads rapidly, as a result, they rush and make mistakes they would not if they read with greater deliberation.
- Encourage the child to increase attention by asking questions and then having the child read carefully for specific answers.
- Demonstrate to the child the degree of progress he is making through the use of a graph. Progress can be shown by the increase in his correct responses. The child must know that he is succeeding.