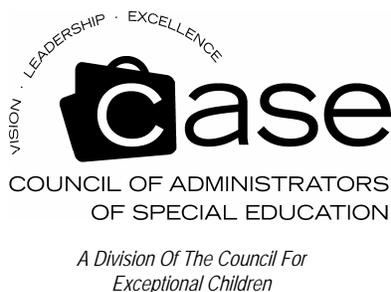


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July 24, 2015

Mr. Michael Yudin, Assistant Secretary
Office of Special Education and Rehabilitative Services
U.S. Department of Education
400 Maryland Ave., SW Washington, DC 20202-7100

Dear Mr. Yudin:

The undersigned organizations urge the U.S. Department of Education Office of Special Education and Rehabilitative Services to use caution in issuing new guidance or directives to schools encouraging use of the terms dyslexia, dyscalculia, dysgraphia or any other medical or mental health diagnostic term within the context of IDEA procedures. Of great concern is the letter sent to you on June 30, 2015, from the Consortium For Citizens with Disabilities.

IDEA procedures are designed to ensure a free appropriate public education is available for all children who are determined to be IDEA eligible. States establish IDEA eligibility criteria for specific types of disabilities as outlined in federal and state statute and regulations. These are educational eligibility criteria rather than a medical or mental health diagnosis of a disease or disorder.

Medical and mental health providers utilize the Diagnostic and Statistical Manual of Mental Disorders (DSM-V) to diagnose medical and mental health disorders. The DSM-V defines the term “specific learning disorder” with three additional descriptors: –“with impairment in reading, with impairment in written expression or with impairment in math.” The DSM-V diagnosis of specific learning disorder with impairment in reading has a note that reads, “Dyslexia is an alternative term used to refer to a pattern of learning difficulties characterized by problems with accurate or fluent word recognition, poor decoding and poor spelling abilities.” Similarly it notes that “dyscalculia” is an alternative term used to refer to a pattern of difficulties characterized by problems processing numerical information, learning arithmetic facts, and performing accurate or fluent calculations. The DSM-V offers dyslexia and dyscalculia as alternatives to describing the learning disorder with additional descriptors of the academic domains and subskills that are impaired. It does not suggest that using these terms is better or even necessary for a medical or mental health diagnosis.

Of most concern is the assumption by some advocates and organizations that including the terms dyslexia, dyscalculia, and dysgraphia in an IEP will “ensure that the interventions goals and objectives outlined in the IEP match with the students’ specific needs.” This implies that a diagnostic label alone dictates instructional programming which is completely counter to the individualization of instruction mandated by the IDEA.



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IDEA does mention dyslexia as an example of a medical or mental health diagnosis that might lead to a determination of IDEA eligibility in the category of learning disabilities along with perceptual disabilities, brain injury, minimal brain dysfunction, and developmental aphasia. However, it is not necessary for schools to include any of those terms in a student's IEP to ensure appropriate services are provided.

Schools must consider medical and mental health diagnoses in their eligibility determinations and instructional programming. However these labels do not provide automatic IDEA eligibility and should not dictate specific instructional methodologies or services, as those must be developed by IEP teams tailored to the unique needs of each student.

We respectfully request any guidance issued by the Department of Education on the use of the terms dyslexia, dyscalculia, dysgraphia or any other specific medical or mental health diagnosis be aligned with IDEA procedures that ensure the unique needs of all students are addressed.

Council of Administrators of Special Education
AASA, The School Superintendents Organization
Association of Education Service Agencies
Learning Disabilities Association of America
National Association of School Psychologists
National Association of State Directors of Special Education
National Education Association
National Rural Education Association
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