The Relationship of Response to Intervention and Systems of Learning Supports

The recent IDEA reauthorization calls for what has been dubbed a "Response to Intervention" (RTI) approach. The intent is to use "well-designed and well-implemented early intervention" in the regular classroom as a way to deal with a student's problems and enhance the assessment of whether more intensive and perhaps specialized assistance (and perhaps diagnosis) is required. That is, the process calls for making changes in the classroom designed to improve the student's learning and behavior as soon as problems are noted and using the student's response to such modifications as info for making further changes if needed. The process continues until it is evident that it cannot be resolved through classroom changes alone.

The approach overlaps ideas about pre-referral interventions but is intended to be more systematically implemented with special attention to enhancing teacher capability to carry out "well-designed and well-implemented early intervention." This approach is meant to minimize inappropriate identification of students who don't need expensive special education. (And, of course, no one wants to misidentify or misprescribe because to do so has many negative consequences.) It also has the potential to build teacher capacity so that similar problems are prevented in the future. (It is important to emphasize that the approach involves specific plans for the "identified" students that are monitored with the teacher and that the approach is absolutely not a delaying tactic in getting students the interventions they need.)

Through this sequential approach, students who have not responded sufficiently to the regular classroom interventions would next receive supportive assistance designed to help them remain in the regular program, and only when all this is found not to be sufficiently effective would there be a referral for special education assessment. (If the problem proves to be severe and disruptive, an alternative setting may be necessary on a temporary basis to provide more intensive and specialized assessments and assistance.)

Implied in all this is that someone is working to ensure (1) classroom teachers have or are learning how to implement "well-designed early intervention" in the classroom, and (2) support staff are learning how to play a role, sometimes directly in the classroom, to expand the intervention strategies if needed. A core difficulty here is that of mobilizing unmotivated students (and particularly those who have become actively disengaged from classroom instruction). If motivational considerations are not effectively addressed, there is no way to validly assess whether or not a student has a true disability or disorder.

From this perspective, if Response to Intervention is treated simply as a problem of providing more and better instruction (e.g., the type of direct instruction described by the National Reading Panel sponsored by NICHD), it is unlikely to be effective for a great many students. However, if Response to Intervention is understood to be part and parcel of a comprehensive system of classroom and school-wide learning supports, schools will be in a position not only to address problems effectively early after their onset, but will prevent many from occurring.

By themselves, Response to Intervention strategies, especially if narrowly conceived, do not address major barriers to student learning. Such strategies must be broadly conceived and embedded in a comprehensive system of learning supports if they are to significantly reduce learning, behavior, and emotional problems, promote social/emotional development, and effectively reengage students in classroom learning. This will not only reduce the numbers who are inappropriately referred for special education or specialized services, it also will enhance attendance, reduce misbehavior, close the achievement gap, and enhance graduation rates.