

## **Position Statement**

### **Irlen Syndrome/Scotopic Sensitivity Syndrome (IS/SSS) and Vision Therapy**

**Concern:** The Clear Creek Independent School District (CCISD) periodically receives requests for assessment/services for Irlen Syndrome (Scotopic Sensitivity Syndrome/SSS) and visual issues (e.g. convergence insufficiency) that “cause” reading difficulty or dyslexia.

**Background and Information:** Our review of the literature shows these conditions lack sound assessment procedures and lead to intervention with little but anecdotal research reported.

Professional standards and State rules\* demand that instruments used to identify disabilities have reliability and validity data available to users. Validity studies must be conducted, and results reported. In addition, Federal law (IDEA regulations at Section 614 and §504 regulations at Section 104.35) require that “Tests and other evaluation materials have been validated for the specific purpose for which they are used and are administered by trained personnel in conformance with the instructions provided by their producer.”

Our attempts to obtain reliability and validity information for the assessment used to identify and prescribe remediation for IS/SSS have been fruitless. No published manual with reliability and validity data for the Irlen assessment instrument exists. Therefore, Federal regulations and professional standards of practice prevent District staff from using the instruments for identifying IS/SSS.

Furthermore, the opinions of two well-known experts in the area of reading and learning disabilities, Dr. Jack Fletcher at the University of Texas Health Science Center for Academic and Reading Skills and Dr. Reid Lyon, Chief of Child Development and Behavior Branch of the National Institutes of Health, concur that Irlen Screening and intervention are not supportable as a practice.

Additionally, evaluation for and treatment of visual causes for dyslexia are not supported by research. The excerpt below is taken from the [Joint Statement—Learning Disabilities, Dyslexia, and Vision](#) published by the American Academy of Pediatrics, Section on Ophthalmology, Council on Children with Disabilities American Academy of Ophthalmology American Association for Pediatric Ophthalmology and Strabismus American Association of Certified Orthoptists (2009):

“Currently, there is no adequate scientific evidence to support the view that subtle eye or visual problems cause learning disabilities. Furthermore, the evidence does not support the concept that vision therapy or tinted lenses or filters are effective, directly or indirectly, in the treatment of learning disabilities. Thus, the claim that vision therapy improves visual efficiency cannot be substantiated. Diagnostic and treatment approaches that lack scientific evidence of efficacy are not endorsed or recommended.”

**Summary and Procedure:** Given the requirements of Federal laws and regulations, the lack of established reliability and validity for the Scotopic Sensitivity Syndrome Screening instruments, and the lack of rigorous scientific research supporting the effectiveness of the interventions for SSS, the Clear Creek Independent School District cannot justify the use of these assessment instruments, nor the expenditure of public funds for the purposes of assessment or intervention related to IS/SSS. The same is true for evaluation and services for visual deficits (e.g. convergence insufficiency) that allegedly cause dyslexia.

See also: [When Educational Promises Are Too Good To Be True](#) (International Dyslexia Association)  
[False Claims Mislead About Dyslexia Treatment](#) (International Dyslexia Association)  
[Dyslexia Assessment](#) (International Dyslexia Association)  
[The Dyslexia Handbook: Procedures Concerning Dyslexia & Related Disorders, 2018 Update](#)  
(Texas Education Agency)

\*American Psychological Association Code of Ethics 9.02(b); National Association of School Psychologists Principles for Professional Ethics IV (C) (2 and 4); Texas Administrative Code at TAC Title 22, Part 21, Chapter 465.16 (b) (1-3).

## Ineffective Treatments for Dyslexia

*Interventions that claim to treat dyslexia in the absence of print are generally ineffective. Claims of ineffective treatments for dyslexia may use terms or techniques described as “brain training,” “crossing the midline,” “balance therapy,” and others. While some treatments may ameliorate condition other than dyslexia, their use for students with dyslexia has not been proven to be effective.*