

The Reading Disease

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"Reading is like an infectious disease: it is caught not taught. (And you can't catch it from someone who hasn't got it...)"

- Christine Nuttall (1983: 1927)

In my own case I was infected very early and managed to infect my first born before her first birthday! No, she was not a child prodigy, nor would she have managed to pass the simplest (grade inappropriate) test for reading. But consider this: she could perform a series of actions corresponding to the text of the story, (Beatrix Potter's Peter Rabbit) no doubt an imitation of my own actions as I read aloud the story to the infant. In a short while she would toddle off to the book shelf stuffed with sundry books of all sorts and unerringly pick out her book. Neither of us is clear about when or how she picked up the actual mechanics of reading. We have complementary memories of experimenting with Doman's 'whole' word approach that was quickly abandoned. In the years that followed, this child seemed to go through her days absorbed in reading, managing chores with one hand while the other held a book. At meal times I invoked my mother's rule for us when we were children, "No reading while eating." As you can see the reading disease has to be managed in order to allow vital functions to take place. It is possible, of course, to combine some of these functions with reading and many times, during my school days, I have wished for little wipers on my spectacles and plastic pages so that I could read in the shower. The challenge for "Reading Infected Persons" (RIP) is to not allow their schooling interfere with their reading. RIPs resort to strategies like reading the novel hidden beneath the thick physics text, concealing magazines within the covers of long notebooks, reading off the textbooks before the start of the new term and thus freeing classroom time for surreptitious perusal of the latest thriller, hiding up the branches of a friendly tree in order to read uninterrupted, disappearing into the bathroom for long stretches...

It is possible for young children to catch the reading infection from various sources - parents, grandparents, relatives, friends and teachers are the most likely vectors of the infection. Libraries and bookstores are veritable incubi of the infection. I present before you a few illustrative case studies that serve to bring home the ease with which resistance to the disease can be overcome - cautionary tales if you like.

A girl, all of four years old, was brought to school and for almost six months remained resistant, despite her parents being carriers and displaying full blown symptoms of chronic infection. The little girl's teacher began a series of phonic exercises to help children with the sound-symbol connection which allowed the infection to take root in the child. Within a span of about three months, the mother reported that the child had refused to enter a certain room in a holiday resort, and on being questioned, she had pointed to the sign above the room that spelt 'GUEST ROOM' and said "Ghost Room - I am scared, mummy!" The leap from symbols to meaning had been made and the disease was well established in the child and progressed rapidly thenceforth.

The next case study concerns a young boy aged five who seemed completely immune to the infection. The immunity in this case seemed to arise from a fascination with television cartoons featuring a character called 'He-Man.' One day, as the child accompanied his mother grumpily to the library, he chanced upon a book featuring the same character and asked if he could borrow the same. The mother acquiesced to the child's request and years of acquired immunity to reading began to erode from that moment on. Fearing that the supply of 'He-Man' books in the library would run out soon, (once infected, the reader has to be supplied with books at a steady pace) the mother wisely persuaded the young boy to pick up another book each time he chose a book related to the series and was able to pre-empt the impending crisis.

Records indicate that this boy moved from series to series, each time persuaded by the mother to choose a book other than from the preferred one as the series began to end.

The last case study that I would like to present also concerns a young boy who seemed to have some sort of natural immunity to the disease. The family had deliberately chosen not to own a television set and there seemed to be no other cause that could be said to be responsible for the immunity. It is of significance to note that, in this instance too, both parents were severely infected. A sibling of the young boy also had caught the disease. The teacher at school could not break down the immunity and perhaps this was because this child would often prefer to play outdoors rather than spend time in the classroom doing phonic exercises. One day, as he wandered into a class of older children, the teacher there happened to point out a bush-chat singing on a fence just outside the classroom window. Entranced, the little boy told his mother about how his teacher had shown him a "bush-chatter." The mother met the teacher and jokingly spoke about the boy's imagination about a bird called a 'bush-chatter,' at which point the teacher showed the mother and the child a picture of the bird from Salim Ali's field guide to birds. The young child asked for the book and was soon able to match the birds that he saw to pictures in the book and would often request the teacher to name them. Before long, he knew the book better than the teacher and could quickly turn to the appropriate page to show his friends a picture of the bird that they had all seen and which the young boy had confidently identified. The desire to read for himself the names of the birds proved much stronger than the boy's immunity and alas, this child too, soon fell prey to the infection. During a follow-up study, it was found that the boy, now a young man, had not quite kept alive his

interest in birds, but was fully infected with the reading disease, which showed no signs of abating.

So, fellow, RIPs, I leave you to ponder these case studies and urge you to document some from your experience so that we may better understand and manage the spread of this contagion.

References:

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