

# A Stroke of Ill-Fate: From Literacy Expert to Struggling Student

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Imagine spending forty years teaching children to read and write, authoring [Phonics in Motion](#) (PIM), a multi-sensory early literacy instructional method, and earning a doctorate under Drs. Tim Rasinski and Nancy Padak. Next, imagine having that proficiency end abruptly, in less than a New York minute. Three years ago, I went from being a literacy expert to waking up in a hospital bed, unable to read or speak. I had suffered a devastating stroke which delivered significant struggles. Yet, it added most profoundly a deepened layer to my understanding about the teaching of reading and writing (not to mention the greatest lesson in humility).

I'd spent my life teaching little ones to read and write with a clear focus on the struggler, and in a moment, I was one of them. Unable to even speak my own name, I started my journey unable to read a kindergarten-level book, had no recognition of the alphabet, and many preschoolers could surely write better than I could.

Although the stroke was massive and wiped out my language center, I've been able to build new pathways within my brain. Luckily, I retained my professional knowledge and expertise, which made me aware of what helped me and what frustrated me. I feel impassioned to share my deepened understanding of the process with teachers, especially those who struggle with becoming literate. *I know firsthand the obstacles and emotional toll the strugglers face. The process is incredibly taxing, and we, as educators, have to get it right.*

Although I could not recall anything about the program I had created, which has helped thousands of strugglers learn to read and write, Phonics in Motion truly saved me. Plus, I was

blessed to have my husband, Lou, and my dear friend, Sally, by my side, both of whom are Phonics in Motion trained teachers. Their teacher approach differed in many ways from the clinical approach at the hospital.

First of all, the therapists were from different departments and were not coordinated in their care. In essence, they delivered isolated skill work. The lessons seemed routine and not geared to my specific level of functioning. For example, I couldn't identify or print the letter S. I started with a somewhat curvy line and ended up at the bottom of the page. The clinical response was to draw isolated lines and curves or work with clay to strengthen my control. On the contrary, the Phonics in Motion teachers integrated multiple skills in the instruction.

Using the *Phonics in Motion* method, Lou drew the Reading and Writing Monster for me on the left and used the Kinesthetic Motion for the Phoneme (KMP) for the sound /s/ and said, "S is so, so silly." Then, he modeled printing the S while using the handwriting story, "S goes to the Monster; comes away and goes right back again." In time, I began to print the letter while absorbing the sound simultaneously. Instead of focusing solely on how to form the letter, the Phonics in Motion writing experiences helped me understand how phonemes related to speaking, reading and writing, and how to begin to map sound to print.

Like many strugglers, my speaking and writing skills were blocked by my inability to hear the sounds and understand that they were basic to language and literacy. Phonemes had no meaning for me. This was as though I was observing a karaoke screen- the sounds of the language were available but there was NO way I could get the tune. No access! Yet, the KMP connected the sound's significance to speaking, writing and ultimately reading. For example, when someone performed the KMP for a sound, such as /s/ while saying the end of the word

“Elyse,” the importance of the phoneme began to make sense. And, I could hold on to it by doing the KMP myself. Otherwise, it seriously disappeared, and I couldn’t retrieve it by myself. The untouchable sounds were unavailable to me for any manipulation, unless I had the Kinesthetic Motions for the Phonemes.

With the knowledge of the severity of my stroke, my neurologist at Mt. Sinai West was astounded by the progress that Phonics in Motion delivered in the first three days of use. Quite frankly, she was shocked– “I have never seen change like this in a patient who suffered from a stroke as severe as yours.” Plus, she noted that I was a unique patient because of my professional knowledge, experience, and ability to critique the remediation -if only by a shake of the head.

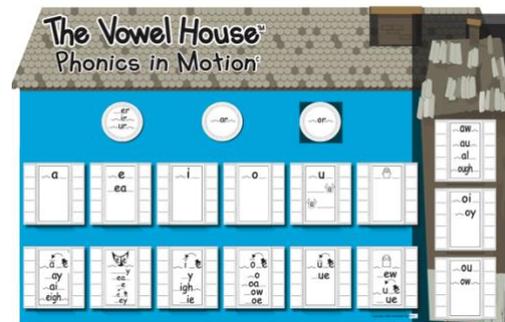
So, we had the green light to continue with our plan, a plan that I would work tirelessly on over the coming year and beyond. I knew that recovery necessitated a developmental approach to auditory processing, starting with the identification of phonemes through the KMPs. This phonemic awareness scaffold, coupled with the PIM handwriting routines, opened up access to phonics, vocabulary, fluency, and ultimately, comprehension.

An overview of my daily remediation sessions with their purposes is outlined below. Following the table, I include some of the emotional implications that affect learning from someone who has personally walked the journey. Our goal was to meet two to three times per day, for about twenty to thirty minutes per session. Of course, this was dependent on my stamina. In addition to using Phonics in Motion in formal remediation sessions, the program is designed to be taught through authentic language. Therefore, I received ongoing review, exposure, and incidental teaching. Again, my hope is to share insights for teachers into the value of providing scaffolds for the learner that are readily available and simple to integrate.

Foundational Skill	My Difficulty	Remediation Strategy	How Often?	Personal Notes
Phonemic Awareness	*Could not hear, identify, or isolate a single phoneme	* Used a distinct multi-sensory concrete marker for each phoneme in all my attempts to say a sound or word. The <a href="#">Kinesthetic Motions for the Phonemes (KMPs)</a> enabled me to identify and isolate phonemes. *Worked with Daily Word Lists (pen/ten; math/mass; weed/wide) * Used the Motions with authentic language to isolate sounds. *KMPs by a tutor for me to imitate	Ongoing (began in ICU after brain surgery)	*I needed a kinesthetic scaffold ; the mouth formation didn't give me the information I needed. *Needed auditory scaffold; I could not retrieve sound. *Later, I could not discriminate between 2 sounds without KMP. * PIM teachers used PIM: I did not remember it.
Phonemic Awareness	*Could not articulate a syllable	*Whole body segmenting and blending (KMPs) *Multi-sensory Segmenting/Blending on the arm with KMPs	Daily/15 min  *When struggling with a word (to this day) *1-2 weeks/tutoring *Ongoing (self-directed)	*I could not segment a syllable into its component sounds for months; I continue to clap words out and use KMPs when stuck in spelling (was a perfect speller before).
Letter ID	*Could not identify any letters	*Used KMPs to pronounce letter name (The name of the letter S is spoken with two phonemes: /ě/ & /s/.	*Month of tutoring with the KMPs	*Letter names were challenging. Using the KMPs clarified the name. (S's name is <i>not</i> /s/)
Phonics	*Couldn't identify language sound  * No speech to print match	*PIM <a href="#">Reading &amp; Writing Monster Handwriting Stories</a> because the sound is embedded in the story. C thinks she's <i>cute</i> ! C goes to the Monster and <i>comes</i> away.	*Ongoing	*Therapist mouthed a letter with no sound. I needed the auditory and kinesthetic scaffold. Once I used the KMP for a while, I dropped it, unless I got stuck. * Doing the KMP allowed me to connect the sound to the symbol

				(Phonics) in a connected way. * Because the KMP was in authentic language, I transferred its use to other examples (the /s/ at the end of Elyse). Then, I used the KMP in reading the name.
Stroking (Support for Letter ID)	*No orientation left to right directionality, where to start, or how to form a letter.	*PIM Reading & Writing Monster Handwriting Stories (animations) and routines	*Daily for a year. One letter per week. Directed, then self-directed with the scaffold of the handwriting story/animation	*Therapist gave me worksheets with tracing lines, but I needed language of the story to direct my stroking. Tracing did not work for me.
Fluency	*Oral speech non-fluent (1-2 word utterances and non-expressive)	<u><i>Nursery Rhymes</i></u> *Poetry text *Tape-Assisted Reading *Repeated Readings  <u><i>Adult poem (Self-selected)</i></u> *Fluency Development Lesson (modified) *Neurological Impress Method *Repeated Reading	*Daily for a year. Directed, then self-directed  *Daily for a year and a half *Fluency Development Lesson (modified) *Repeated Reading	*KMPs used to clarify speech production errors. *Could hear phrasing but could not insert words within the time frame; needed the cue of the KMP  *Lou used KMPs at points of hesitancy helping me engage more fluently. It allows me to concentrate on the meaning and not decoding. *Lou circled sounds for me to indicate I needed to use the KPM as I practiced alone. *Lou marked phrases for me in color.
Reading	*Unable to read	Leveled Books: A-14 (monitoring for text length and complexity) *Neurological Impress Method *Paired Reading *Repeated Reading	*Daily for a year and a half/20 minutes	* We used a short text/book for about 3 days. *Once the text was familiar, I read for fluency practice. (Some were abandoned!)

In addition to the above plan, spelling instruction came later. Once I showed progress with the above sessions, Sally used the [Vowel House](#) to make sure I was hearing and picking out the vowel sounds. The Vowel House is a graphic organizer of the vowel sounds and their various spelling patterns. It is used to teach learners how to make spelling decisions, based on what they hear. It is used to teach, and also by the learner as a scaffold in independent practice. When I get stuck, I use the Vowel House to help me spell daily.



The above chart gives an overview of the work that resulted in what neurologists consider to be shocking remediation. Through this experience as a struggler, I realized the true significance of the following:

1. The journey is complex, and the **workload is remarkably taxing**. I was a frustrated struggler. To this day, shutting down is sometimes easier. To struggle in daily communication is frustrating, exhausting, embarrassing, and it takes real courage and perseverance to continue to engage. Thanks to Phonics in Motion's authentic, engaging, fun, and multimodal learning, I continue to progress. Often, I literally need to sort out phonemes to unlock a simple message; otherwise, I can't gain access- especially if I'm tired. I am no longer hard-wired. Thankfully, the KMPs and the handwriting stories anchor me when I'm on the edge.
2. **My brain needed the kinesthetic motion** to help me become aware that I was actually hearing a distinct speech sound to aid my isolation of the sound. Plus, the use of the

KMPs by others allowed me access without TONS of TALK. Remember, my brain was already tired. I didn't need additional language and directions to apply. I needed a quick and easy way to make connections - reducing the load. The KMP connections mapped new pathways in my brain.

3. Learners **need tangible methods to weave isolated chunks** of knowledge together at the point of difficulty. No matter how hard they work on isolated skills, parts give way. Those individuals need a motion that is loaded with information at their fingertips. Particularly one that starts the brain's process at the phonemic level. That's what PIM does for me daily. It takes nothing to add a scaffold that can be used at the point of breakdown, as opposed to drills that prepare for the problem.
4. **Selective attention is real.** The strugglers' attention might have a different point of focus from the instructors. Often, I focused on a feature while the therapist insisted upon hers. I could not switch, no matter how hard I tried. For example, she stopped in the hospital hallway at the sign saying *stairs*. She wanted me to start reading at the beginning of the word. She kept pointing at her chin while forming an *s* on the mouth. But, I was fixed on the *ai* in stairs and was trying to say, /ā /. Mentally, I was building the word, starting with what was known to me. I couldn't switch to honor her suggestion. Many times I wondered, "Why is my brain ruttid?" What a struggler *knows* and *does* are often two separate things. I knew strategies but could not enact them. This speaks volumes about spiraling experiences as opposed to working in silos. Spiraling means that modeling and practice are available for the learner often and in real-life applications. As teachers spiral experiences, the struggler has many opportunities to grasp the concept when *they* are

ready to attend to it. Plus, the lesson is not one and done but is revisited continually with purpose. Scripted programs alone cannot compete with authentic spiraled teaching.

5. As a struggler, **I deeply appreciated authentic and scaffolded interactions** in which others guided my communication, clarifying and correcting me in the moment. Their patience, commitment, and belief in me brought me back.

In closing, I want to share the importance of self-acceptance because it is critical. Sadly, it is directly tied to expectations from others. My fluency and automaticity are probably never going to be completely normal again. I know that my oral competencies are no measure of my functioning. I continue to be a struggler. Yet, cognitively I am intact. I know how to segment, blend, decode and encode. I've learned strategies and have tools such as the KMPs and the Vowel House to support me in speaking and spelling. And they give me the brain-break and the support I need. They will prop me up for the rest of my life.



Ironically, my stroke impacted the areas of my brain that I had dedicated my life to understanding. Yet, the lessons continue, especially with PIM. I value the obstacles and my developing abilities. However, the reality of being a struggler is unrelenting. We have an obligation to lighten the load with fun and a true commitment to the learner's engagement.



Otherwise, the struggle defines the learner. If it does, the fight for a positive self-perception is the greater burden.

To Dr. Tim Rasinski, I want to extend my heartfelt thanks. PIM's kinesthetic motions laid the foundation for me to speak again, yet understanding the power of authentic language and poetry was a gift from you. Yours and Dr. Nancy Padak's knowledge and experience modeled both the art and science of engaging learners on the path of becoming literate and guided my literacy recovery. I will be forever grateful.

Gratefully,  
Terry Kindervater

For more information about this remediation plan or Phonics in Motion's multisensory teaching method: please visit [www.phonicsinmotion.com](http://www.phonicsinmotion.com), or contact [support@phonicsinmotion.com](mailto:support@phonicsinmotion.com).

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