Dyslexia, reading failure, behavioural problems and more
Understanding the needs our dyslexic children face and how they can be met by parents, teachers and GP’s

Author Biography

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This chapter is dedicated to the kids who set off to school intending to read and write, but falter because of an unexpected learning difficulty, called dyslexia. While it has the potential to steal optimistic futures from children, Australian education has chosen a ‘wait to fail model’ where children with reading difficulty are either not identified, identified too late or subjected to flawed methods of help.

Introduction

“Dyslexia is a specific learning disability that is neurological in origin. It is characterised by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities. These difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede the growth of vocabulary and background knowledge.”

AUSPELD (The Australian Federation of SPELD Associations) believes this definition best reflects current research evidence on the defining features of dyslexia. This definition has also been adopted by the International Dyslexia Association, and the National Institute of Child Health and Human Development.

Dyslexia falls under the broad umbrella of ‘Specific Learning Disorders’ (affecting 15-20% of the population). It is referred to as a learning disability because it can impede life socially, emotionally and academically. Dyslexia affects about 10% of the population, although it is being under diagnosed. That’s two or three children in every Australian classroom and its severity is on a sliding scale. It attempts to explain why a person can do relatively well (even really well because some dyslexics are gifted) in some areas of learning, but encounter unexpected problems in reading, writing and spelling.

The exact causes are not clear, but researchers agree there are structural brain differences in dyslexics that are likely to account for the way the brain develops and functions (Shaywitz, 2005). Dyslexic genes have been identified and the data suggests that if a dad or a mum is dyslexic their sons have about a 75% chance of being dyslexic too, whilst
girls will have a 25% chance. However, current information suggests too many girls are slipping under the radar not being identified.

In the beginning

Ask most littlies as they head off to school what they want. They'll tell you they want to learn to read. Many have watched their mum or dad do it, and most have gained pleasure as they've listened to stories being read to them. Now they want to do it themselves. Soon after starting school they realise their learning is not the same as their classmates. The others scoot through the glorified levelled reading boxes, while they struggle to recall sounds, letters and word patterns. They burn with frustration because they can’t access this highly prized currency. This wasn’t their dream.

A dreadful shame slowly replaces the dream to read and write. A few turn their shame inwards. They disengage and stop trying. Some become sad, withdraw from friends and refuse to go to school. For those with a propensity to act out their humiliation, the script plays out with great speed. They perfect eruptive emotion and errant behaviour. Not being able to crack the ‘print/alphabetic code’ still hurts, but at least they gain recognition for something.

There is now more than enough clinical evidence to show that both male and female dyslexics, carry elevated negative perceptions about their capacity to learn, about themselves and their futures (Burden et al., 2008). The result is heightened levels of behavioural turbulence and mental health difficulties. (Boytes et al., 2016). Every dyslexic can tell you about embarrassing or soul-destroying experiences that have occurred at school. There’s plenty of sadness, anxiety, anger and despair. And, why shouldn’t there be? After all, the myths and inaccuracies about dyslexia still thrive in our community;

“Dyslexia does not exist.”
“There is no way to truly diagnose it.”
“It can’t be diagnosed until a child 8 years.”
“If you’re doing okay at school, you can’t be dyslexic.”
“Can’t be - no one else in the family has it.”
“Face up to it, he’s a slow learner.”
“Face up to it, she’s lazy.”
“Repeating a school grade helps.”
“More reading practice helps.”
“There’s no cure. So why resource or fund it?”
“He’ll outgrow it.”
“They all write backwards or reverse letters.”
“When he tries he can read so it isn’t dyslexia.”

This seemingly invisible condition is too easily misread and underappreciated. Whether or not a child learns to read should not be a matter of chance. Illiteracy and low literacy must not be tolerated any longer.

CASE STUDY; Tim’s story told by his mother, Suzie

“Our Timothy had been very flat for most of the summer holidays, but over the last couple of weeks he cried a lot about having to go back to school. A day did not pass without him questioning why he “really” had to go. With a few days of the holidays left it seemed he had resigned himself to return to school. His younger brother and sister were asleep, Timmy was watching the television in the lounge and I was in the kitchen. ‘Thud.’ A couple of seconds passed. ‘Thud.’ A few more seconds passed. ‘Thud’ is the only way to explain the sound. It was like nothing I’d heard before. ‘Thud.’ It got the better of me, so I went to investigate. Not often did I need to check on Timmy, as we had been blessed with a calm, thoughtful child. I made my way into the lounge, and there I saw Timmy doing a handstand high on the back of the couch.

"Timothy, how many times have I told you and your brother?"
Thud.
"No. No. No. No. Stop!"
He was lifting himself up as high as he could, and then jerked his hands away so his head crunched into the couch seat below. The 'thud' was his feet hitting against the wall helping to propel him with all the more force into the seat. I grabbed him and pulled him onto my lap.

“You could break your bloody neck if you keep doing this!” I screamed.
“I know,” he calmly responded.
“If you know why on earth are you doing it?”
“I don't want to be here. I want to die,” he said staring into my eyes.
He continued, “I don't want to go to school and if I am dead I won’t have to go. You can't help me mum. I'm never going to read”.
I hugged him and sobbed. I couldn't let him go.

Timothy had spent eighteen months in preschool, eighteen months in reception and twelve months in year 1 and had stalled on the readers from the orange box. Each of them had just a word or two to a page. His best friends were beginning to read the Harry Potter books. A few months after this incident Timothy was identified with dyslexia. Timothy was seven and half when he tried to escape the world because he couldn't read.”

To view - https://www.youtube.com/watch?v=xqhTFuDG6KI

**Could what happened to Tim, happen to any child?**

Years ago Rudolph Dreikers alerted us to a poignant fact. When children are not able to achieve an anticipated social status, they climb a “ladder of discouragement” until their faulty logic allows them to believe they’ve reached a status worthy of them (Dreikurs et al., 1998). Each rung on the ladder represents a deeper level of discouragement that drives more complex and worrying behaviours. Tim jumped past the three lower rungs on the ladder; the need to seek attention, the quest for power and control and the desire to seek revenge. He jumped to the highest rung - hopelessness. Feeling this way, he could only see one solution. Tim’s situation highlights our call to duty. Children who are struggling to meet their anticipated social status are reliant on us to show them a way to hop off this “ladder of discouragement.” The research tells us clearly that literacy under-achievement (especially in reading) has high overlap between tricky behaviour, anxiety, disengagement from learning, truancy, reduced physical health, poor self-esteem, depression, suicide and a tendency towards anti-social behaviours and crime in the future (http://www.dyslexia-international.org/the-problem/). Literacy is fundamental to a child’s success, happiness and capacity to participate as a contributing adult member of society.

**What are the tell-tale signs of dyslexia?**

Early on children likely to have dyslexia show problems pronouncing longer words. At first, they might say hos-ta-ble instead of hos-pi-tal. In the beginning it’s cute, but it doesn’t go away and soon becomes socially embarrassing. Word finding difficulties are common too. This is when a child might say, “Mum, it’s outside there, just through the thing.” The thing is in fact, the door. As well, the number of dyslexics with a history of ‘glue ear’ and ear infections is higher. The existence of continuing ear infections in early childhood appears to deliver a major impact on the development of language and literacy. At preschool, or within the first few months of school, good teachers notice the poor association between sounds and letters. The child’s phonological skills do not develop as it does for others. Their reading lacks fluency and speed. They trip over small common words like was for saw, and they for that. They read words that are not there, keep forgetting simple words and lose their place. They sound out syllables as they read, but forget them before they can blend the word together. It is so frustrating for them. Yet, their reading comprehension is often better than their reading.

Some dyslexics can learn for a spelling test and get reasonable results while others struggle to get one or two words correct, especially when they are not grouped in word families. When retested on the same words three weeks later little has stuck! A common observation is that they spell words phonetically making it look so much simpler. In addition, dyslexics have issues with planning, organisation and co-ordination. Some find it difficult to express themselves clearly, or to completely grasp what others mean when they speak. These ongoing language issues can reach well beyond the classroom, and affect social and emotional connections as well as self-image and confidence.
Can a person have more than one kind of learning disability?

Yes, dyslexia may be in the company of;

**Dysgraphia** - a writing impairment. Those with dysgraphia are often slow to learn to write; may experience prolonged letter reversals, produce inappropriately sized letters, mix upper and lower case letters, forget word spaces and produce untidy, spidery and inaccurate bookwork. They just can't seem to get their ideas on paper and the speed of writing is also reduced. Children with dysgraphia may have only impaired handwriting, only impaired spelling (without reading problems), or both impaired handwriting and impaired spelling.

**Dyscalculia** - a mathematical impairment, may be present as well. Indicators include persistent number reversals (e.g. 37 becoming 73), copying inaccuracies and continual misreading of written information so that mathematical outcomes are ruined. These students often say, “that's an add sign, isn’t it? Or is it a multiply sign?” They have difficulty retaining simple formulas, remembering the sequential steps involved in basic maths operations and recalling number patterns, especially the multiplication tables – many will never be able to learn them all.

Interestingly, studies have shown that as many as 60% of those diagnosed with a learning disability have also been diagnosed with ADHD (http://www.dyslexia-add.org/issues.html). We need to be mindful of very real links between dyslexia and other conditions.

What can I do early on if I’m worried about a child’s reading?

Firstly, every parent, auntie, uncle, grandparent, GP, teacher and school support worker needs to become a champion for kids who are experiencing trouble with their reading skills, particularly in the very early years. Let’s do away with adults saying;

“**Oh, don’t worry, his reading will come together.**”

“It’s alright, boys just take longer to read. He’s more interested in building or running about”

“Just let him read at his own level.”

“Read with him more at home.”

When kids are unhappy with school, avoiding reading or struggling with it, we must assume they’re in trouble and need help.

To begin with;

- The earliest option is to contact a speech pathologist for an opinion. Ask, “Do you think my child is dyslexic?” They can complete a language assessment and make a determination and this can be done as early as 3 to 4 years of age. This is the time to begin structured phonological and word attack instruction as a springboard into reading.

- A basic hearing assessment by an audiologist is wise early on. A little later, consider an Auditory Processing Assessment. This can be associated with dyslexia.

- Similarly, organise an appointment with a behavioural optometrist who has a recognised background in dealing with dyslexia. Also ask them to assess for visual attention span and visual stress too.

- Consider a comprehensive psycho-educational assessment with a psychologist skilled in the area of learning difficulties. If this confirms the reading difficulty they will provide you with mainstream ideas to remediate at home and school. Your school may have the resources to organise this for you, or guide you in the right direction if you must do this privately.

- Contact Dyslexia Support Australia (http://www.dyslexiasa.org.au/). It is committed to supporting parents and children whose lives are affected by dyslexia. This group supports organisations such as the Australian Dyslexia Association (ADA), Learning Difficulties Association (LDA), the International Dyslexia Association...
Putting the data together from many studies we see that males and females tend to cope differently with their dyslexia (Alexander-Passe, 2007). Generally speaking, we learn that dyslexic females are prone to suffer inwardly. Issues such as anxiety, poorer self-esteem, subtle avoidance-based behaviours, self-harm and depression are common. Girls often hit a brick wall later on in secondary school, surprising both teachers and parents because they’ve masked the difficulties for a long time. Males, on the other hand, are more likely to get fed-up, give up and disengage from learning/school (Alexander-Passe, 2006). So what’s to be done?

Start by considering their personality and coping capacity. How does this young person feel about having dyslexia? Are they more likely to blame others, let it eat away at them, fall into defeat, or be angry? Are they a positive problem solver? Do they show good determination? And, what about their family’s ability to cope, because a dyslexic child will have a lot to deal with no matter how well things unfold? Are their parents’ positive problem solvers? Does depression or anxiety also run in the family? Does the child really understand what dyslexia is? Do their parents really understand it? Does it run in the family?

Might the short SPEDL course on dyslexia for parents increase their understanding and capacity to be positively involved? Do you know sensible, grounded parents with a dyslexic child you might link them up with? Having a sensible parent who has been through this can be sustaining for parents beginning to find their way. Similarly, linking a child with a teen who is positive and practical, and has long had a dyslexic diagnosis can be a wonderful support. Might you refer them to a psychologist who can counsel the parents and/or the child – even if it’s to set them on the right road with the right kinds of resources, understandings and contacts?

Traditionally, counselling in schools has had a low priority for the treatment of dyslexic children and adolescents. Yet, many students are very receptive to counselling as it helps them to make sense of the issue, forge practical
What does a ‘dyslexia sensitive’ teacher look like?

They’re a delightful mix of ordinary, optimistic, practical and compassionate. These are teachers who initiate sensitive conversations with students;

“Hey, I know you’re dyslexic. Together we’ll make it work”
“Just in case you’re worrying I won’t ever ask you to read in front of the class”
“If you don’t get something just ask me, and if you can’t ask me get your mum or dad to”

These are teachers who make it clear to students that they want to go on the learning journey with them and are keen to discover how they learn best. Teachers who use the words ‘learning preference’ rather than ‘learning disability’. Teachers who choose to make students and parents feel safe, supported and hopeful. Teachers who are able to reassure their student that many dyslexics do really well with their lives, and have a great selection of YouTube clips and past students to reinforce this. They are empathic adults who help young people to recognise their strengths, and then move from what they can do to the things they find more challenging. Dyslexia sensitive teachers actively set up special provisions and work with kids so they understand their entitlements, such as;

- exemption from reading out loud in front of the class
- handouts instead of copying notes from the board
- extra time in tests and exams
- use of word processor in lessons and tests
- use of a calculator in lessons and tests
- work to be marked without penalty in relation to spelling and grammar
- a variety of assessment options – private discussions, PowerPoint, a reader or a scribe in tests and so on

They also teach students how to break their work down into manageable chunks so they can find a way into it, and get to the end of it, because anxiety, procrastination and disorganisation are often a big part of this condition. Dyslexia sensitive teachers never delay the introduction of assistive technology (Go to services/SPELD SA blog http://speldsa.wordpress.com/). They know these kids learn differently, and no matter how well they are taught many will never cope with rudimentary reading, spelling and writing skills. These students excel when taught how to use some of the brilliant little organising options in smartphones; from taking photos of task sheets, homework, formulas or notes on the white board to recording (video and audio) the teacher giving specific information. Also consider;

Free Natural Reader Version 11 - talks text from anywhere out loud to listen to - simple and free!
Free 7 Sticky Notes - great way to help students plan, stay on task and remember
Speak Selection tool on smartphones, iPhones, iPads and iPods - it can speak from any text and can gather information from web pages
Dragon Speaking Naturally Premium Edition - voice recognition software remains tricky to train, but can be brilliant!
Audacity - free recorder to record ideas, teacher instructions or to record assignments
Echo Smartpen - wirelessly transfers written notes and audio to a computer or tablet

Not only do these options allow young learners to access their higher level thinking skills more easily, but they help to buoy motivation as well.

What do ‘Dyslexia Friendly Schools’ look like?

A number of ‘Dyslexia Friendly Schools’ with ‘Dyslexia sensitive’ staff do exist here in Australia even though dyslexia is not recognised as a legitimate disability and does not attract funding or resourcing in most Australian states. However, these schools with committed leadership and skilled staff, offer a beacon of hope to dyslexics and to
those with different learning preferences. But, you’ll have to do your homework and get out there and hunt them down! A good place to start is to contact the SPELD Association in your city. They'll be able to supply you with some good leads because these kinds of schools and educators quickly develop valued reputations.

Keep in mind that ‘Dyslexia Friendly Schools’ do not need to be exclusive or showy. Actually, ‘Dyslexia Friendly Schools’ work for students because dyslexia is understood and talked about in positive ways. There’s no stigma about having a different learning preference and requiring other ways of expressing and retrieving information. These are educational environments where the hurdles students face are openly acknowledged, and ways are actively found to help them learn, progress and succeed.

What you’ll find are teachers who’ve chosen to participate in specialised training about how to teach reading and spelling, how to compensate for poor memory and organisation, and how to help kids attack text successfully. In South Australia, a group of educational leaders and proactive parents have united to form, ‘Dyslexia SA’ (http://www.dyslexiasa.org.au/). They train staff in schools to become ‘Dyslexia sensitive’ helping their school to achieve the ‘Dyslexia Aware School Quality Mark’. In ‘Dyslexia Friendly Schools’ quality reading instruction isn't confined to the early learners. It’s continuous, with appropriate and targetted reading programs capturing young teens as well.

Parents in ‘Dyslexia Friendly Schools’ are, as a matter of course, provided with mainstream information about dyslexia and how they can work with the school to support their child. The progress of students is continuously tracked and shared with parents to ensure no student slips through the cracks. As well, there's encouragement and training so students feel confident to access text-to-speech and predictive typing software.

What’s special about teaching a dyslexic to read?

There is a gold standard approach to teaching reading. And, when we use this many more students, dyslexics and non-dyslexics, will find reading success. Australian teachers, for the most part, are not aware of this. This is not a criticism about the dedication of teachers, but a comment on the deep systemic failure to impart what has long been in the reading research to teachers.

Dyslexic children require a specific kind of reading instruction. The Orton-Gillingham Multisensory Method was developed in the early 1930's by Samuel Orton and Anna Gillingham, and provides a legacy as an effective dyslexia treatment. It provides a focus on:

- explicit training in phonological awareness
- strong emphasis on decoding, or word work
- the reading of progressively more difficult texts incorporating the skills taught
- the practice of reading attack and comprehension strategies while reading texts

There are many, but here are a few really useful programs worth exploring for use at home and school.

3. Wordshark 5 and Numbershark 5 - http://www.wordshark.co.uk/ (software)
10. Rapid Reading - http://www.pearsonschoolsandcolleges.co.uk/Primary/Literacy/Scotland/RapidReading/RapidReading.aspx

The truth is nothing has changed since an Australian Government Inquiry into the Teaching of Reading in 2004 (Department of Education, Science and Training, 2005). It concluded, all students benefit from methods that explicitly teach reading. Methods that highlight the relationship between phonology and orthography in language
that help students to ‘break the code’ and master text-attack skills to aid in comprehension. This of course is the gold standard legacy Orton-Gillingham has left us with.

As a parent, can I teach my child to read?

Yes, you can. Specialist early intervention, usually with a skilled teacher or speech pathologist, has been a well-trodden path for families in Australia. It’s a great way to go, but takes a big commitment and can be expensive. The heartbreak is that quality reading remediation has had to be sourced outside of school systems simply because it has not been available in most schools. This is a big barrier against reading success, and it’s morally unforgiveable.

These days, an increasing number of parents are researching how to teach their dyslexic child to read, and it doesn’t take them long to discover the evidenced based programs mentioned above. Some parents embark on teaching their children independently. Others decide to work with a skilled teacher or speech pathologist and use them as a coach, while using a recognised reading program to reinforce and stimulate their child’s learning.

A word of warning

Not everything that glitters is gold! There is a group of aggressively marketed programs (often computer based) claiming to “rewire the neural language circuits” and alleviate dyslexia, Autism, ADHD and more. Sadly, a few have ended up in schools, and by doing so, they have morphed into looking as though they have some legitimacy. They continue to con teachers, parents, allied professionals and children despite independent studies showing they have very poor or no transfer effects. If in doubt about the effectiveness of any program or intervention visit the ‘Macquarie University website - MUSEC Briefings’ for the FACT SHEETS.

A final word

“It is easier to build strong children than to repair broken men” (Frederick Douglass, 1817-1895)

Perhaps this sounds whimsical, but it is wise to coach children to accept their learning preference or difference. After all, it will always exist. This is a much better option than leaving a child wishing they were dead because the emotional burden of dyslexia feels too heavy to carry. Help them to see their strengths, find interests, satisfaction and feel hopefulness.

We need to see the success of our dyslexic students as a litmus test about the quality of reading instruction within schools. Sadly, international assessment programs, such as PIRLS, provide evidence of declining literacy and numeracy standards in Australia (Meeks et al. 2014). The number of students achieving at the lowest proficiency levels is unacceptably large and compares unfavourably with many other countries participating in these assessments. Clearly, we are failing our children. It remains unacceptable that such a significant number of Australian children can barely read and write. It is a national disgrace. When we truly get our ‘reading practice’ right for dyslexic students, we’ll get it right for all students.

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