

Dyslexia Basics

Dyslexia cannot be "cured." Remnants of the language problems will be seen in adulthood, but "successful individuals with dyslexia have developed resilient personalities with the ability to quickly bounce back or recover from stressors, frustrations, and failures due to a personal resolve to persevere in spite of academic/social obstacles." (Dyslexia and Reading Difficulties—Research and Resource Guide for Working with All Struggling Readers [2005], C. Spafford and G. Grosser, p.6)

The State of Texas defines dyslexia as "...a disorder of constitutional origin manifested by a difficulty in learning to read, write, or spell, despite conventional instruction, adequate intelligence, and sociocultural opportunity. ...The primary difficulties of a student identified as having dyslexia occur in phonemic awareness and manipulation, single-word decoding, reading fluency, and spelling. Secondary consequences of dyslexia may include difficulties in reading comprehension and/or written expression. These difficulties are unexpected for the student's age, educational level, or cognitive abilities. Additionally, there is often a family history of similar difficulties." (Dyslexia Handbook 2007,2010)

If we are looking at the possibility that the child is dyslexic, the following are what we consider and what we test. Dyslexia is a phonological linguistic deficit (a learning disability characterized primarily by reading difficulties at the word level), so we test for levels of phonological awareness and rapid naming. If these areas are weak, they are manifested by slow or labored word reading (particularly with words in isolation) and poor reading fluency. Additionally, we test for spelling because when found in combination with weak phonological awareness and rapid naming, it is a viable marker for dyslexia—although it is not considered a characteristic when weak spelling is the only difficulty. Testing for levels of comprehension and vocabulary are also used as part of the battery of tests administered to identify dyslexia because both of these areas can be secondarily impacted in children with dyslexia.

Another critical factor that we consider when determining dyslexia is the fact that these signs are unexpected for the individual's age, educational level, or cognitive abilities (ability to learn in the absence of print). In addition, since it has been found that dyslexia is a strongly inherited trait (Muter, 2003), we also ask parents if any other member(s) of the family has been diagnosed with dyslexia or has had unexplained reading problems. It is always important to remember that dyslexia is not a "disease" and cannot be "cured."