Dyslexia - Parent Guide
Fact Sheet

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**Dyslexia**

Dyslexia is a neurological disability that affects the language system and the development of literacy skills. It is defined as a specific learning disorder, more specifically a reading disorder. It is characterised by problems with spelling, accurate or fluent word recognition, working memory, processing speed, rapid automatic naming, reading comprehension, phonological decoding and weak phonemic awareness.

As a general guide if your child is not making realistic gains in reading it is worth investigating. The single most important action in regard to children with reading difficulties is early remediation with evidenced based literacy instruction. Implementation of intervention should not be delayed for diagnosis. Remediation of Dyslexia is best practise reading instruction for all students. The wait to fail approach to identification sets children up for failure. Delaying identification and intervention can lead to a range of persistent and secondary issues and children will fall further behind.

Dyslexia is difficult to diagnose as it occurs across a spectrum and professional advice should always be sought. Ring SPELD in your state.

Dyslexia is not curable and is a lifelong disability. It can be remediated with appropriate intervention but some difficulties may still persist. Children with Dyslexia can learn to read.

**Getting Assessed**

An educational assessment or profiling is a valid model of testing that is recommended by the International Dyslexia Association that focuses on providing a detailed assessment that looks at strengths and weaknesses and how these can be addressed in an educational setting. Assessment or identification of a child at risk can be undertaken at 5 1/2 years of age. Educational assessments can be undertaken by many specialist literacy tutors.

A Dyslexia Diagnosis can be undertaken by an educational psychologists or speech pathologist who has qualifications or experience in dyslexia testing. For an educational
psychologist to diagnose dyslexia the symptoms must persist for at least 6 months despite targeted intervention. Diagnosis also requires skills to be substantially below what is expected for age. Many educational psychologists will not diagnosis until age 8. It is worth asking this before undertaking the tests as it is disappointing to get a report that refuses to specify your child's issues.

Where to go & what to expect

A good report will have recommendations of specific adjustments to learning and appropriate intervention. We DO NOT recommend getting assessed by any organisation linked to a programme.

Please note that Behavioural Optometrists and Irlen Practitioners CAN NOT assess or diagnose dyslexia. Dyslexia is NOT a visual processing or vision issue.

SPELD in your state is a great place to start. Most can recommend psychologists. Some have excellent in house psychologists. They can also recommend tutors who are sometimes able to provide an educational assessment. There are other reputable organisations in different areas. Ask in Dyslexia Support Australia or State based support groups for a recommendation.

First Steps

Consider a hearing test by a GP or preferably an audiologist and a vision test by an optometrist or preferably an ophthalmologist to rule out other possible causes.

DSM-5


Diagnostic Criteria

A. A persistent difficulty learning academic skills for at least 6 months despite intervention. In regard to dyslexia the areas of persistent weakness may include:

1. Inaccurate and slow reading.
2. Difficulty with word decoding.
3. Difficulty with the comprehension of text.
4. Spelling.
5. Difficulties with grammar, punctuation and other writing skills.

B. The areas of weakness or skill impairment are significantly below the expectation and impede academic progress.

C. Learning difficulties may not be apparent until the demands of school are in excess of the student's progress.

D. The academic and learning difficulties do not occur because of other issues such intellectual, hearing, vision, mental health or due to inadequate instruction.


No one test can adequately assess for dyslexia. A battery of tests should be undertaken and a detailed academic history and developmental history should also be examined.

Different states vary in their policies regarding paperwork for examination provisions. It may be worth considering discussing assessment with your school before undertaking expensive and stressful testing. Unfortunately many schools fail to respond to a dyslexia diagnosis and your child may not receive any more learning support as a result.

However having a professional to support your concerns and pressure the school can be extremely worthwhile. Dyslexia is a recognised disability so a report does give your child the legal right to have adjustments implemented in the classroom.

Dyslexia can occur at any level of intellectual ability and the IQ discrepancy model is no longer regarded as an accurate diagnostic tool. It occurs across all languages but due to the complexity and variations in the English language difficulties are more apparent.

**IQ Testing**

IQ testing or psychometric testing is no longer regarded as necessary for the assessment of dyslexia. However, it is likely that a full educational review will include IQ testing. Some school psychologists may provide psychometric tests. Working memory difficulties are common with children with dyslexia and have been shown to have a significant effect on reading skills. Working memory is the ability to retain information in mind so it can be
manipulated. Processing speed is also a common difficulty that will compound reading difficulties. It is a measure of how quickly one can cognitively deal with information. It can be likened to a funnel. Lots of information going in at the top and only a dribble being processed dripping out the bottom. It may affect fluency and automaticity of reading.

**Dyslexia Intervention**

There are a number of programmes designed to remediate reading including computer or booklet based programmes. Many are well researched and have shown efficacy in an educational setting. Others are well regarded synthetic phonics or systematic, explicit phonics programs which follow the science of how children learn to read. Every program has its deficiencies and will not suit every child. Please see our programs fact sheet.

The Australian Dyslexia Association, Learning Difficulties Australia and SPELD in your state have lists of appropriately trained and approved tutors. These organisations are not for profit. An experienced tutor is preferable to a program because they can tailor the intervention to your child’s needs.

Caution should be taken when seeking out alternative therapies. Please do your research before investing time and money into any program.

Early intervention is essential and a failed intervention has significant impact on mental health. Avoid anything that promises a quick fix or a cure.

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