



The Truth About Dyslexia

By Linda Balsiger, M.S., CCC-SLP

What is dyslexia? A common belief is that dyslexia is primarily a visual problem, or that those who have dyslexia “read backwards”. While many dyslexic individuals do reverse letters, or have visual tracking and sequencing weaknesses, dyslexia is actually a language-based disorder. The International Dyslexia Association defines dyslexia as *a language-based learning disability, characterized by difficulties with the phonological components of speech and language.* Persons with dyslexia have trouble hearing and identifying the distinct speech sounds in words, learning letter symbols for speech sounds, blending and sequencing sounds in words, and building phonological memory for words. Dyslexia is the most common language-based learning disability, and 15-20% of the population as a whole has symptoms of dyslexia that affect reading and spelling.

What causes dyslexia? Scientific imaging studies have found that individuals with dyslexia have differences in brain structure or “wiring” which interfere with the effective use of the speech-language processing areas of the brain. Dyslexia also appears to have a genetic basis, and a family history of reading problems is a risk factor. Dyslexia is not related to intelligence. In fact, a discrepancy between intellectual ability and reading ability is a defining feature of dyslexia. Many gifted and famous people have dyslexia or dyslexic traits, including Thomas Edison, Pablo Picasso, Alexander Graham Bell, Leonardo da Vinci, Robin Williams, Tom Cruise, and Agatha Christie.

What are the effects of dyslexia? The effects of dyslexia vary depending on severity, as well as on an individual’s particular profile. Most children with dyslexia have difficulty with learning to read, spelling, and written language. Some children with mild dyslexia are able to learn to read, but lack underlying phonological language skills, and rely instead on memorization, and the use of context to guess at unfamiliar words. They are typically weak spellers, and as they reach third or fourth grade, these children struggle to decode longer, multisyllabic words, and fail to acquire the reading fluency (speed and accuracy) and vocabulary needed to keep up with grade-level material. Many children with dyslexia also have other language weaknesses, including difficulties with processing or comprehending spoken or written language, and organizing and formulating expressive language to retell events or stories to others.

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How is dyslexia diagnosed? A formal evaluation is needed to confirm a diagnosis of dyslexia. The evaluation examines not only reading skills, but also assesses the underlying language skills linked to dyslexia.

These include:

- Phonological awareness (speech sounds in words)
- Phonemic awareness (sound- letter associations)
- Phonological word memory
- Rapid linguistic retrieval or naming
- Receptive language (listening)
- Expressive language.

Your child can be evaluated as early as kindergarten or first grade, which is often when their teacher may notice “red flags” related to early reading skills. The evaluation results allow for the development of an individualized treatment plan, and provide documentation needed to qualify for special services or accommodations. A full evaluation report will also contain a detailed discussion of learning strengths and weaknesses, and recommendations for parents and teachers.

What is the prognosis for children with dyslexia? Without help, children with dyslexia may lose confidence in their ability to learn, and suffer reduced self-esteem. They may become discouraged learners, and fail to achieve their potential, or later drop out of school. Fortunately, with appropriate assessment and treatment, children with dyslexia can learn to read and spell, and acquire the fundamental skills needed for academic success. The earlier that intervention occurs, the better the prognosis; however, progress in reading and writing/spelling can still occur regardless of the age of diagnosis.

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