

Dyslexia: a Learning Disability or a Gift

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Abstract

Dyslexia is a specific learning difficulty that is neurobiological in origin. It is characterized by difficulties with accurate and / or fluent word recognition and by poor spelling and decoding abilities. This disorder is manifested despite conventional instruction, adequate intelligence and sociocultural opportunities. Dyslexics are often assumed unintelligent, especially because of their difficulty with language. While dyslexia is considered a learning disability, it can also be interpreted as a gift that allows the dyslexic to extraordinary creative abilities. Dyslexia is the result of a perceptual talent. Which is evident from the great examples in history like Albert Einstein; the great scientist, Walt Disney, the great artistic Greg Louganis, the great athletic. When dyslexics are taught with the traditional methods they are not able to keep pace with other children of their class. School education systems are archaic in dyslexics teaching styles, they are consistently letting down up to 10% of the population in their inability to educate dyslexic children in literacy and they inadvertently discriminate against them. Children with Dyslexia are more likely to become early school leavers to withdraw from friends and family, to commit suicide. Researchers showed that when these students are taught with the help of alternative approaches their reading, writing, spelling and decoding abilities improved significantly and their disability is transferred into the Gift.

KEYWORDS: Dyslexia, Learning Disability and Gift

It is estimated that between ten to twenty percent of the population experiences learning disabilities and reading disabilities are perhaps the most common among them. Dyslexia is that reading disability which effects maximum number of school going children. **Bains (1997)** studied differential impact of various remedial strategies on reducing reading disability of dyslexic primary school children and one of her objective was to identify dyslexics from among primary school children studying in English medium schools of Chandigarh .She found that 14.63% of surveyed population suffered from dyslexia i.e 30 out of 205 children. **Kohli (2001)** surveyed primary school going children of Chandigarh .Ten English medium public schools were randomly selected for the above purpose and she found that 24.42% of primary school going population suffered from dyslexia i.e 75 out of 307 children . **Brazeau (2005)** mentioned in his study 'I'M confused, is it dyslexia or is it learning disability?' that dyslexia is not something which is very rare but it is the most common learning disability. It accounts for 23% of the population. Children suffering from dyslexia evaluate themselves as inadequate if they repeatedly fail academically and especially because others are aware of their disability, such as their parents, educators and friends. It contributes directly to the formation of their unrealistic self-image. If they do not receive help in time it can worsen and can render them overly sensitive to criticism and reprimands. Children with reading problems react emotionally, become frustrated, lose their self-esteem and develop a negative self image due to repeated failure and negative feedback, such as poor academic performance, being teased by peers and pressure coming from educators and parents,

dominance of feeling of loneliness, anger, sadness, denial, worry, shame and nervousness, that can lead to different psychological problems such as anxiety, mood and behavioral/conduct disorders. Children with a reading disorder run the risk of developing anxiety; depressive and behavioral problems and they are also inclined to having problems concerning peer relationships. They also react less sensitively in ambiguous social situations. Children with Dyslexia are more likely to become early school leavers to withdraw from friends and family, to commit suicide. **Jorm (1983)** summarized that there seemed to be a causal link between antisocial behaviour and reading retardation: first, antisocial behaviour resulted in reading retardation, second that reading retardation caused antisocial behaviour and third, common causes such as family circumstances caused antisocial behaviour and/ or reading retardation. Even though it seems that people carrying the diagnosis of dyslexia are seen with a certain disability, the true nature of their ability is available for all to see. Dyslexia is a neurological or brain based condition. Researchers studying the brains of dyslexics have found that during reading tasks dyslexics show reduced activity in the left inferior parietal cortex. **Shaywitz(1998)** discovered physical evidence of the brain malfunction involved in the brain of dyslexic. Using magnetic resonance imaging (MRI) he proved that dyslexia is a very real neurological disorder. He noted that to be able to read, a person must link the printed combination of letters with the sound that it represents - a simple, automatic task for people with the customary connection between brain areas that control language and vision. The results off his study showed conclusively that brain patterns in dyslexic readers are different from those of non-dyslexic readers. While the non-dyslexic readers used rear-brain areas extensively, very little activity in that critical area was detected in the dyslexic readers. The dyslexic readers compensate by using a front brain section known as Broca's area, associated with language processing and speech. Researchers have found that genetics is a factor in causing the brain to operate so differently. Dyslexia runs in families, dyslexic parents are very likely to have children who are dyslexic. Dyslexia is both familial and heritable: The disorder is found in 23% to 65% of the children of parents who are dyslexic, and 40% of the siblings of a dyslexic child are also affected (Pennington & Gilger 1996). Bonnie Kaplan at the University of Calgary & Alberta Children's Hospital Research Centre, says: "There are probably several genes influencing learning disabilities, and that there may be one major gene determining the presence of one particular type of dyslexia. Many Researchers believe that dyslexia is a negative learning disability. Usually when people hear the word dyslexia they think only of reading, writing, spelling, and math problems a child is having in school. Some associate it only with word and letter reversals, some only with slow learners. Almost everyone considers it some form of a learning disability, but the learning disability is only one face of dyslexia. The most common disabilities of dyslexia occur in reading, writing, spelling, or math; but there are many others. Each case of dyslexia is different, because dyslexia is an unintentionally self-created condition. No two dyslexics have created it exactly the same. Davis (2003) pointed that contrary to popular belief, dyslexia is not a 'reading disability'. It is a unique manner of brain-functioning found in 10-15 percent of the population, impacting the capacity to read, write, spell, process symbols, and concentrate. The condition manifests in a variety of symptoms. To change our perspective of dyslexia from disability to gift, we must start with a clear, accurate understanding of what dyslexia really is, and what causes it. Doing this will bring out the positive as well as the negative aspects of the situation

and allow us to see how dyslexia develops. Then the idea of correcting it won't seem far-fetched. Going a step beyond correcting the problem, we can also recognize and explore this condition as the gift it truly is. Another set of researchers believed that "The term 'learning disability' tends to infer that a person cannot learn. With the proper instruction, dyslexics do learn. The degree of difficulty a dyslexic person has with reading, spelling, and/or speaking varies due to the type of teaching the person receives as well as the differences in the brain organization. The brain is normal, often very 'intelligent', but with strengths in areas other than the language area. Such brain differences appear to be inherited, probably from more than one ancestor. They are hidden, usually, until the person goes to school and attempts to learn by reading and communicate by writing." According to research, someone who is dyslexic just has a different ability to process information, specifically within the phonetic region of the brain. Research shows the learning processes in those with dyslexia are just different than what is expected, or to what is seen amongst the mass population. According to another group of researchers, dyslexia is a neurological disorder, no matter which stance one takes on it. This is because of "the way the brain is mapped out in the womb" and is structurally different in the way that the visual-spatial aspect is handled. They even go on to say that the verbal aspect is overemphasized in dyslexics and therefore they often have an enhanced vocabulary. Berret suggests that the weakness lies in the "missed connection between the sounds and the visual representation" of those sounds. Due to their requirement for a different way of being instructed and different approach to being taught how to categorize and program certain phonetics, the label of "neurological disorder" is cast. Some of the most astute characters in the history of human science and development have been diagnosed with dyslexia, including revolutionary scientist Albert Einstein. Research has shown that when dyslexic students are given the opportunity to perform tests orally and/or with more time, they achieve better results. Those with dyslexia have a greater connection with the right side of the brain and have enhanced capabilities in comprehension, conceptualization and spatial relationship awareness. What is more, research has shown that their intuition is more readily recognized and they have strong awareness when seeing a higher perspective, or understanding the "bigger picture." Researchers like Ron Davis ((1997, 2003)) proved that when the dyslexic ability is brought under conscious control, and the confusions that led to the learning disability are turned off, dyslexics can show their full potential. Dyslexic people are highly creative, intuitive, and excel at three-dimensional problem solving and hands-on learning. Their visual and holistic learning style means that they learn best through the creative process, with methods that focus on mastery of the meanings of words and symbols. The true gift of dyslexia is the gift of mastery. When they use learning methods that fit their thinking style, they can excel in academics and read and write efficiently. Dyslexic thinkers can portray the world through images because they think in images. they can build worlds, freeze the frame, walk around and touch. They can read people's faces, drawings, buildings, landscapes and all things in the visual world more quickly than many of their non-dyslexic friends. Their visual/spatial abilities are extraordinary. The mental function that causes dyslexia is a gift in the truest sense of the word: a natural ability, a talent. It is something special that enhances the individual. They can utilize the brain's ability to alter and create perceptions (the primary ability). They are highly aware of the environment. They think mainly in pictures instead of words. They have

vivid imaginations and they think and perceive multi-dimensionally. They actually function at the threshold of creation, creating a reality for themselves at every opportunity and transforming knowledge into unique, ever growing pictures that, once embedded, becomes so natural for the dyslexic that it can never be forgotten. It can be noted that dyslexia is a reading disability because traditional education system could not deal with them in the way they should. Instead they should be taught using a wider range of teaching methods appropriate to dyslexic learners like multisensory linguistic method, behaviour modification method, davis programme etc. A dyslexic should be referred to a specialist when applying a range of appropriate teaching methods has not helped or produced the rate of progress one would expect. The term 'specialist' refers to those whose main role is to support dyslexic learners and who have been trained specifically for that role. Some specialists follow specific programmes. Others have developed their own ways of working with dyslexic learners, drawing eclectically from a number of different approaches. It is important to remember that no one method appears to be effective with all dyslexic learners, although all methods seem to work for some learners.

Conclusion: To conclude we can say that dyslexia is a learning disability which is primarily concerned with reading, writing, spelling and word decoding problems. The main problem with the dyslexic child is that he is not able to concentrate as other children of his age do. Our traditional education system increases persistence of their problems. But with proper instructions and intervention programmes the weaknesses of dyslexics can be converted into their strengths. When educators use learning methods that fit their thinking style, then this disability gets transformed into a gift and a dyslexic can excel in academics and read and write efficiently.

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