



Empowering Children. Supporting Families. Building Brighter Futures.

Resource 089 | Learning disorders

Dyslexia

What it means

Dyslexia is a learning disorder primarily affecting accurate or fluent word reading and spelling. It is not a measure of intelligence. Preschool language and early literacy difficulties may indicate risk, while diagnosis usually becomes clearer during reading instruction. Support should begin when a child struggles, without waiting for repeated failure. [1]

Causes and risk factors

Dyslexia involves differences in the development of reading-related brain processes, often with a family history. Difficulties with speech-sound awareness and mapping sounds to print are common. Language disorder or other learning needs may coexist. Dyslexia is not caused simply by laziness, low intelligence, or inadequate eyesight. [1,2]

General family education. A concern deserves assessment, but this guide does not diagnose a child or prescribe treatment.



Signs and everyday impact

Early risk signs can include persistent difficulty with speech-sound awareness or learning letter-sound links. School-age children may struggle with decoding unfamiliar words, reading fluency, or spelling. Letter reversals alone are not diagnostic. Teaching history and the language of instruction matter when interpreting performance. [1,2]

Assessment and diagnosis

A qualified educational or clinical assessment reviews reading, spelling, language, phonological skills, instruction, and progress over time. Hearing, vision, and other developmental concerns are considered as relevant. Testing should account for languages and opportunities to learn. A single preschool checklist or intelligence score cannot establish dyslexia. [1,2]

Treatment and therapy

Effective instruction is explicit and systematic, teaching speech-sound awareness, letter-sound relationships, decoding, spelling, fluency, vocabulary, and comprehension according to need. Progress monitoring guides intensity and adjustments. Accommodations such as accessible text or extra time support participation. Treat actual vision problems when present, but vision exercises are not a substitute for reading instruction. [1,2,3,4]

Support at home

Share enjoyable books and discuss stories without turning every activity into a test. Practice the teacher's selected skills in brief, supportive sessions. Use audiobooks or read-aloud access alongside reading instruction. Praise effort and strategies, and avoid equating reading speed with intelligence or character.

When to seek help

Request assessment and instructional support for persistent reading difficulties. New loss of previously established language or learning skills needs medical review, rather than automatic attribution to dyslexia.

Questions for your care team

- Which reading skills need explicit instruction?
- How will progress and treatment intensity be monitored?
- Which accommodations provide access while skills develop?



Podcast preparation

Use this outline to develop a later podcast script.

Suggested opening

Welcome to Mariel Early Intervention. Today we discuss dyslexia. Dyslexia is a learning disorder primarily affecting accurate or fluent word reading and spelling. This is general education; each child needs individualized care.

Opening: Define the topic and its developmental context.

Understanding: Explain causes and signs without inviting self-diagnosis.

Assessment: Describe evaluation and distinguish screening from diagnosis.

Support: Discuss treatment, therapy, and practical family supports.

Closing: Explain urgent signs and one clear next step.

Misconception to address: Myth: dyslexia is mainly reading letters backward. Its core difficulties concern word reading and spelling.

Before recording: update clinical references and local service details, arrange clinical review, and use fully consented or fictional examples.

Terms in plain language

- Decoding: using letter-sound knowledge to read words.
- Phonemic awareness: noticing and working with individual speech sounds.
- Fluency: reading accurately and efficiently with appropriate phrasing.

Sources and further reading

Sources accessed 3 October 2026. Numbered references support the clinical overview. Treatment availability and referral routes vary by country.

[1] Eunice Kennedy Shriver National Institute of Child Health and Human Development - NICHD

<https://www.nichd.nih.gov/health/topics/factsheets/learningdisabilities>

[2] What is the best way to teach children to read?

<https://www.nichd.nih.gov/health/topics/reading/conditioninfo/teach>

[3] Learning Disability Evaluation

<https://www.healthychildren.org/English/health-issues/conditions/learning-disabilities/Pages/Learning-Disability-Evaluation.aspx?form=HealthyChildren>

[4] What are common treatments for reading disorders?

<https://www.nichd.nih.gov/health/topics/reading/conditioninfo/treatment>