Dyslexia and Dyspraxia in Adulthood

Information for Doctors and Psychotherapists

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In the course of my work as an assessor of adults who have dyslexic and/or dyspraxic difficulties, I have sometimes given talks to doctors or psychotherapists on how ‘developmental’ dyslexia and dyspraxia manifest themselves in adulthood, how these syndromes can be identified, and what help and support is available for people who have these difficulties. This guidance is structured as follows:

A. Common misconceptions about adult dyslexia and dyspraxia.
B. Typical presenting problems.
C. List of questions answered in this paper.
D. Detailed information in a question-and-answer format. I have selected actual questions that are often put to me by doctors and therapists.

A. Two common misconceptions

“The chief characteristic of dyslexia in adulthood is difficulty with reading.”

This is very often not the case. A dyslexic adult may be slightly slow in reading but otherwise competent. The chief characteristics of dyslexia in adulthood are usually weaknesses in auditory short-term memory (working memory) and visual processing skills.

“Dyspraxia in adulthood is characterised chiefly by poor motor co-ordination.”

This is often not the case. Dyspraxic adults have often improved their motor co-ordination skills over the years, and their chief difficulties in education and employment are more likely to be related to the neuro-cognitive aspects of dyspraxia i.e. a general difficulty with sequencing and structuring information, work organisation, time-keeping, and sometimes also social skills.
B. Typical presenting scenario

A patient or client reports the following: low self-esteem, lack of confidence, feelings of shame and embarrassment, inability to study or work efficiently, panic at the thought of going to the office, poor concentration, memory lapses, periods of blanking out in conversations, and difficulty in relating to people.

Is he (he = he/she) depressed? Stressed? Agoraphobic? Suffering an anxiety disorder? Perhaps, but perhaps at least part of his problem is that he has dyslexic and/or dyspraxic difficulties. Many people with these difficulties are highly intelligent and, consequently, the wide range of difficulties they encounter at university or in working life causes them to experience a variety of unpleasant emotions – and they may have to take time out of their studies or time off work because of stress.

All too often dyslexic/dyspraxic adults are not aware of the nature of their problems; rather they regard themselves as being ‘thick’ or fundamentally flawed in some puzzling way. In these circumstances their difficulties can become a guilty secret – a source of humiliation. In the workplace there is also a fear that, if the difficulties become too evident to an employer or to colleagues, then promotion could be blocked or, even worse, dismissal ensue.

In some cases the level of anxiety caused by these feelings is so great that sufferers are unable to face going to the office at all; they develop sickness or other minor complaints on workday mornings. At work they may be viewed by their colleagues as unco-operative and disagreeable: they may be morose and withdrawn, or touchy and aggressive. They are often the despair of employers because of their chronic inefficiency, and because they seem to be unable – or unwilling – to improve their performance.

The general chaos of the life of an adult with unrecognised dyslexic/dyspraxic difficulties, and the confusion of emotions that accompanies this, not only present a problem in themselves, but also compound any feelings of dejection, worthlessness, bewilderment or despair that may have their origins in childhood or in current real life experiences.
C. List of questions answered in this paper

Dyslexia
1. Do dyslexic difficulties of the developmental kind persist into adulthood?
2. What is the cognitive profile associated with these difficulties?
3. Is not dyslexia a reading difficulty?
4. What proportion of the population is thought to be dyslexic?
5. Does dyslexia overlap with other specific learning difficulties?

Help for dyslexic difficulties
6. Can dyslexic adults improve their skills?
7. How do study skills tutors or workplace skills trainers achieve these improvements?
8. Do these tutors/trainers also deal with the emotional aspects of dyslexia?
9. Where can a dyslexic adult get help, either for assessment or skills training?
10. Are funds available anywhere for assessments of adults with the above-described difficulties?

Dyspraxia
11. How is dyspraxia viewed/defined in the educational world?
12. How does a dyslexia specialist go about the assessment of dyspraxia?

ADHD
13. Can dyslexia assessors diagnose Attention Deficit Hyperactivity Disorder?

Visual processing problems
14. Are any visual problems often associated with dyslexia/dyspraxia?
15. Would such visual problems be picked up in a routine eye test?

General
16. Are dyslexia assessors ‘jacks-of-all-trades’?

Resources
17. What self-help resources are available?
D. Questions and answers

Dyslexia

1. **Do dyslexic difficulties of the developmental kind persist into adulthood?**

   Yes, the underlying cognitive profile associated with dyslexic difficulties persists more or less unchanged throughout life.

2. **What is the cognitive profile associated with these difficulties?**

   On the one hand good verbal (including reasoning) abilities and, on the other hand, significant weaknesses in any or all of the following: auditory short-term memory, visual tracking, visual short-term memory, phonological skills. So, to take as an example: a high-achieving Oxford undergraduate might have the following profile:

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<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Verbal abilities</td>
<td>96</td>
</tr>
<tr>
<td>Auditory memory</td>
<td>23</td>
</tr>
<tr>
<td>Visual tracking</td>
<td>41</td>
</tr>
<tr>
<td>Phonological skills</td>
<td>26</td>
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</tbody>
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   *Scores are given in percentiles, range 1-99; average score range 25-75.*

   *Please note that it is not useful to quote overall IQ scores when a cognitive profile contains the sort of discrepancies shown above.*

3. **Is dyslexia not a reading difficulty?**

   Whereas in the medical world, the word *dyslexia* has kept its original meaning (difficulty with reading), in the educational world the definition has been gradually broadened out to include not only other literacy difficulties (spelling, writing) but also the cognitive weaknesses noted in (2) above. In other words, in the educational world, the term *dyslexia* is used as ‘shorthand’ for a syndrome of cognitive and associated literacy difficulties. And whereas difficulty with reading is the problem that is most obvious in childhood dyslexia, in adult dyslexia (in cases where verbal ability is good) other difficulties, such as weak short-term memory, poor organisational skills or general slowness in working, may be the ones that are most apparent.
4. What proportion of the population is thought to be dyslexic?

It is usually reckoned to be about 10% (about 4% severely affected and a further 6% with some areas of difficulty) and by the nature of things the majority of this group will be adults. Given that it is only in the last couple of decades that the persistence of dyslexia into adulthood has been widely recognised, it follows that most of this group will be ignorant of the true nature of their difficulties.

5. Does dyslexia overlap with other specific learning difficulties?

Yes, there is an overlap between dyslexia and dyspraxia (and many people have both types of difficulty) and then dyspraxia may shade off into attention deficit hyperactivity disorder. There is also a link with maths difficulties, often called dyscalculia. However, the precise meaning of dyscalculia is difficulty with the concept of number, for example, not knowing whether 20% of something is greater or less than 30%. More common maths difficulties, such as writing numbers or equations wrongly or forgetting calculation procedures, are better seen as related to dyslexic difficulties, i.e., to poor memory and weak visual processing.

Help for Dyslexic Difficulties

6. Can dyslexic adults improve their skills?

Certainly. How much they can improve depends on a variety of factors: a person's intellectual ability, the type of schooling they had, family background, motivation, and – crucially – whether they are lucky enough to have their difficulties identified at some point in their life. It should be noted that, even if basic reading skills improve in adulthood, scanning and comprehending long texts may continue to present a problem. Specialist training by a skills tutor/trainer, along with IT support, can make an immense difference – for example, it could be the difference between a person gaining or failing a degree, keeping or losing a job.

7. How do study skills tutors or workplace skills trainers achieve these improvements?

Firstly, they teach strategies, strategies, and more strategies. Secondly, they focus on what is important in a particular person's life. In other words, they don't attempt to make global improvements in, say, auditory short-term memory; rather they focus on what aspects
of a person’s life are being adversely affected by poor memory. For a student, this would be study skills, e.g., writing essays, reading for comprehension, note-taking, etc. For a white-collar working person, it would be analogous workplace skills, e.g., contributing to meetings, taking Minutes, writing reports, etc. Every working person – for example, an actor, scaffolder, IT adviser, taxi driver – would need to be taught strategies that will enable them to use their strengths to compensate for their weaknesses – and so to become more efficient in their daily and working lives.

8. **Do these tutors/trainers also deal with the emotional aspects of dyslexia?**

They certainly do. Dyslexic adults whose difficulties have not been identified at an early stage in their lives are often prey to the most distressing and debilitating emotions: anxiety, frustration, anger, bafflement about themselves, feelings of worthlessness, lack of confidence, and all too often depression. For this reason much of the work that a dyslexia tutor does is in fact confidence-building and counselling. The good news is that, once a dyslexic person receives appropriate help and begins to succeed rather than fail in life, there is a natural process by which their previously negative emotions are gradually replaced by more positive attitudes, including a greater belief in themselves.

9. **Where can a dyslexic adult get help, either for assessment or skills training?**

Initially it is best to refer them to the relevant advice organisations listed in section 17 of this paper. It is unlikely to be useful to refer them to the (neuro)psychology services at the local hospital. Clinical psychologists and neuropsychologists are usually familiar with developmental dyslexia in children and acquired dyslexia in adults. It is extremely rare for them to have experience with adults who have developmental dyslexia; they do not have the specialist tests needed to assess this group, and they are usually unaware of the support systems and reasonable adjustments available for such people both at college and in the workplace. The same is often true of educational psychologists who work mainly with children. In practice adult developmental dyslexia is on a different professional circuit from both childhood developmental dyslexia and adult acquired dyslexia.

**Funding for help**

10. **Are funds available anywhere for assessments of adults with the above-described difficulties?**
As regards funding for the assessment, this depends on the circumstances of the client. If they are attending, or planning to attend, a university or other college of higher education, it is very likely, as the situation stands at the moment, that university or government funds would be available to pay, at least in part, for both their diagnostic assessment and their study needs assessment, as well as for any training or equipment that is needed. They will also receive relevant concessions during their course, such as extra time for examinations.

As regards people in employment, the situation is much more complex and confusing. Ideally, an employer would fund both a diagnostic assessment and a workplace needs assessment. Workplace needs assessments are provided free by the government’s Access to Work scheme but such assessments are often far from being adequate. It is useful to note, however, that whether the workplace needs assessment is paid for by the employer or by the Access to Work scheme, the latter will provide funds for any training or equipment that has been identified as being necessary to improve the employee’s skills.

If a person is neither at a university nor in employment, then their situation will be difficult. Such a person is unlikely to have the funds to pay for a diagnostic assessment themselves (the fees usually being between £400 - £600) and their best hope would be to try to identify a charity who would furnish the appropriate funding. More information about this can be sought from the British Dyslexia Association (see section 17).

Dyspraxia

11. How is dyspraxia viewed/defined in the educational world?

In the educational world dyspraxia is described more broadly than in the medical world. Whereas an occupational therapist would see dyspraxia as a motor co-ordination disorder, a dyslexia assessor would use the term dyspraxia as 'shorthand' for a syndrome of impairments related to generally poor organisational ability, i.e. as not just a problem with the organisation of movement, but also as a problem with any task that requires the sequencing and structuring of information. Examples could be: organising a work schedule, time-management, speaking succinctly. Social skills, too, are very often affected, as these require a person to be skilled in 'organising' their behaviour appropriately in a social space, e.g., not sitting too close to people, not talking too long or too loudly.

As regards literacy skills, a dyspraxic person, unlike a dyslexic person, would not be expected to have poor phonological skills. Nor would they necessarily have problems with
basic reading skills. They may, however, have difficulty with higher-level literacy skills, such as writing essays, because here their poor sequencing and organisational skills could impair their performance. They may also have poor perceptual and orientation skills, and they may suffer from anxiety in unfamiliar surroundings or in social groups.

12. How does a dyslexia specialist go about the assessment of dyspraxia?

We don't do tests; rather we observe behaviour in the assessment session, take a history and administer checklists to look for current or previous problems with motor co-ordination and general organisational difficulties. If our client reported severe difficulties with co-ordination, then we would recommend they approach their GP to discuss a referral to an occupational therapist. To get help with general organisational difficulties, we would refer them to a dyslexia tutor who is also experienced in working with dyspraxic people.

ADHD

13. Can dyslexia assessors diagnose Attention Deficit Hyperactivity Disorder?

In general a dyslexia assessor would confine him/herself to doing a screening through observation, history-taking and administering a checklist. If ADD or ADHD tendencies were evident, we would make relevant educational/workplace recommendations and advise the client to approach their GP to discuss the possibility of a referral to a recognised ADHD specialist or centre of excellence. (The UKAAN organisation at the Institute of Psychiatry is currently rolling out a training programme on ADHD for GPs who wish to acquire assessment skills in this area. Visit: http:\\www.ukaan.org/clinicians_resource.htm).

Visual processing problems

14. Are any particular visual problems associated with dyslexia/dyspraxia?

Yes, two in particular. The first is visual stress, the main symptoms of which are seeing text shifting about on the page and finding that white paper ‘glares’. About 50% of dyslexic/dyspraxic people are estimated to have this condition (in the general population the figure is thought to be about 40%). If a client reports these symptoms, then we would do a trial of coloured overlays, as use of these can sometimes resolve visual stress problems. A second visual problem often found alongside visual stress is a problem with binocular vision.
Indications of this would be losing place in a text, missing out words and lines, mis-reading words.

If a client reports symptoms of either of the above two syndromes, we would then refer them on for an assessment and treatment to an optometrist who specialises in vision and learning. (A list of reliable practitioners can be found at www.colorimetryinstitute.org or www.s4clp.org.)

15. Would such visual problems not be picked up in a routine eye test?

No, high street opticians do not usually check for these problems. So it often happens that people who can barely read a page of text because of the problems described above are told by opticians that their vision is fine.

General

16. Are dyslexia assessors ‘jacks-of-all-trades’?

Yes, it does feel like that sometimes! Once we start moving down the continuum from dyslexia to other specific learning difficulties, we have to be constantly careful not to stray beyond the limits of our expertise. Let the cobbler stick to his last, as they say. However, it is very important that we do some sort of screening for conditions associated with dyslexia, because a dyslexia assessment may be the only chance in a person’s life that these other conditions can be picked up and relevant referrals made.

Resources

17. What self-help resources are available?

Dyslexia

General advice, help and information:

British Dyslexia Association 0845 251 9002 bdadyslexia.org.uk
PATOSS 01386 712 650 patoss-dyslexia.org

Websites: beingdyslexic.co.uk
4dyslexics.com
Books:

(Commended in the BMA popular medicine books competition 2007)


**Dyspraxia**

General advice, help and information:

Dyspraxia Foundation 01462 454 986 dyspraxiafoundation.org.uk
Dyspraxia UK 01223 967 897 dyspraxiauk.com

Books:


*That's the Way I Think – dyslexia, dyspraxia and ADHD explained.* David Grant. David Fulton Books.

**AD(H)D**

General advice, help and information:

aadduk.org
simplywellbeing.com

Books:


*Adult ADHD.* Michelle Novotni and Thomas Whiteman. Pinon.

**Visual stress/binocular vision problems**

Practitioners in the London area:

The Institute of Optometry
56-62 Newington Causeway
London  SE1 6DS
020 7234 9641
www.ioo.org.uk

Barnard Levit Optometrist
58 Clifton Gardens
London NW11 7EL
020 8458 0599
www.eye-spy.co.uk

UK-wide lists of practitioners:

www.colourimetryinstitute.org
www.s4clp.org

I hope this information has been useful to you. If you wish to obtain further information and/or you have any questions or comments on the subject of dyslexia/dyspraxia in adulthood, please don't hesitate to contact me:

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