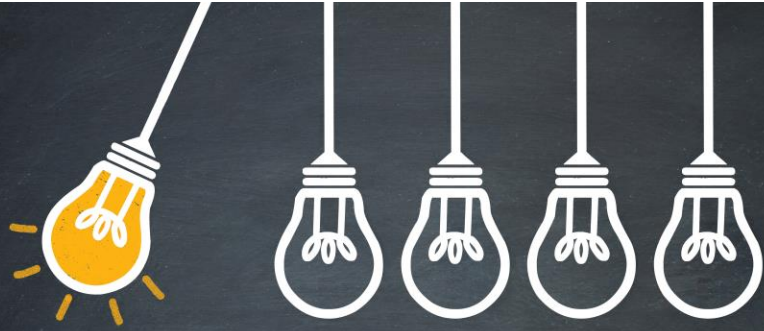


Deciphering Dyslexia

Timothy N. Odegard, Ph.D.
Professor of Psychology
Chair of Excellence in Dyslexic Studies
Middle Tennessee State University





WHAT WILL I LEARN?

You will learn about:



1 Language Basis of Literacy



2 A Conceptual Model Of Dyslexia



3 Neurobiological Differences



4 Characteristics of Dyslexia



5 Secondary Consequences

Section 1

Language Basis of
Literacy





LANGUAGE IS KEY

“Possessing language, humans have had a high-fidelity code for transmitting detailed information down the generations. Many, if not most, of the things we make use of in our everyday lives, rely on specialized knowledge or skills to produce. The information behind these was historically coded in verbal instructions, and with the advent of writing, it could be stored and become increasingly complex.”

Pagel, M. (2017)




LANGUAGE BASICS

Oral Language

Written Language

Expressive Language
Receptive Language

Listening 

 Reading

Speaking 

 Writing

Figure developed based on the American Speech-Language-Hearing Association (ASHA) definition of language.

ORAL AND WRITTEN LANGUAGE

1 Oral Language came first

We have used spoken language to communicate for a long time, around 240,000 years.

Highly integrated brain networks have evolved to allow for oral language.

Reading is a newer human invention (2,600 BCE). It is the interaction of attention, language, vision, and knowledge.

2 Reading Must be Taught & Practiced

Children learn to understand and produce oral language from exposure.

Children must be directly taught how to read and write written language.

It takes practice to become automatic readers and writers.

Individual differences exist in how much instruction and practice is required to become proficient readers and writers.

3 Oral Language is ever present

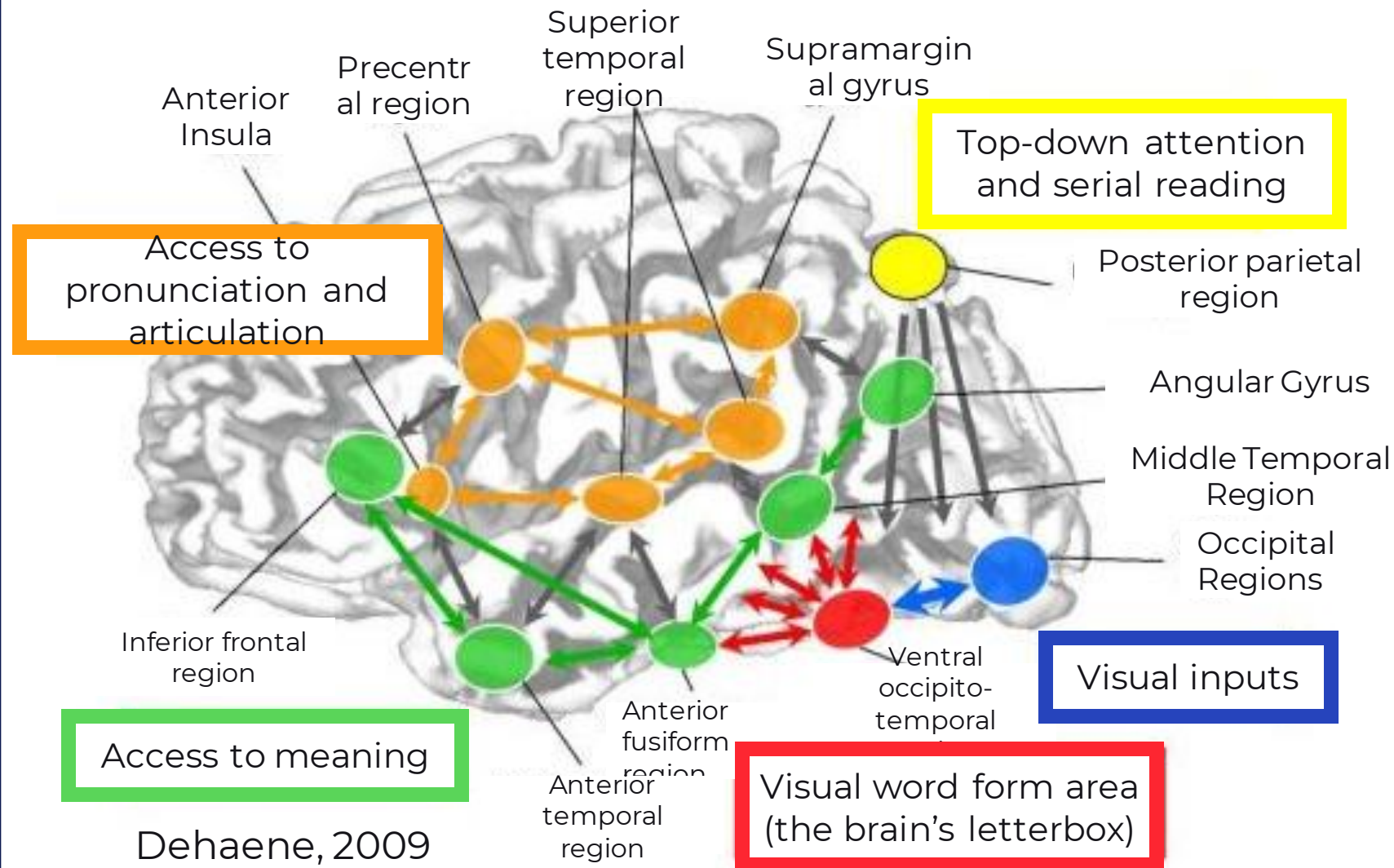
Oral language continues to develop and expand even after a child enters school, and this development interacts with reading development.

Engaging meaningfully and deeply with text fosters vocabulary, background knowledge, creativity, and innovation.

CORTICAL MODEL OF READING



“My firm conviction is that every teacher should have some notion of how reading operates in the child’s brain.”
-Dehaene





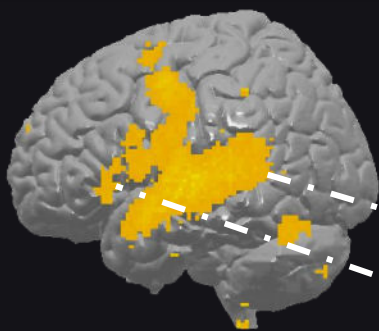
Brain Areas Involved When Reading

Reading is a compilation of many cortical brain regions

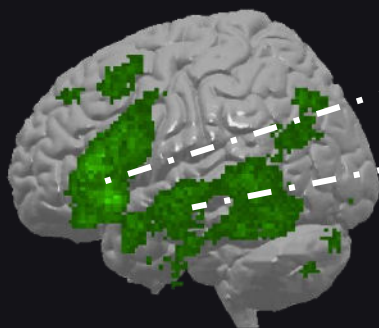
Aspects of Oral Language

Receptive Written Language

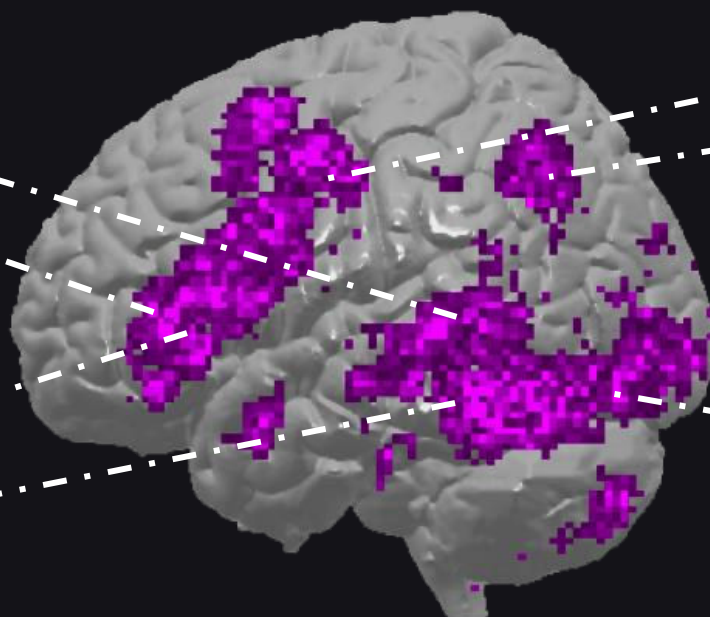
Supporting Processes



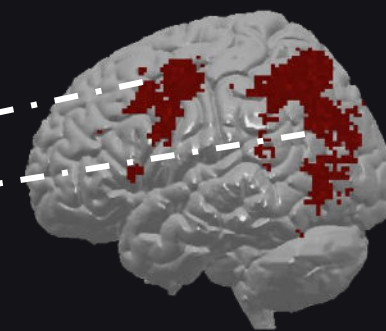
Speech & Hearing



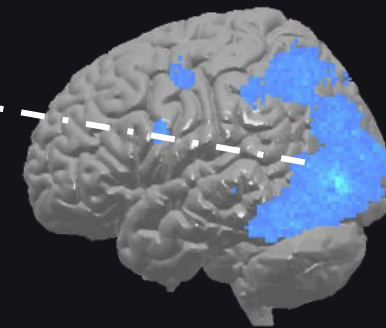
Semantic



Reading



Attention

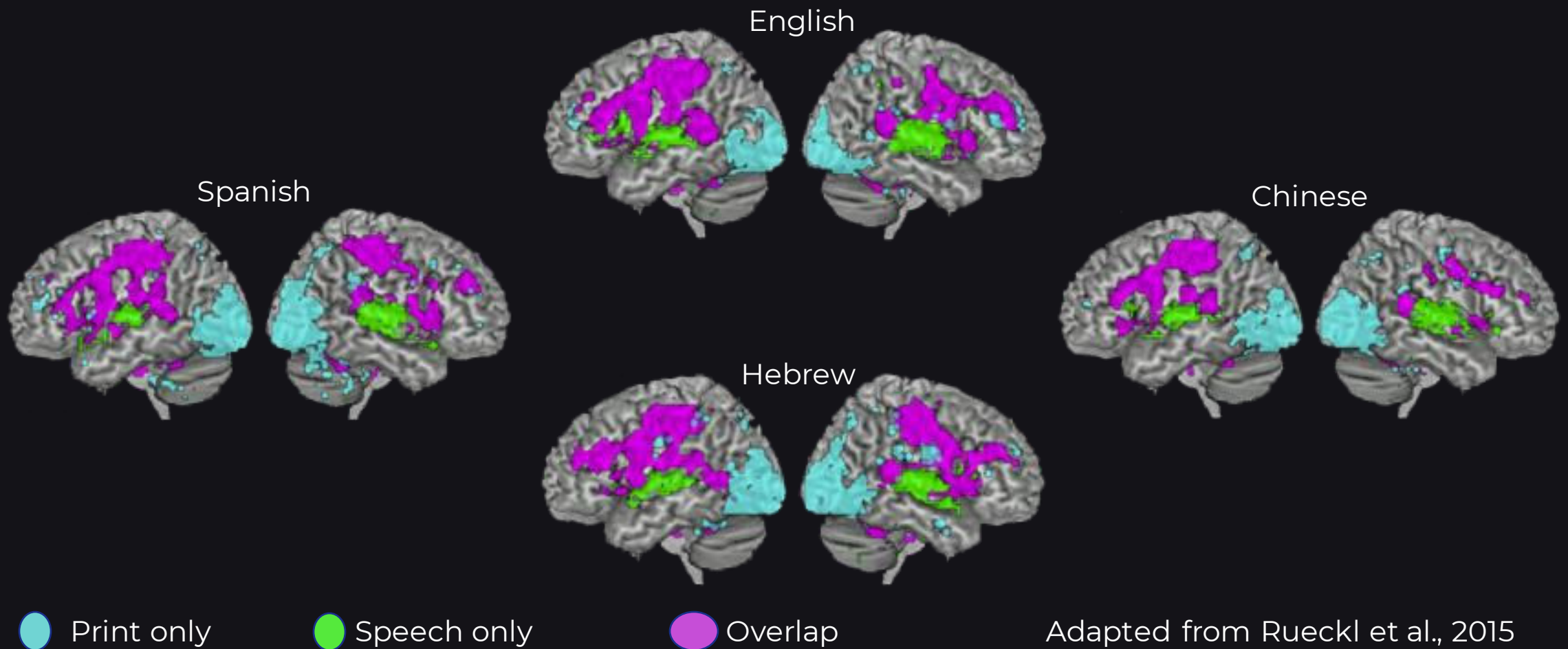


Visual



UNIVERSALITIES ACROSS ORTHOGRAPHIES?

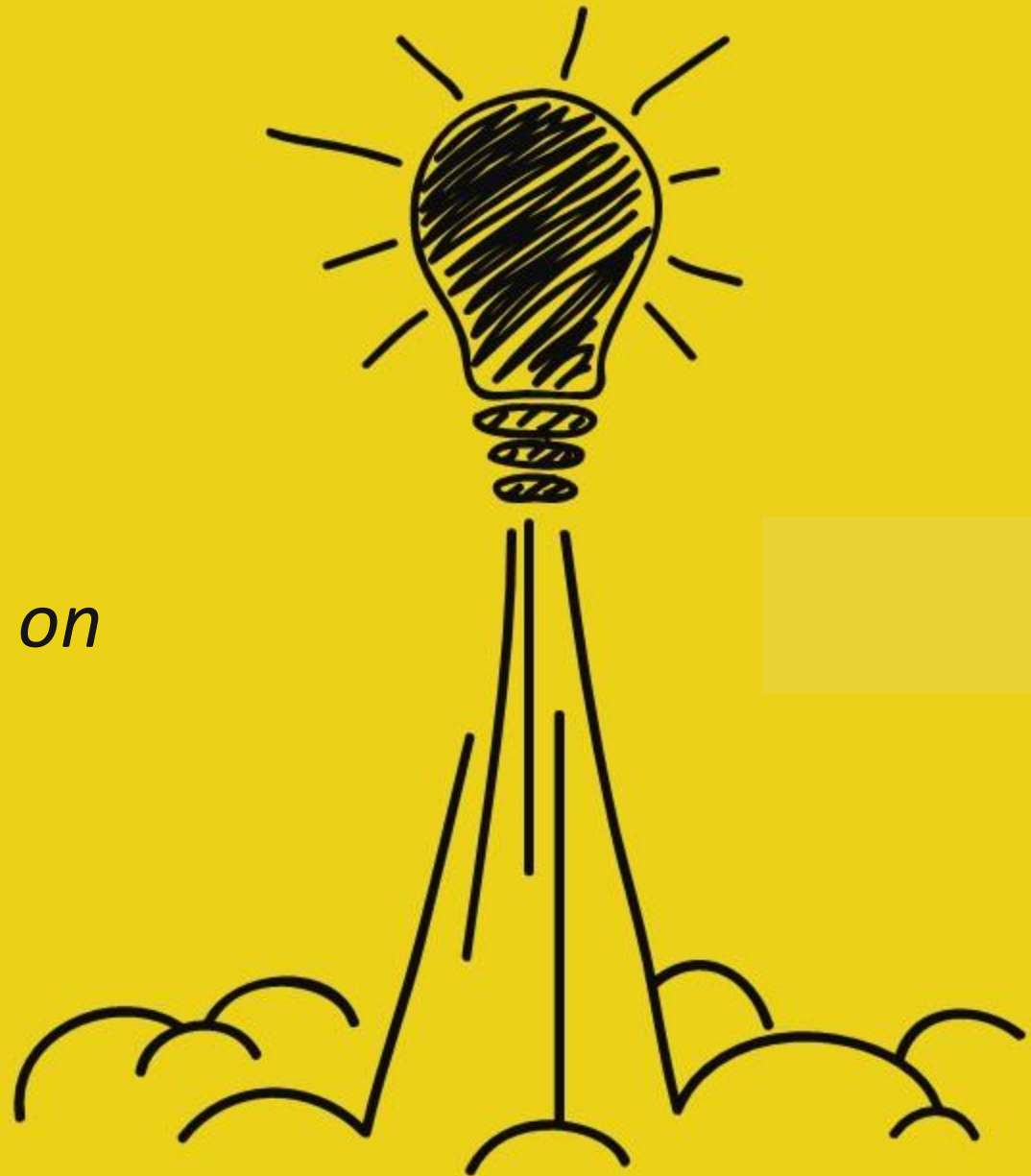
Similar brain networks are engaged when reading



Adapted from Rueckl et al., 2015
Figure 1

Big Idea

Written language builds on oral language.



Tim Odegard, 2024

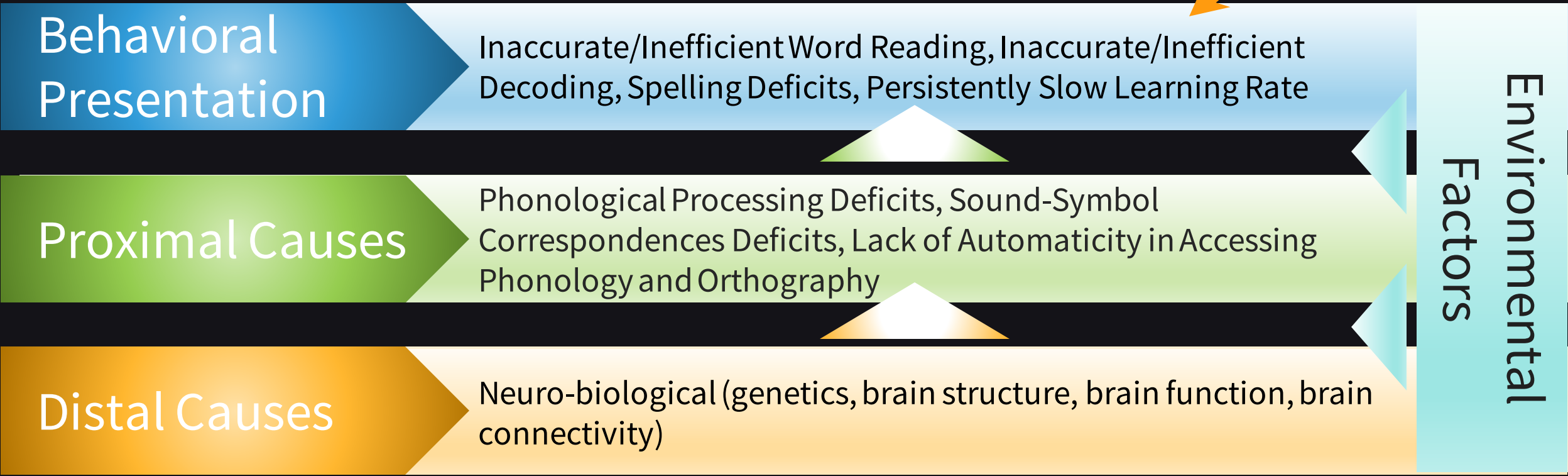
Section 2

Conceptual Model of Dyslexia



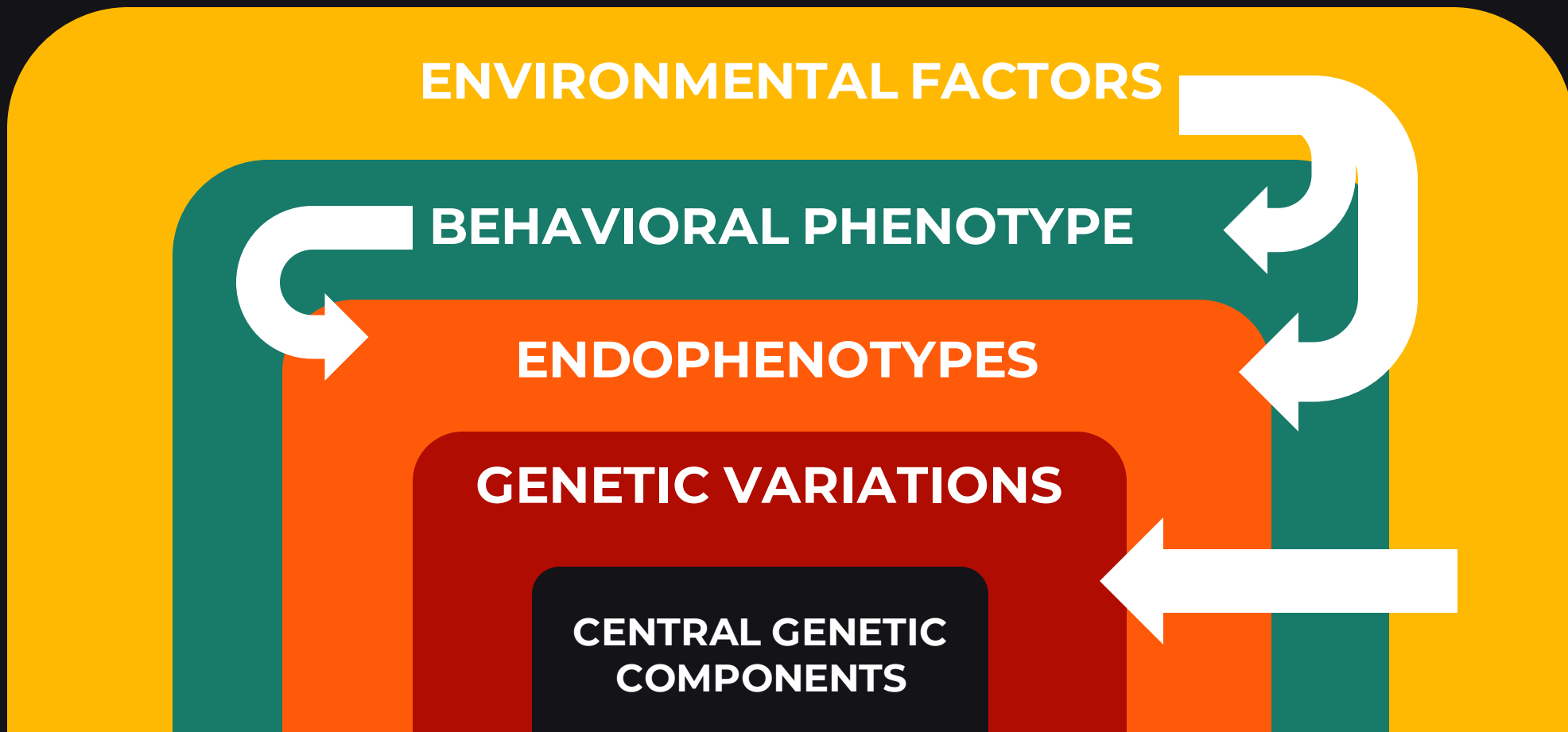


Abridged Contemporary Model of Dyslexia



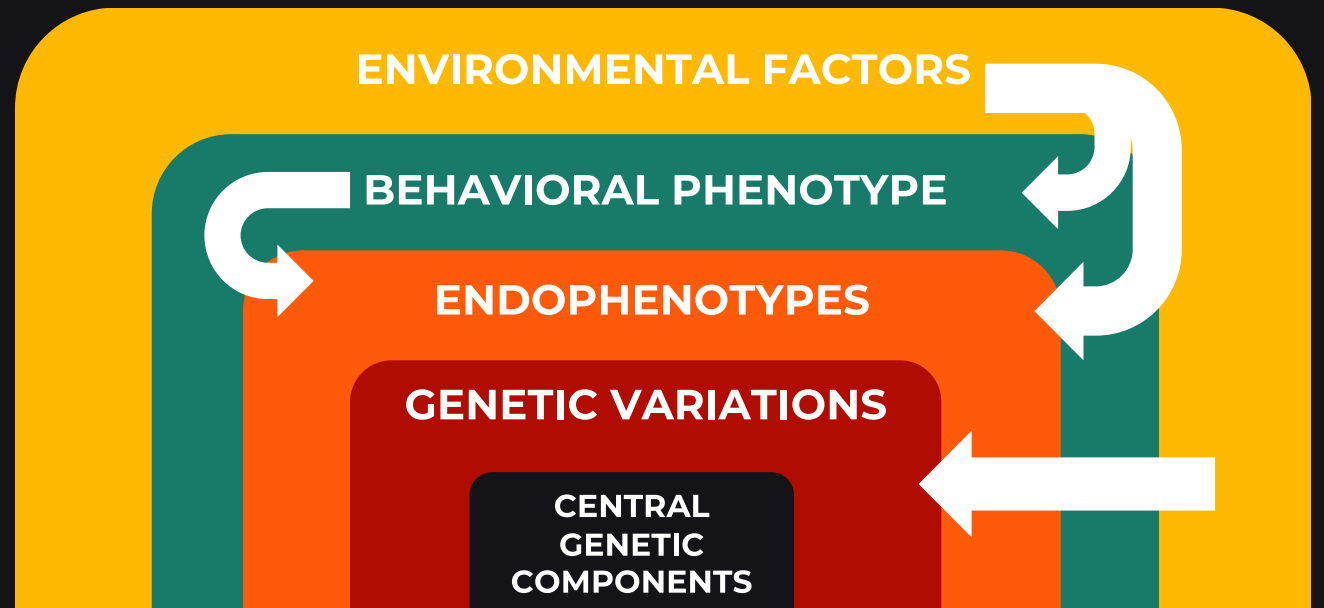
Graphic was developed based on the conceptual understanding of learning disabilities outlined in Fletcher et al., 2019. A similar and expanded understanding of dyslexia is described in Catts & Petscher, 2021.

Expanded Contemporary Model of Dyslexia



Central Genetic Components

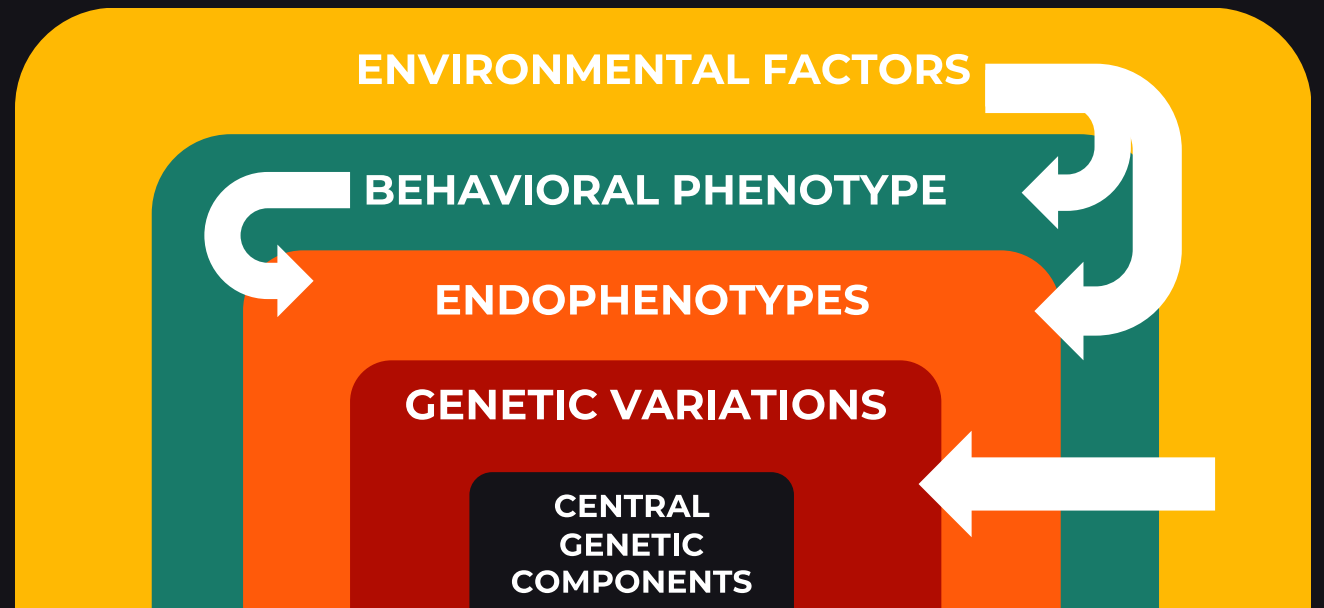
The "Central Genetic Components" represent the foundational genetic factors that contribute to the broader aspects of development, neurobiology, domain-general aspects of cognition, and language (oral and written).





Genetic Variations

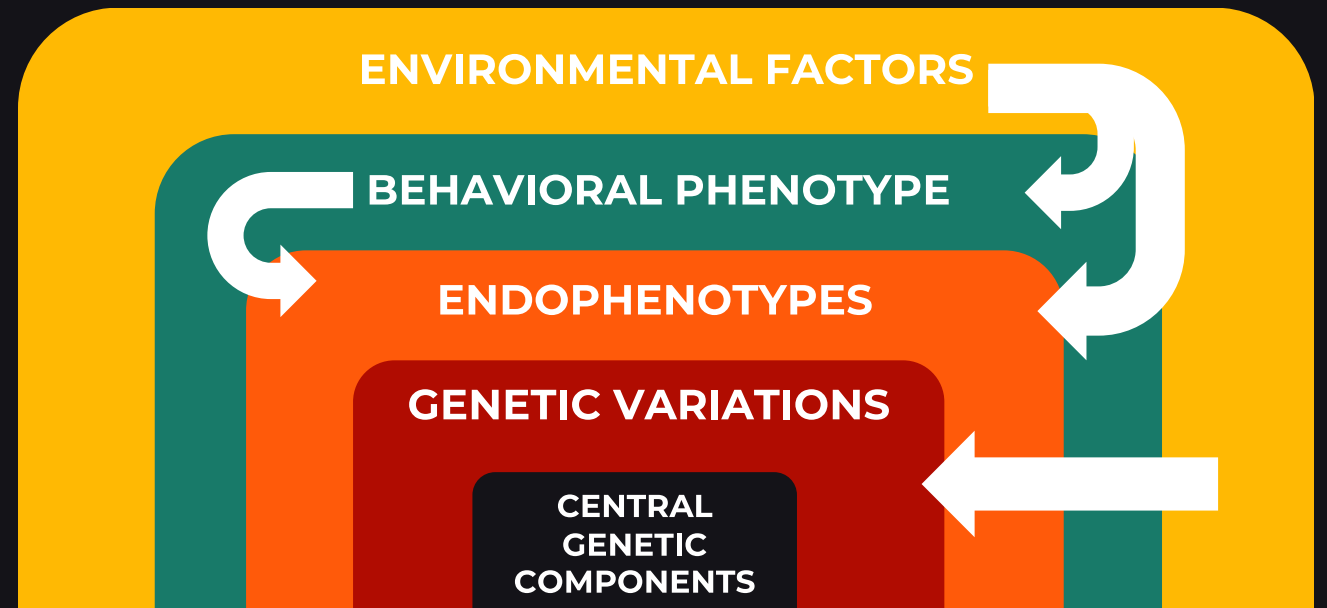
Genetic variations, occurring across multiple genes (i.e., polygenetic), play a crucial role in shaping the behavioral presentation of dyslexia. This level of specificity acknowledges the diversity in genetic influences, particularly those related to language processing—both oral and written.



Endophenotypes



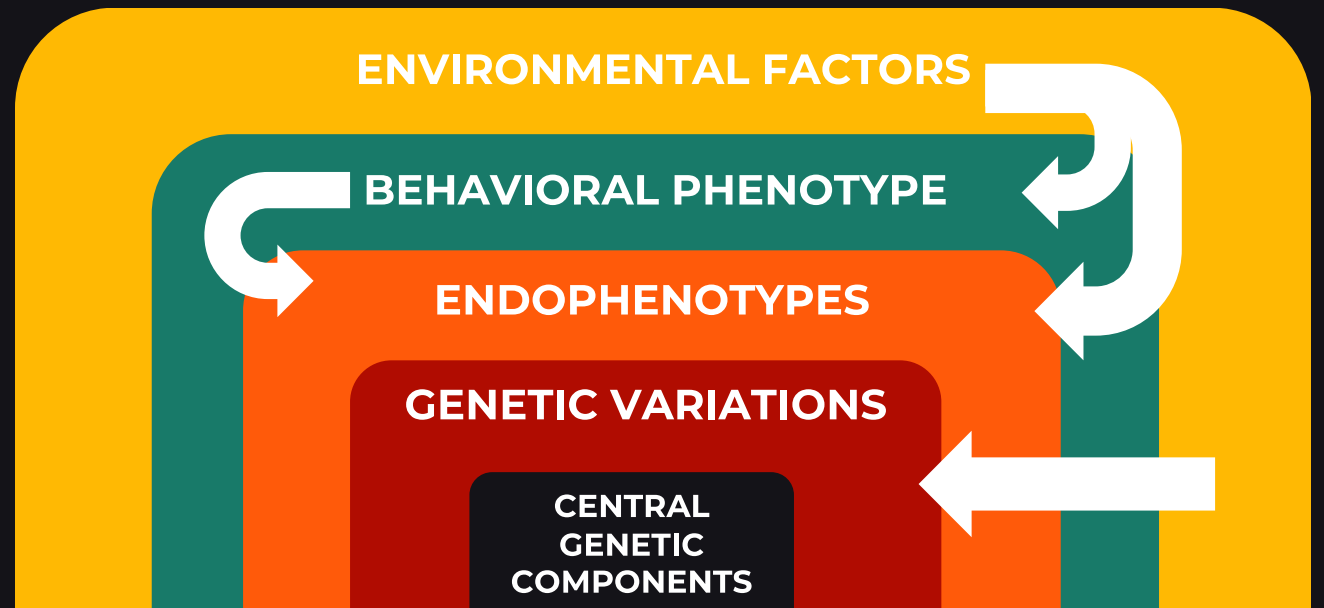
An endophenotype is a measurable and heritable trait that is thought to be an intermediate link in the causal chain between genes and complex multifactorial traits or conditions such as dyslexia.



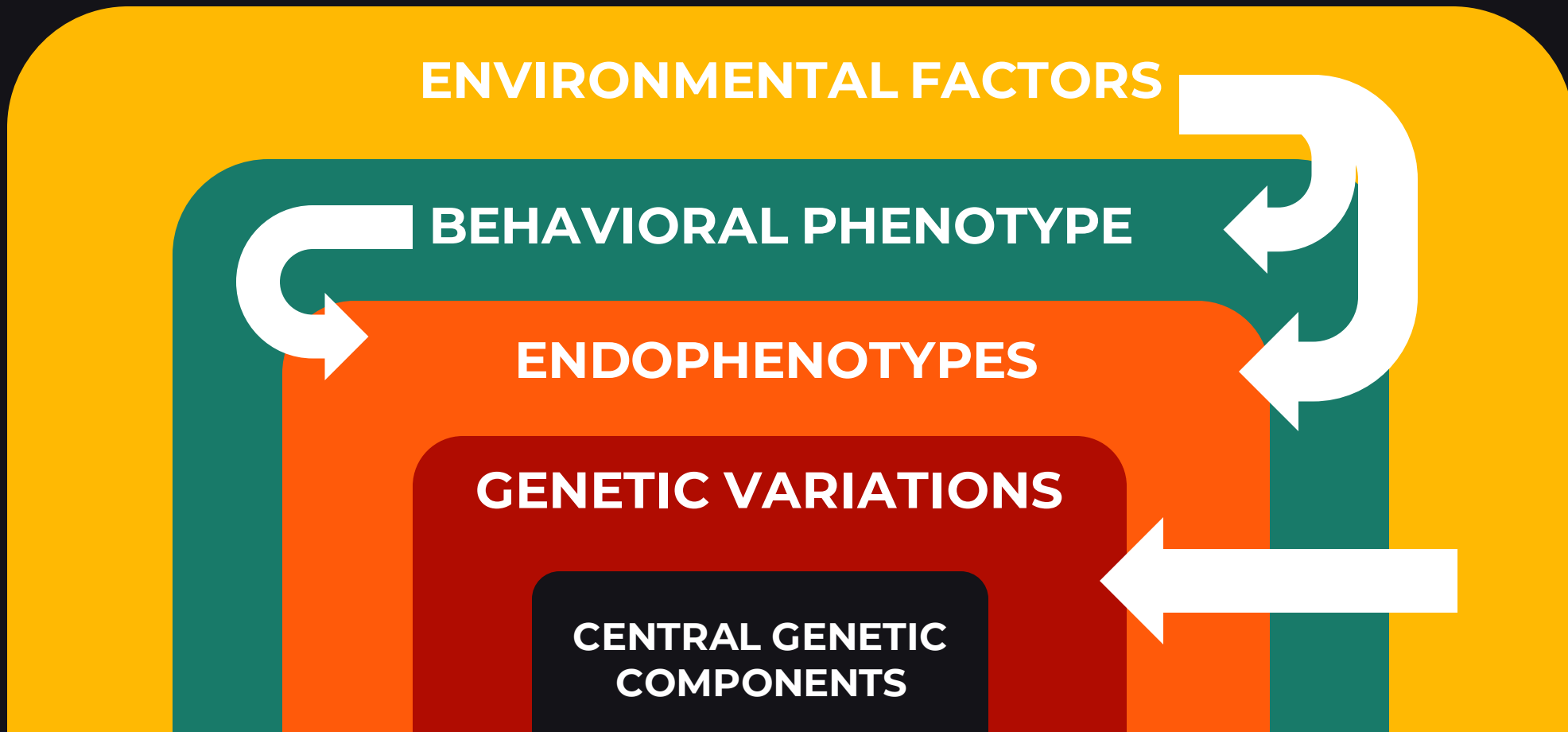


Behavioral Phenotype

Behavioral phenotype refers to the observable and measurable behaviors associated with the condition. The complex behavioral phenotype of dyslexia results from the interaction between genetic expression into endophenotypes and environmental factors.

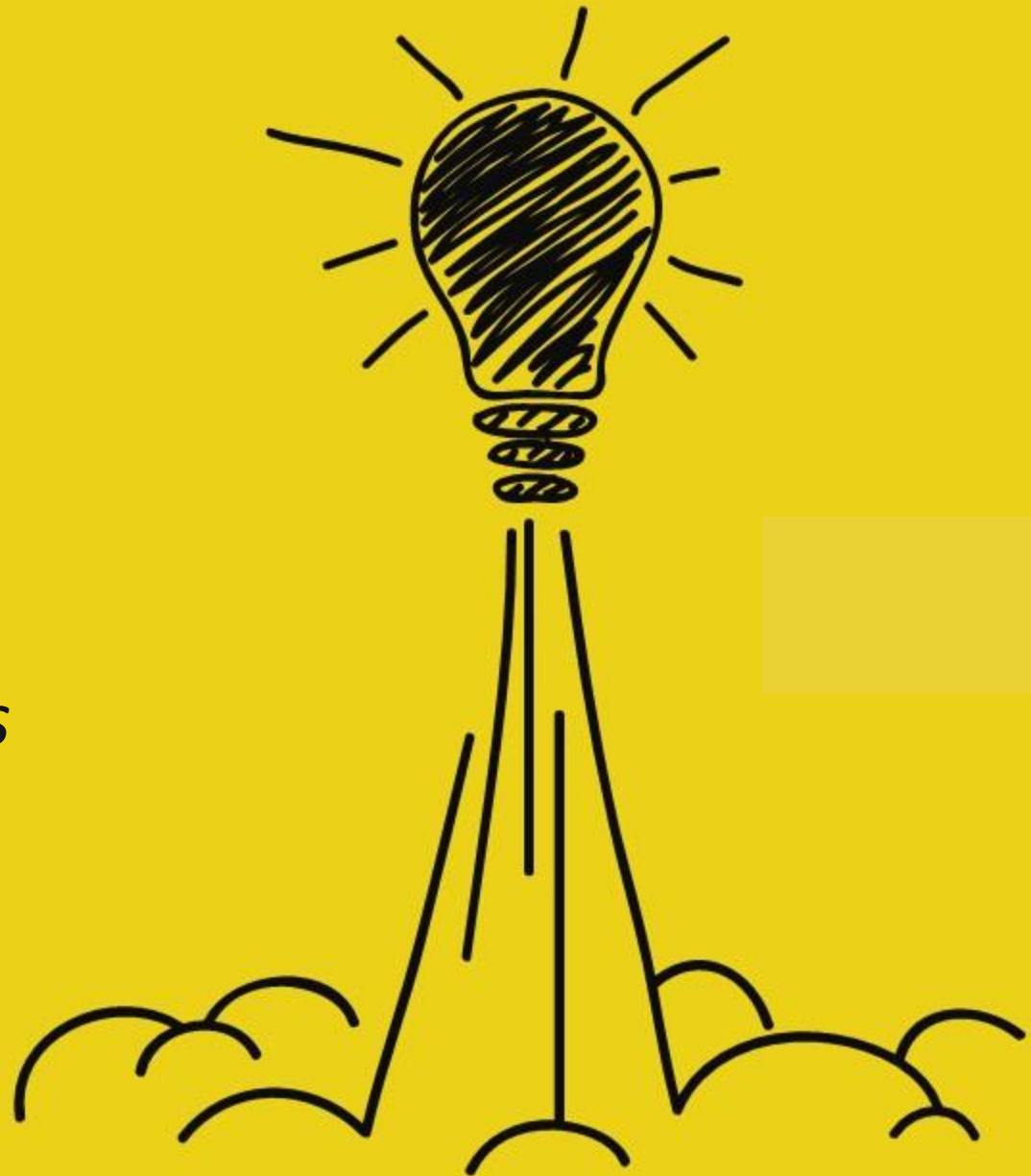


Expanded Contemporary Model of Dyslexia



Big Idea

The link between oral language and dyslexia is encoded in our DNA.



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Section 3

Dyslexia
Brain Basis



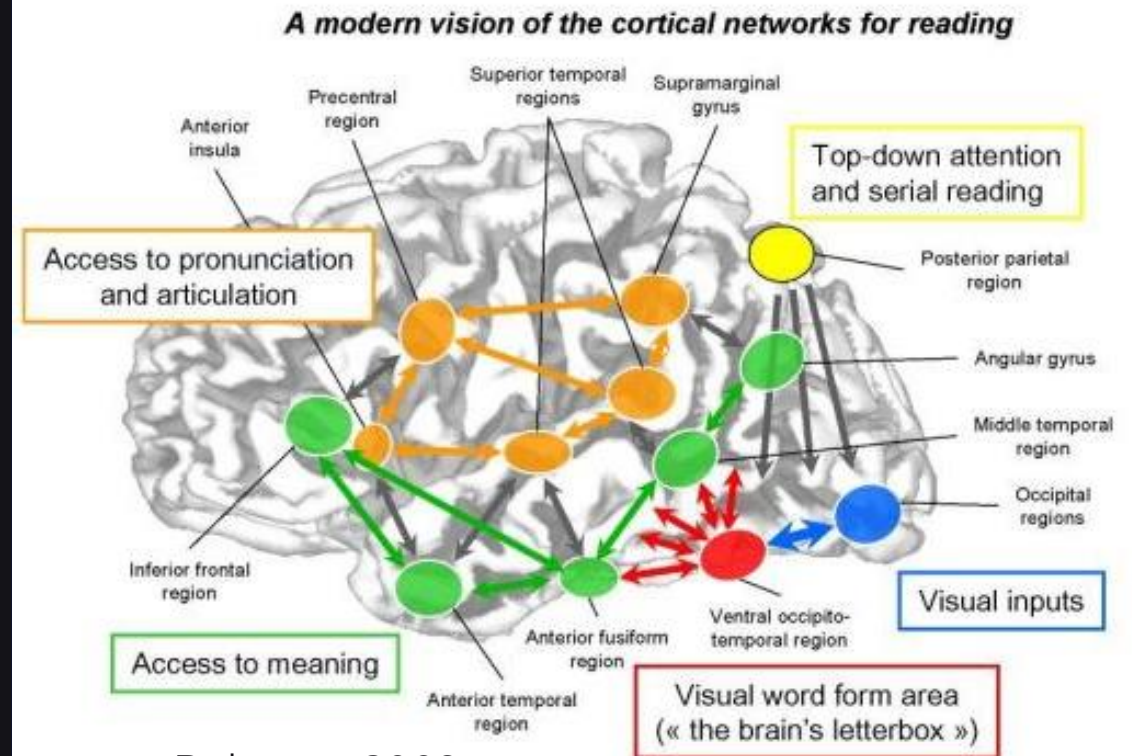
Dyslexia and Neurobiology

Differences are commonly observed in the brains of individuals with dyslexia when compared to their peers with typical reading development

- 1) Structural Brain Differences
- 2) Functional Brain Differences
- 3) Differences in Brain Connectivity
- 4) Differences in Brain Chemistry

Dyslexia is a brain-based type of learning disability that specifically impairs a person's ability to read.

Excerpt from the definition adopted by the National Institute of Child Health and Human Development (2014)



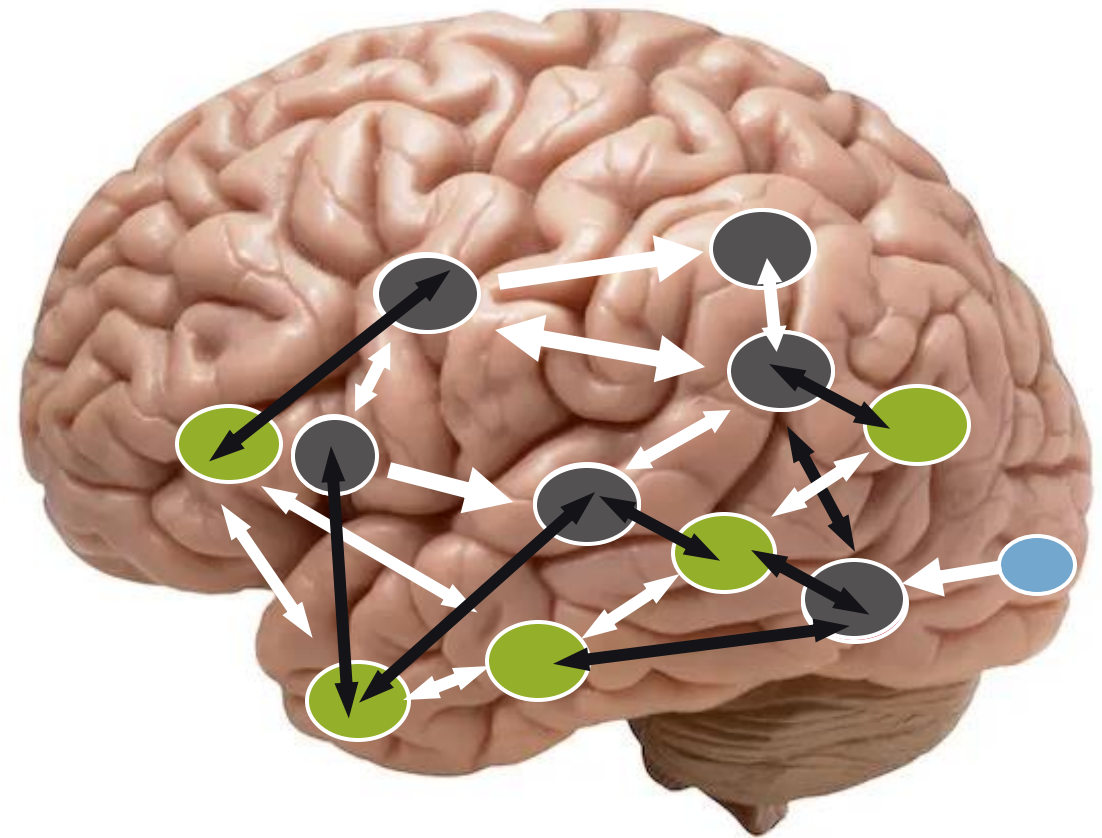
Brain Differences Associated with a Dyslexia

Differences occur in 3 main areas:

1. Areas in the back of the brain involved in mapping letters and sounds together
2. The brain's letterbox responsible for processing letters as visual units.
3. Areas in the front of the brain involved in the articulation of spoken language.

Richlan, F., et al., 2011; Pugh et al., 2010

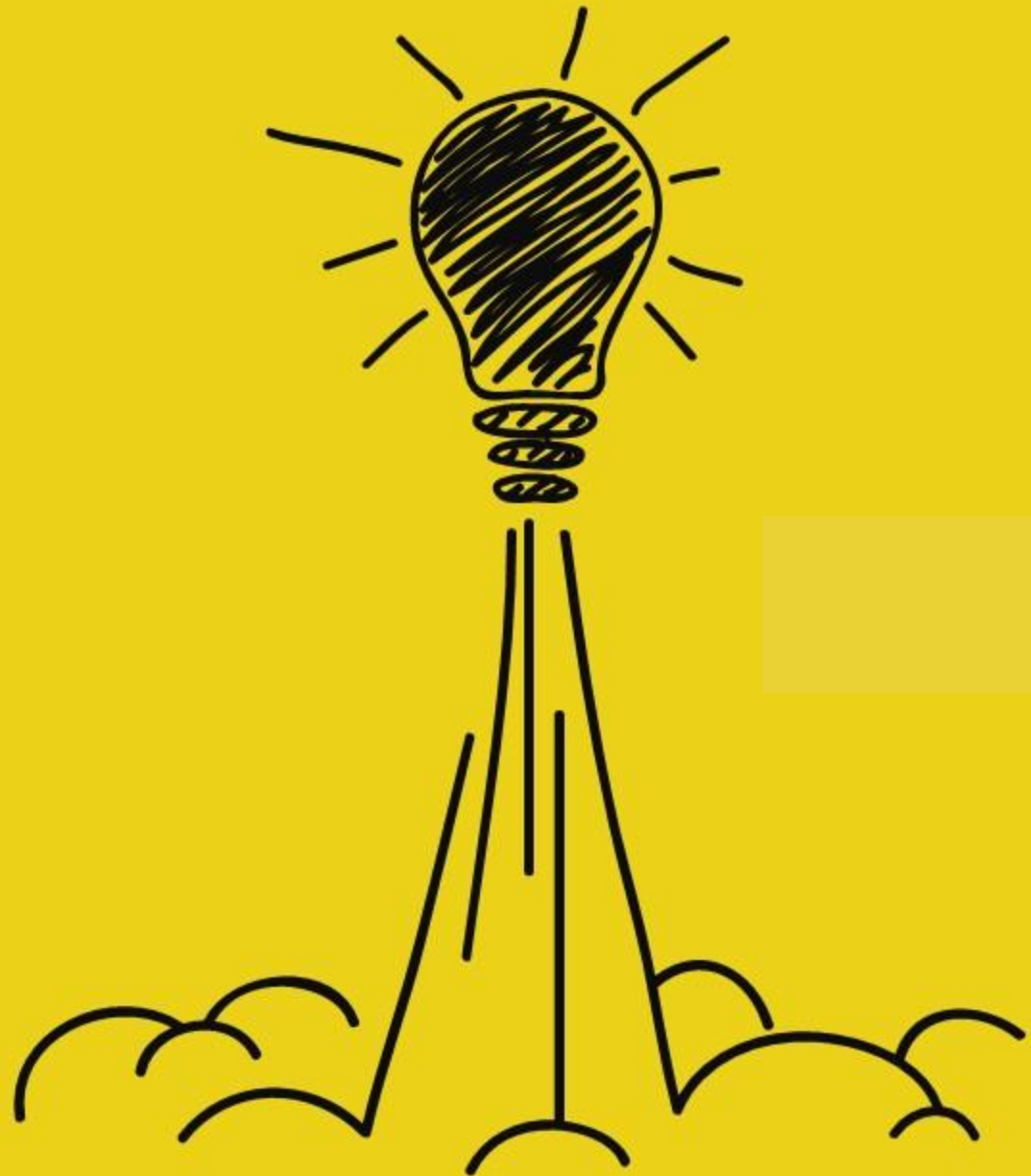
Brain differences are observed between children with dyslexia compared to their peers who do not struggle to read.



Left hemisphere

Big Idea

Exploring brain-based differences of dyslexia highlights the role of language processing.



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Section 4

Dyslexia *Characteristics*





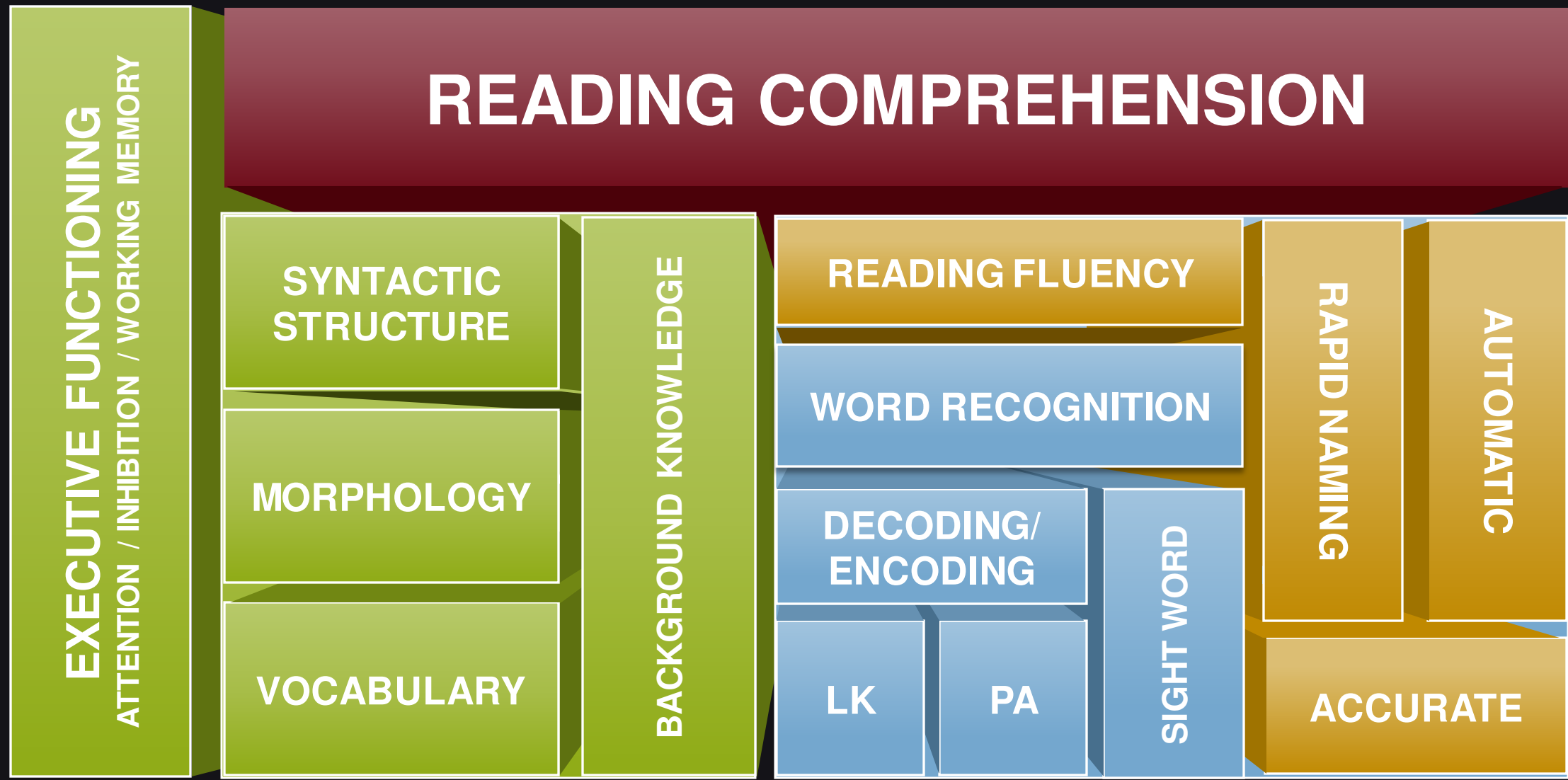
dyslexia

Dyslexia is a specific learning disability that is neurobiological in origin. It is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities. These difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede the growth of vocabulary and background knowledge.



Components of Skilled Reading

A Less Simple View

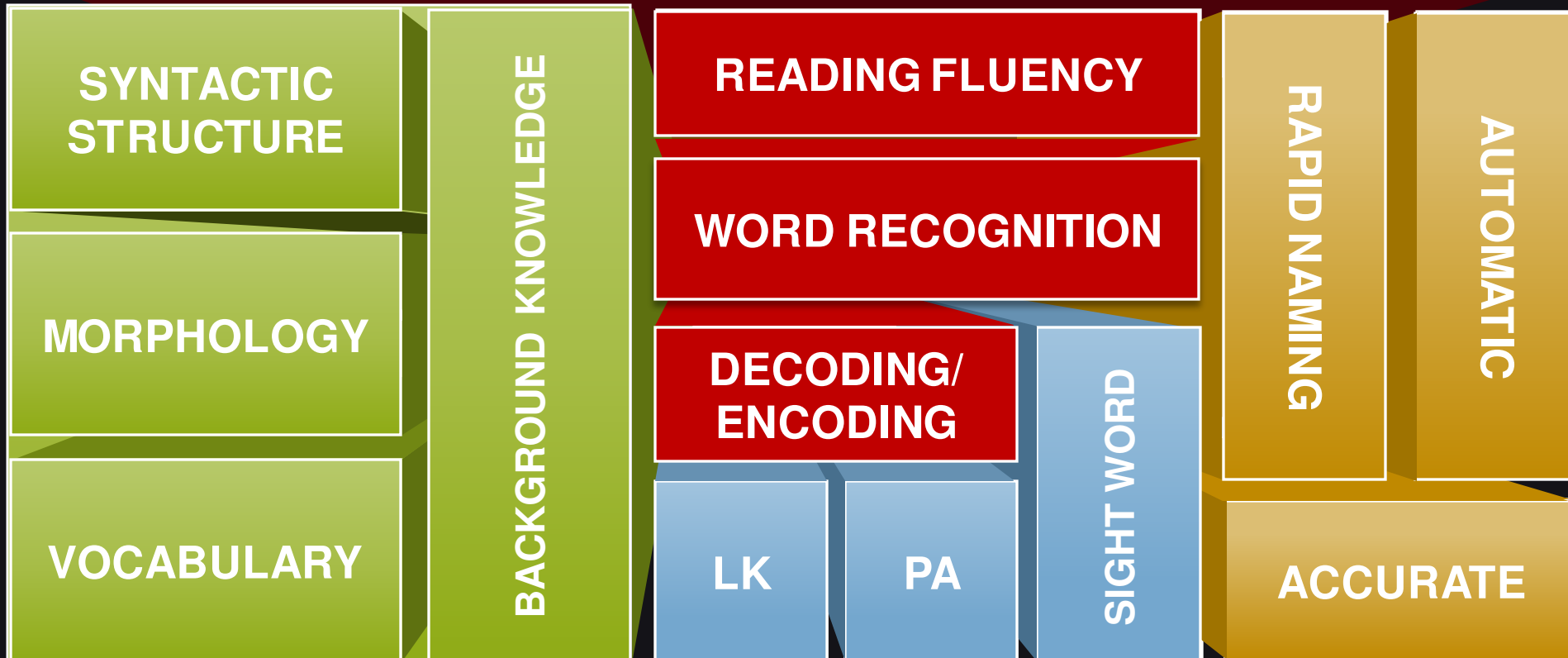




Primary Characteristics of

dyslexia

READING COMPREHENSION

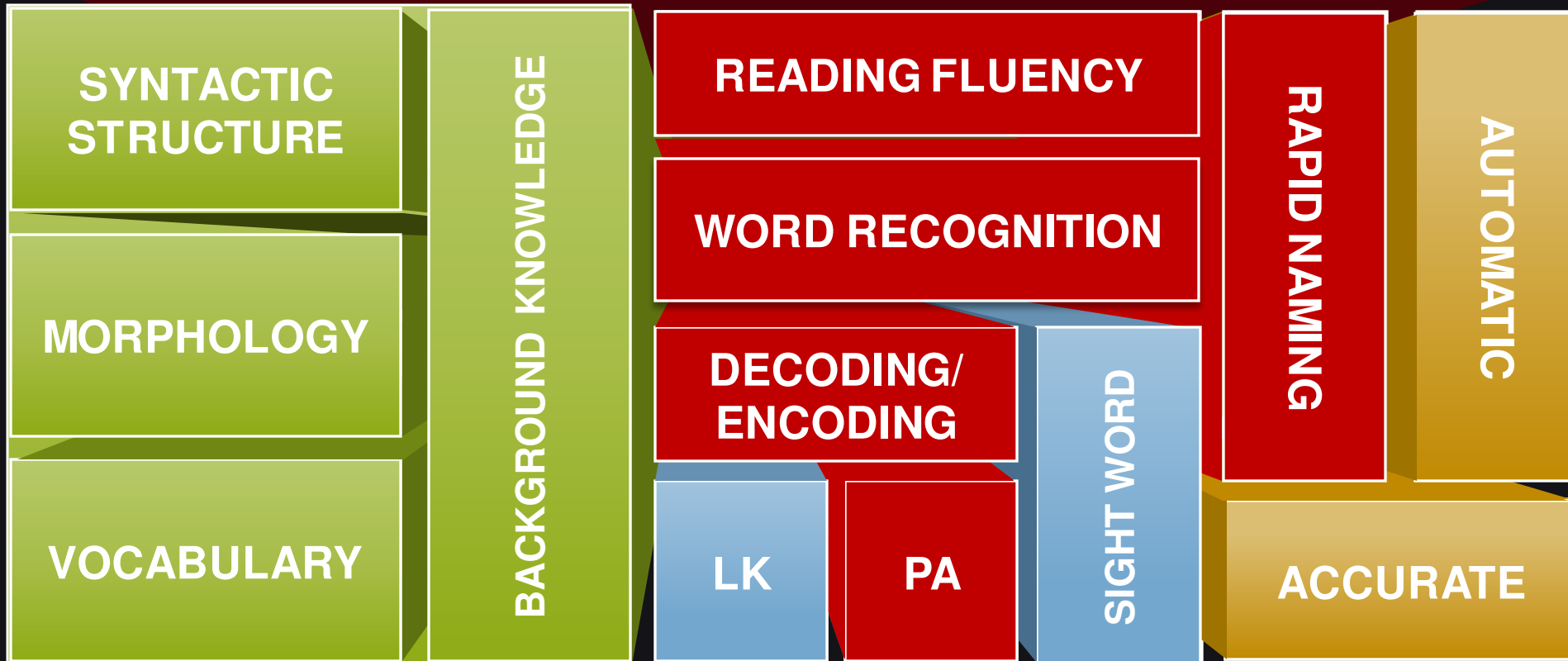




Deficits Associated with



READING COMPREHENSION

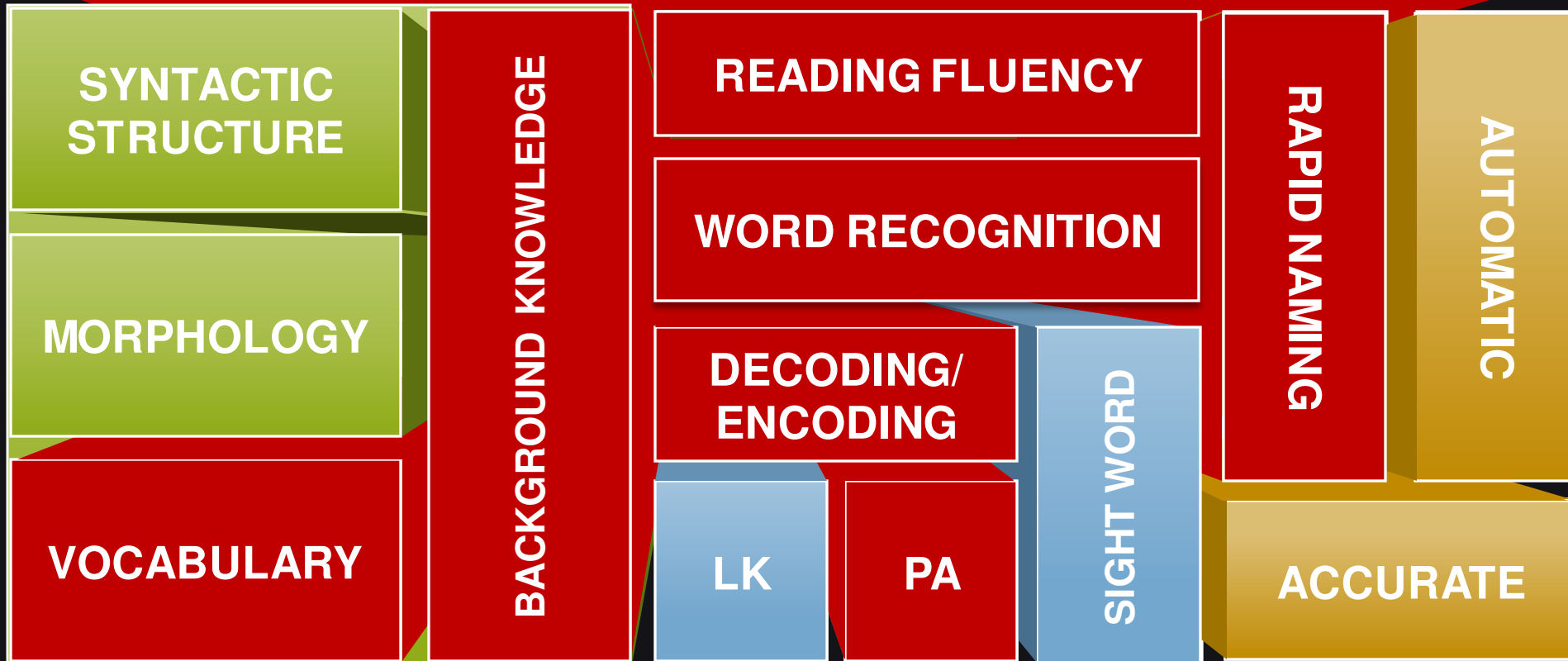




Secondary Consequences



READING COMPREHENSION





People often ask about the presentation of dyslexia in different languages.

Are there differences in presentation in the primary characteristics?

Summary of Key Pattern of Results (Carioti et al., 2021)

	Group	Ortho	Age	OrthoXAge
Word Reading				
Accuracy	Yes	Yes	Yes	Yes
Fluency (TU)				
Fluency (TL)				
Non-Lexical Decoding				
Accuracy				
Fluency (TU)				
Fluency (TL)				
Related Skills				
Phonological Manipulation				
Non-word Repetition				
Working Memory				
Non-verbal Reasoning				

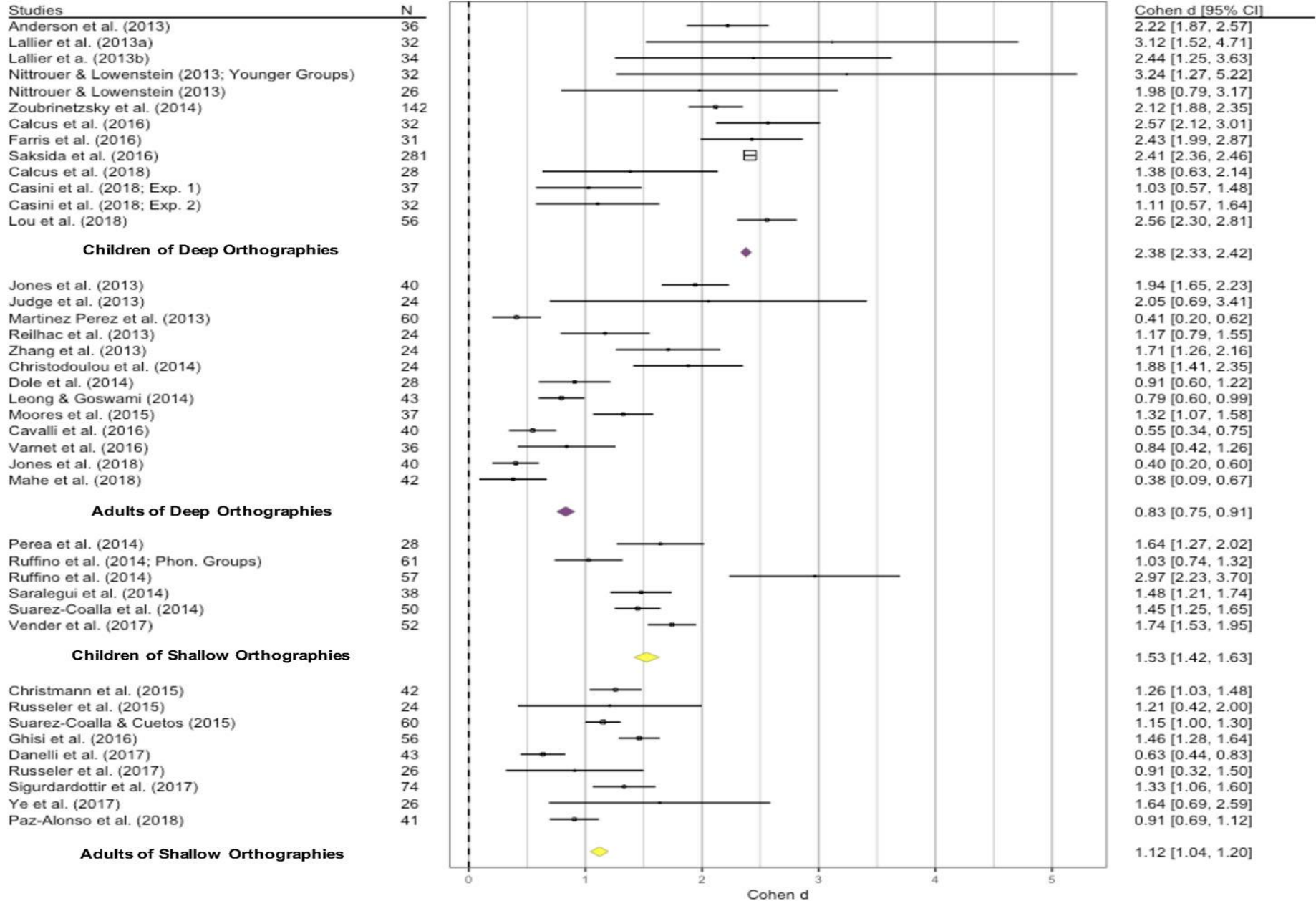
TU – time-unlimited; TL – time-limited



People often ask about the presentation of dyslexia in different languages.

Are there differences in presentation in the primary characteristics?

Forest Plot of the random effect model on word reading accuracy





People often ask about the presentation of dyslexia in different languages.

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Summary of Key Pattern of Results (Carioti et al., 2021)

	Group	Ortho	Age	OrthoXAge
Word Reading				
Accuracy	Yes	Yes	Yes	Yes
Fluency (TU)	Yes	No	No	No
Fluency (TL)	Yes	No	No	No
Non-Lexical Decoding				
Accuracy	Yes	No	Yes	No
Fluency (TU)				
Fluency (TL)				
Related Skills				
Phonological Manipulation				
Non-word Repetition				
Working Memory				
Non-verbal Reasoning				

TU – time-unlimited; TL – time-limited



People often ask about the presentation of dyslexia in different languages.

Are there differences in presentation in the primary characteristics?

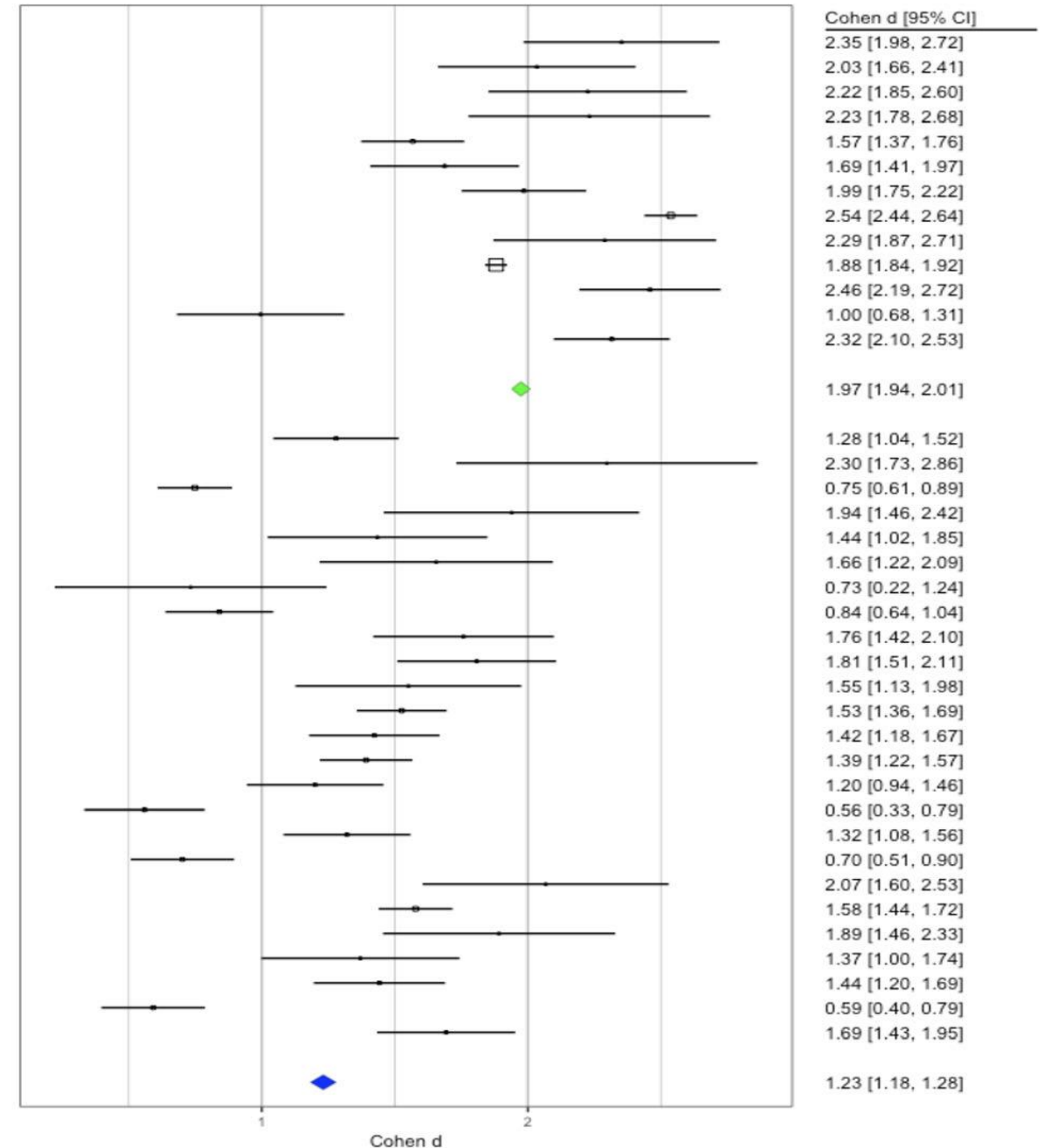
Forest Plot of the random effect model on non-lexical decoding accuracy

Studies	N
Anderson et al. (2013)	36
Lallier et al. (2013a)	32
Lallier et a. (2013b)	34
Perea et al. (2014)	28
Ruffino et al. (2014; Phon. Groups)	61
Saralegui et al. (2014)	38
Suarez-Coalla et al. (2014)	50
Zoubrinetzsky et al. (2014)	142
Farris et al. (2016)	31
Saksida et al. (2016)	278
Vender et al. (2017)	52
Calcus et al. (2018)	28
Toffalini et al. (2018)	60

Children

Jones et al. (2013)	40
Judge et al. (2013)	23
Martinez Perez et al. (2013)	60
Reilhac et al. (2013)	24
Zhang et al. (2013)	24
Christodoulou et al. (2014)	24
Dole et al. (2014)	28
Christmann et al. (2015)	42
Gabay et al. (2015)	32
Moores et al. (2015)	37
Russeler et al. (2015)	24
Suarez-Coalla & Cuetos (2015)	60
Cavalli et al. (2016)	40
Ghisi et al. (2016)	56
Jones et al. (2016)	36
Varnet et al. (2016)	36
Cavalli et al. (2017)	40
Danelli et al. (2017)	43
Russeler et al. (2017)	26
Sigurdardottir et al. (2017)	74
Ye et al. (2017)	26
Giraldo-Chica & Schneider (2018)	26
Jones et al. (2018)	40
Mahe et al. (2018)	42
Paz-Alonso et al. (2018)	41

Adults





People often ask about the presentation of dyslexia in different languages.

Are there differences in presentation in the primary characteristics?

Are there differences in the associated skills?

Summary of Key Pattern of Results (Carioti et al., 2021)

	Group	Ortho	Age	OrthoXAge
Word Reading				
Accuracy	Yes	Yes	Yes	Yes
Fluency (TU)	Yes	No	No	No
Fluency (TL)	Yes	No	No	No
Non-Lexical Decoding				
Accuracy	Yes	No	Yes	No
Fluency (TU)	Yes	No	No	No
Fluency (TL)	Yes	No	No	No
Related Skills				
Phonological Manipulation	Yes	No	No	No
Non-word Repetition	Yes	No	No	No
Working Memory	Yes	No	No	No
Non-verbal Reasoning	No	No	No	No

TU – time-unlimited; TL – time-limited

Note. *Non-verbal reasoning did not moderate differences in word reading (accuracy, fluency-TU, fluency-TL).*



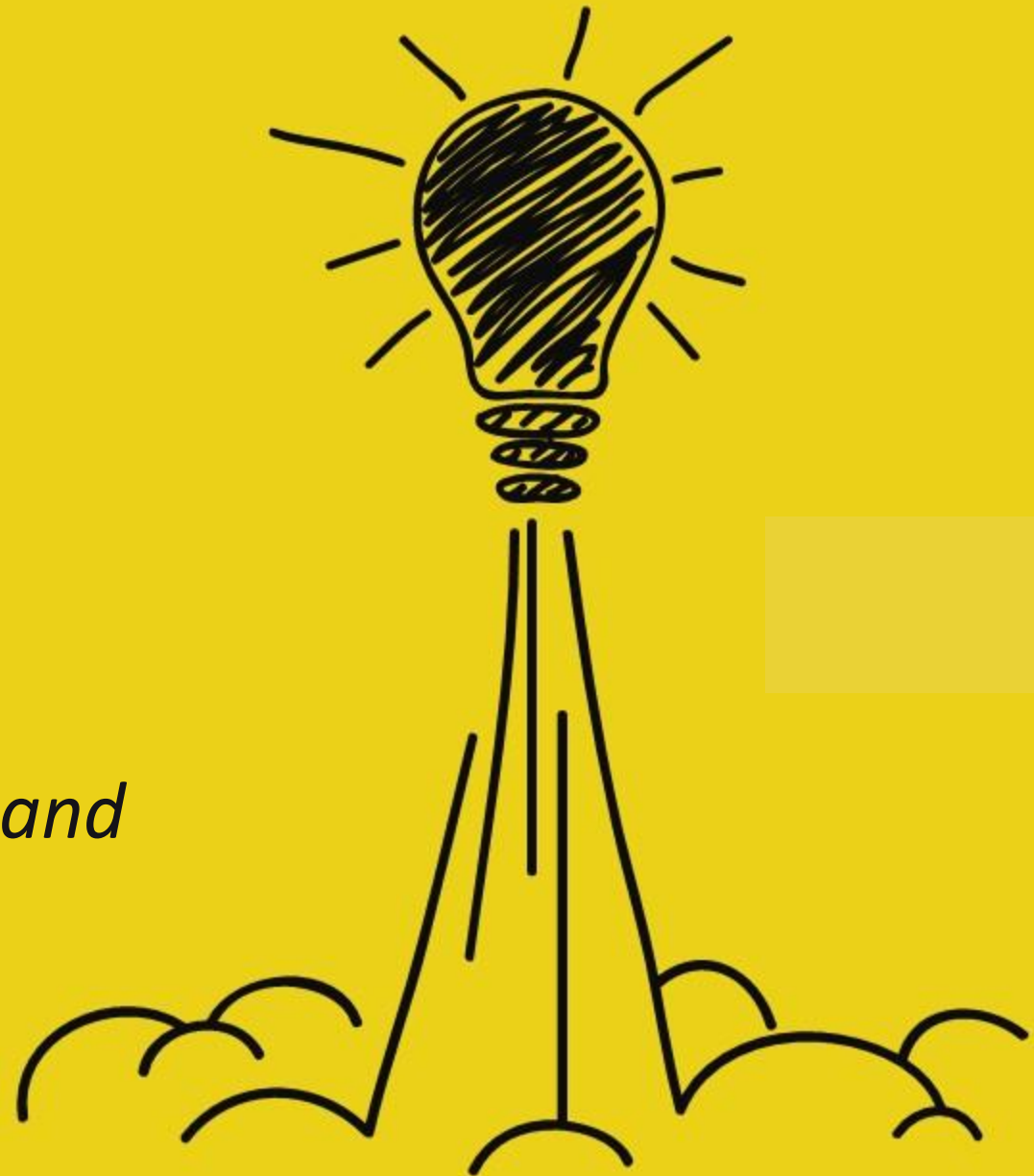
dyslexia

Dyslexia is a learning disability that involves significant difficulties in reading and spelling single words accurately and automatically. These difficulties are observed despite the provision of generally effective reading instruction and supplemental interventions. Word reading and spelling difficulties in dyslexia are often associated with difficulties in phonological processing, but dyslexia is not identified when reading difficulties are the result of second language learning, problems with vision or hearing, or intellectual disability.

Vaughn et al. (2024) *Annals of Dyslexia*

Big Idea

We need a clear and concise definition of dyslexia that directly informs identification and intervention.



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Section 5

Dyslexia
*Secondary
Consequences*





Mental Health as a Secondary Consequence

Catts et al. (2024) *Annals of Dyslexia*

There is a growing awareness of the socio-emotional impact of dyslexia (and literacy struggles) on the mental well being of an individual.

Many studies have documented high proportions of anxiety and depression among children with dyslexia.

(Francis et al., 2019 Vierira et al., 2024)



Vieira et al. (2024) A random-effects model revealed a moderate overall effect size (Hedge's $g = .54$). Individuals with Reading disability experience more internalizing problems than their chronological-age (CA) controls.

Francis et al. (2019) Observed statistically significant differences between poor readers and typical readers on general measures of internalizing problems ($d=0.41$), anxiety ($d=0.41$), and depression ($d=0.23$).

Donolato et al. (2022) – Children with LLDs showed higher internalizing (Hedges' $g = 0.36$) and externalizing problems (Hedges' $g = 0.42$) than controls did. The group standardized difference in internalizing problems was moderated by the primary disorder, with children with language disorders (Hedges' $g = 0.494$) showing more internalizing problems than those with reading disorders (.310).

Overall, prior research has explored internalizing issues more than externalizing issues. However, Donolato et al. (2022) found both internalizing and externalizing issues to be more prominent in children with a reading disability. These findings point to a relationship between dyslexia and an increased incidence of decreased psychological wellbeing.

Meta-Analysis

Several meta-analyses have explored the relationship between dyslexia and a specific learning disability in reading and mental health outcomes.



Developmental Epidemiological Framework

Kellam & Rebok, 1992; Kellam et al., 1994

Psychological Well-Being

Refers to an individual's overall mental health and emotional state. It encompasses factors such as happiness, life satisfaction, positive affect, and the absence of psychological distress or mental health problems such as anxiety or depression.

Social Adaption (*Adaptive, Maladaptive*)

Refers to an individual's ability to effectively function and thrive within their social environment. It encompasses a range of social skills, behaviors, and interactions that enable individuals to navigate social situations, form relationships, and participate in social roles and activities.

**DEPRESSION
ANXIETY**

**READING /
SPELLING
DEFICITS**

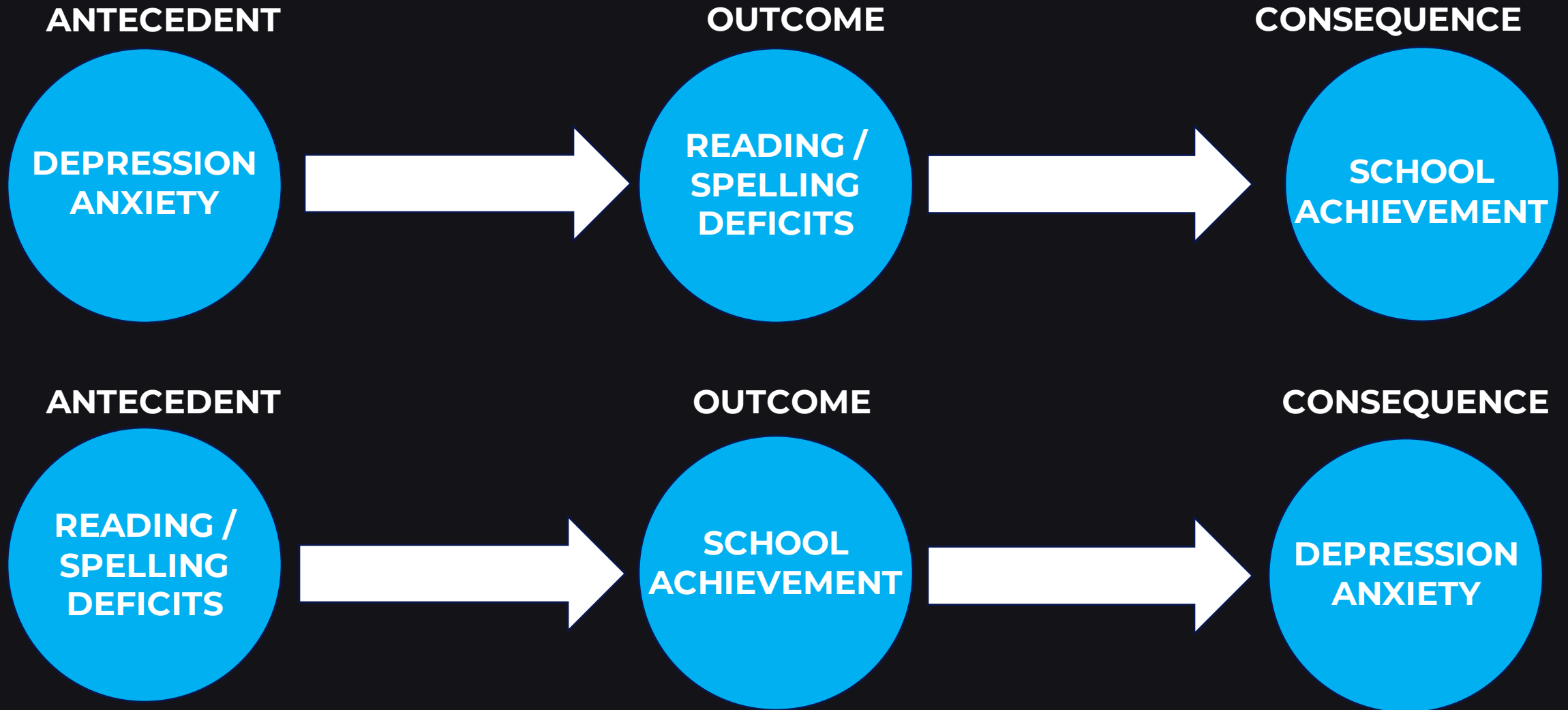
Maladaptation at a particular developmental level reflects a failure to resolve the social task demands that are most salient for that period of development.

Development happens within a larger ecological system. Reading and spelling are defined by people with the ability to do so as being important to do within a societal context (e.g., parents, teachers, peers).



Developmental Epidemiological Framework

Kellam & Rebok, 1992; Kellam et al., 1994





Developmental Epidemiological Framework

Kellam & Rebok, 1992; Kellam et al., 1994

ANTECEDENT

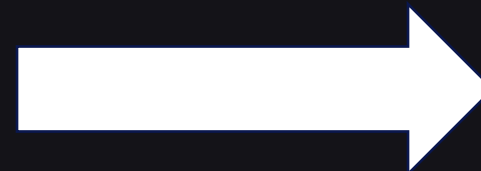
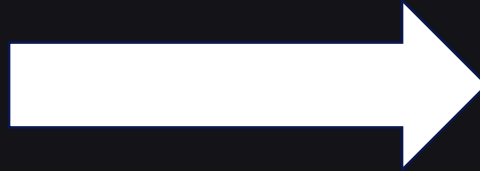
**READING /
SPELLING
DEFICITS**

OUTCOME

**SCHOOL
ACHIEVEMENT**

CONSEQUENCE

**DEPRESSION
ANXIETY**



Failure to adequately respond early in life makes later social adaptation and integration more difficult and can lead to internalizing symptoms or vulnerabilities.

Kellam et al. 1994



Millennium Cohort Study - UK

Sample

N = 7870



Fit Indices

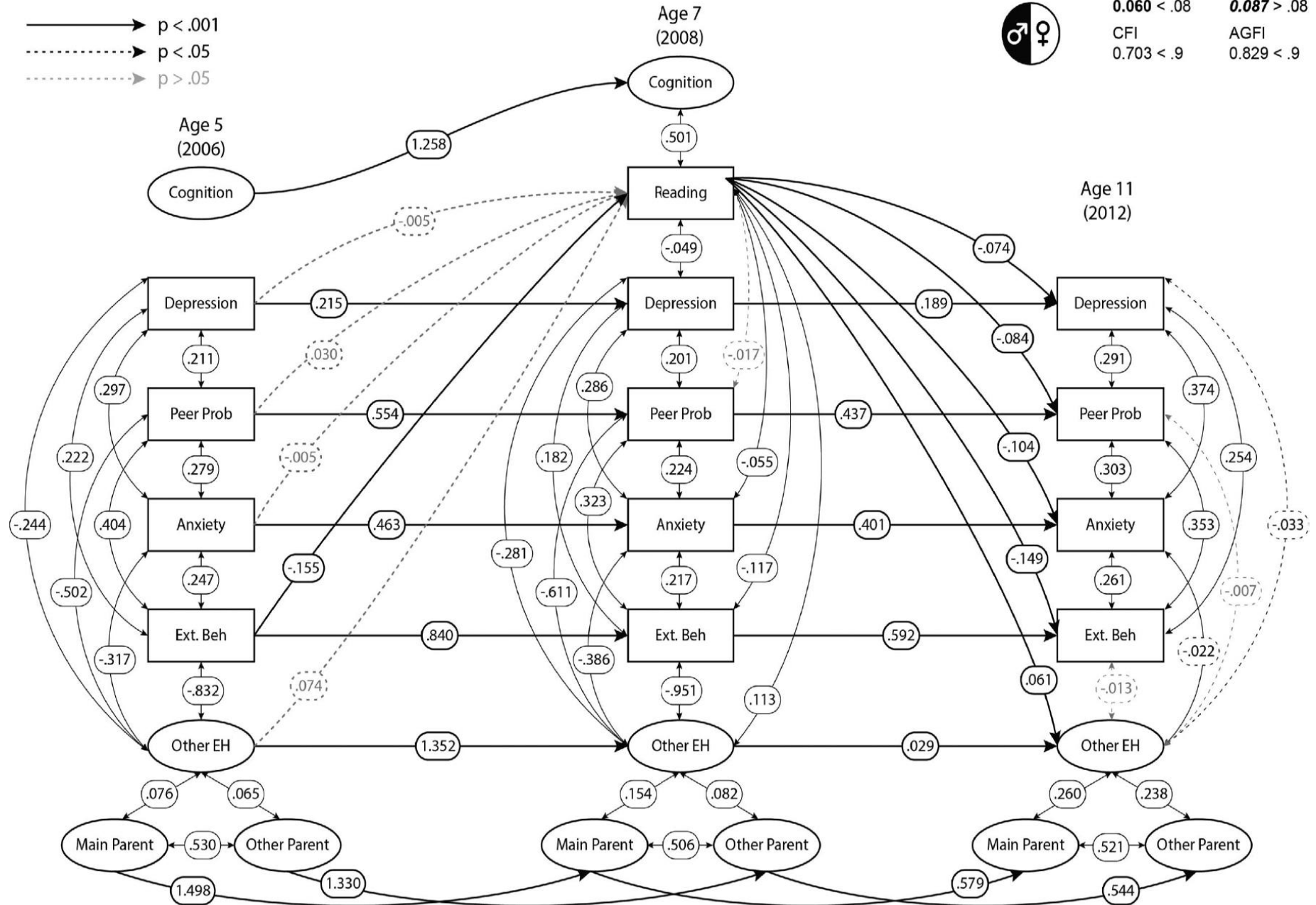
RMSEA
0.060 < .08

CFI
0.703 < .9

SRMR
0.087 > .08

AGFI
0.829 < .9

→ p < .001
- - - - - p < .05
- - - - - p > .05



The nature of the relationship between mental health challenges and reading struggles

McArthur et al. (2022)



The nature of the relationship between mental health challenges and reading struggles





Do mental health issues lead to reading struggles?

Do reading struggles lead to mental health issues?

McArthur et al. (2022)

Table 3

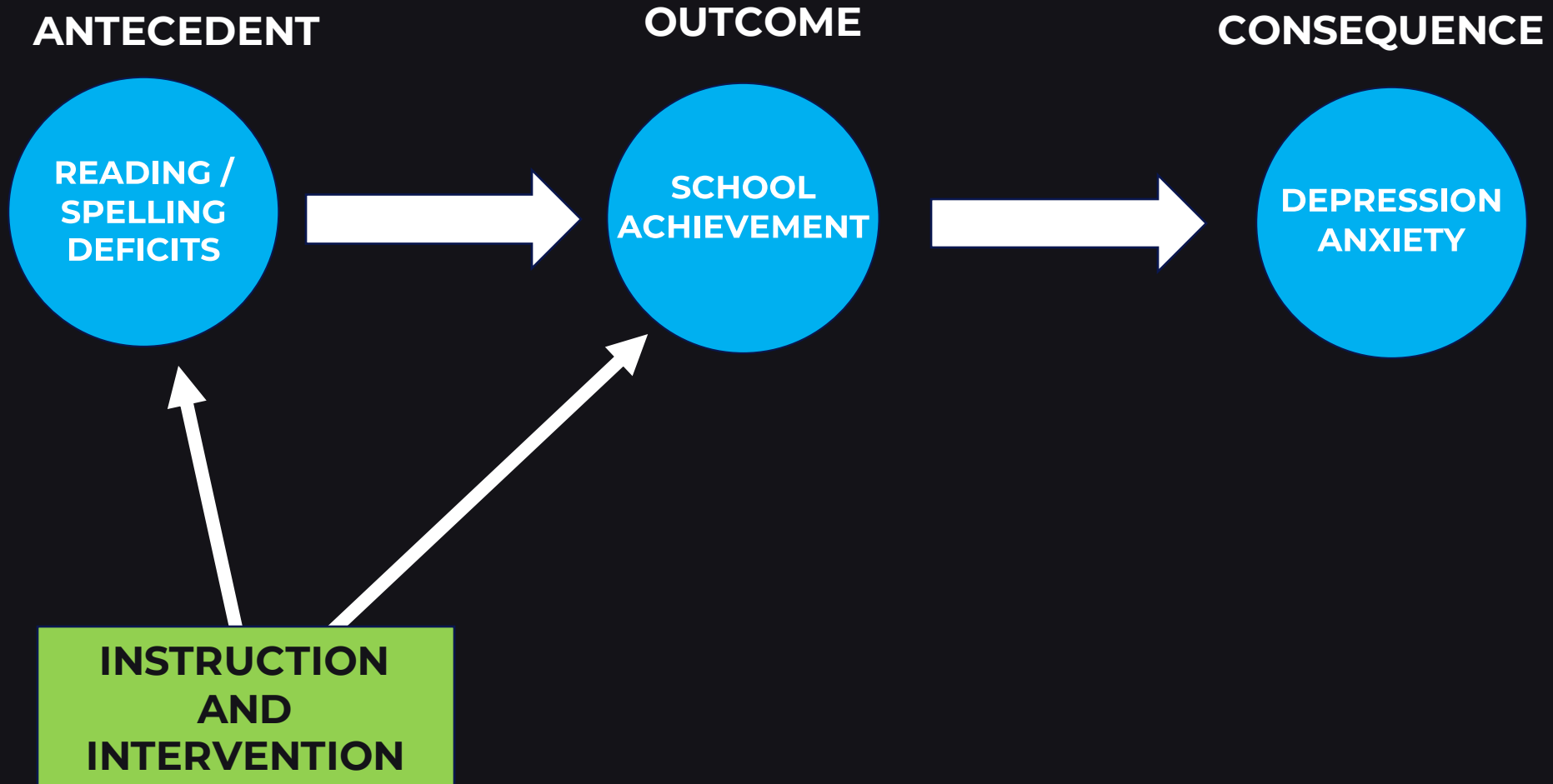
Summary of Key Pattern of Results from all 4 Longitudinal Datasets

Measure	MCS	ECLS:98	ECLS:10	ELVS	Total
<i>From Early Emotional health (5) to Reading (7)</i>	N=7870	N=8001	N=7160	N=768	
Peer Relationships	No	Yes	No	No	1/4
Depression/Internalizing	No	No	No	No	0/4
Externalizing	Yes	Yes	No	Yes	3/4
Attention			Yes		1/1
Anxiety	No			No	0/2
<i>From Reading (7) to later emotional health (9/11)</i>					
Peer Relationships	Yes	Yes	Yes	Yes	4/4
Depression/Internalizing	Yes	Yes	Yes	Yes	4/4
Externalizing	Yes	Yes	Yes	Yes	4/4
Attention			Yes		1/1
Anxiety	Yes			Yes	2/2
Bullying			Yes		1/1
Reading self-concept		Yes	Yes		2/2



Developmental Epidemiological Framework

Kellam & Rebok, 1992; Kellam et al., 1994





Kellam et al., (1994) Provided a reading intervention to first grade students as part of a randomized controlled study. Overall observed students who responded well to the reading intervention did not develop as many depressive symptoms as did students who did not respond as well to the intervention.

Traficante et al. (2017). Provided a reading intervention to second-grade students as part of a controlled study. Overall, they observed that students who received the intervention from teachers experienced gains in general well-being and school well-being. The students who received a computerized decoding intervention or no intervention did not make similar gains.

Grills et al. (2023) Provided tier-2 intervention to second grade students as part of a randomized controlled study. Students who responded better to the tier-2 instruction experienced a greater decline in their internalizing symptoms. Evidence was found that students with greater internalizing symptoms at the beginning of the year did not respond as well to Tier 2 instruction. However, these data

Overall, research that monitors internalizing and externalizing mental health outcomes as a function of response to literacy instruction and intervention is very limited, but the initial results are promising.

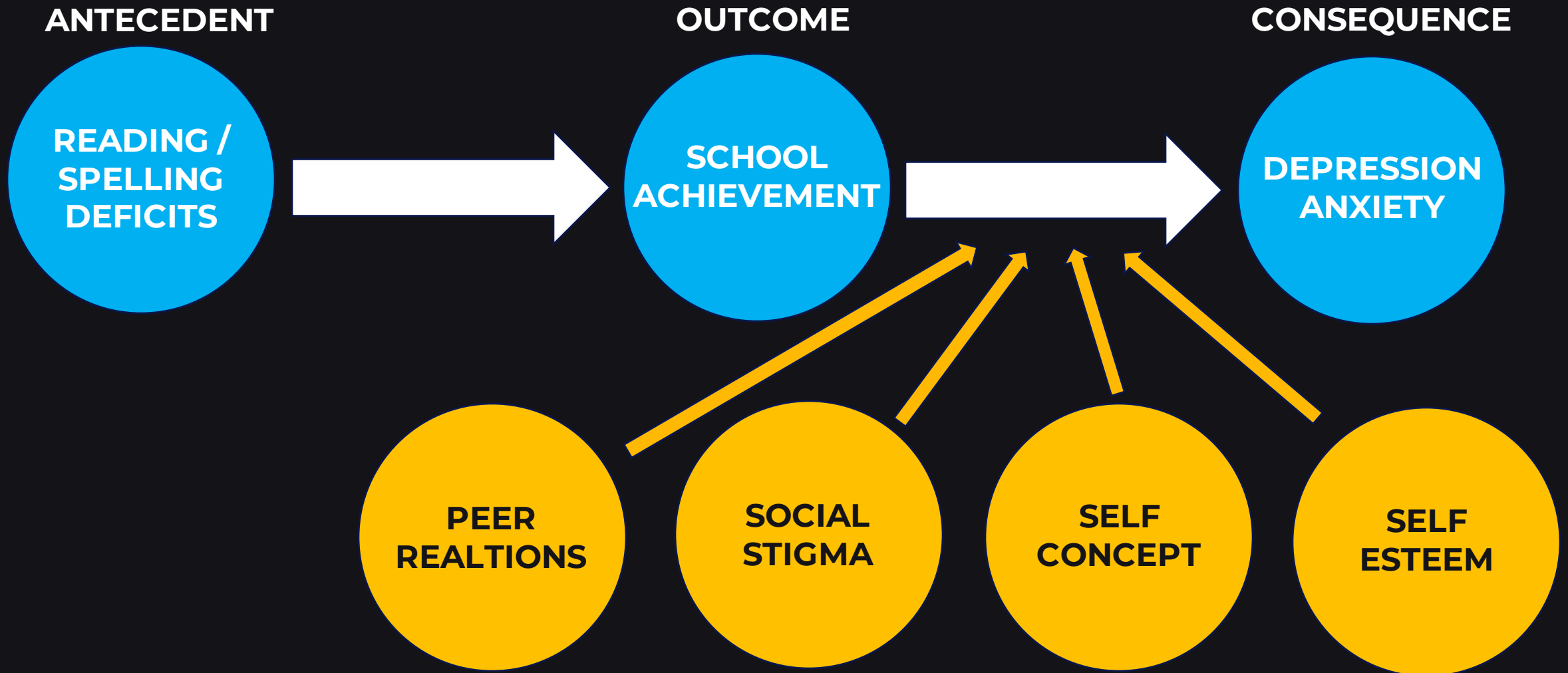
Prevention Based Approaches

Some researchers have attempted to use academic instruction and intervention to reduce mental health symptoms in young children.



Developmental Epidemiological Framework

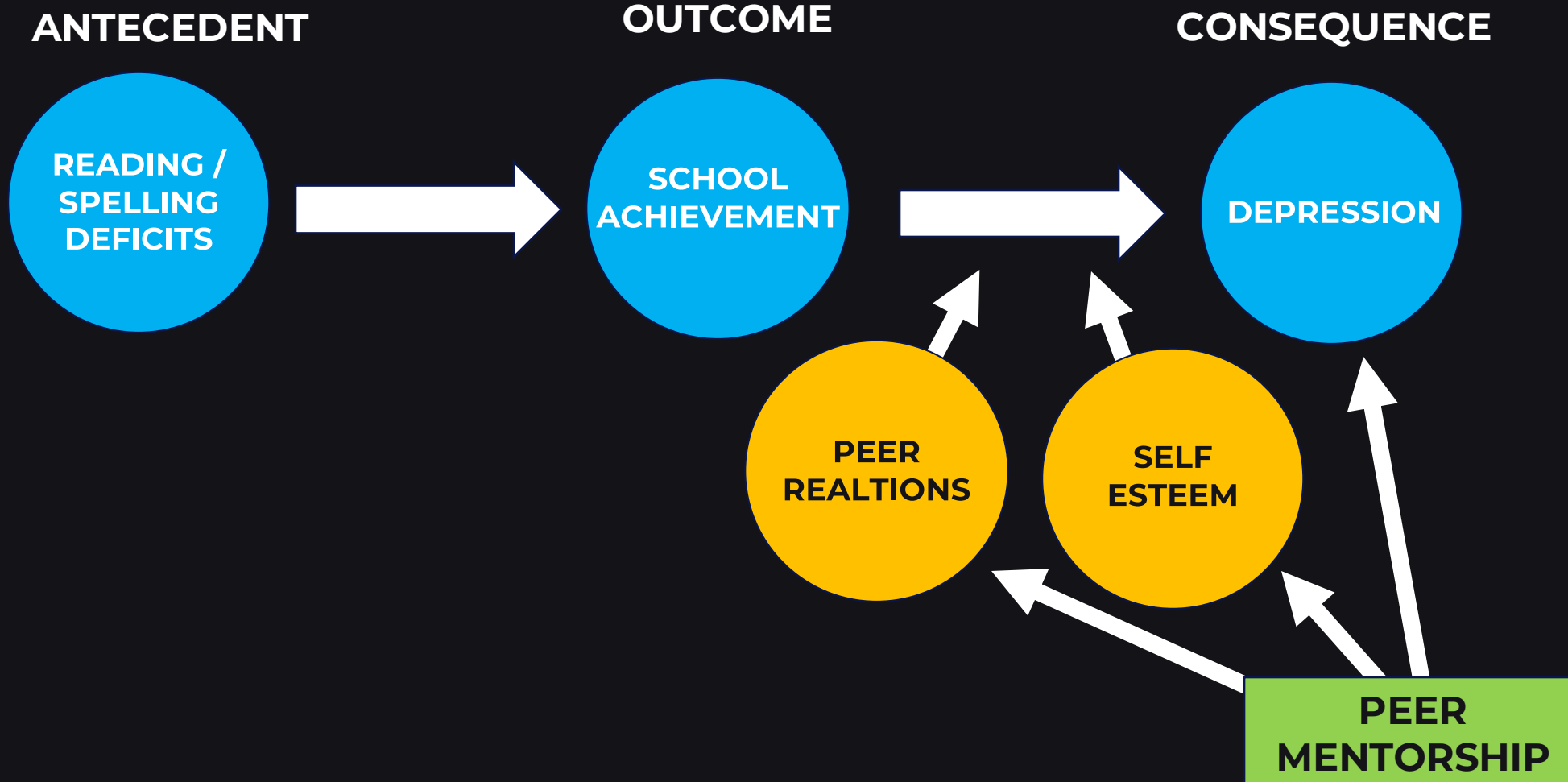
Kellam & Rebok, 1992; Kellam et al., 1994





Developmental Epidemiological Framework

Kellam & Rebok, 1992; Kellam et al., 1994





Near Peer Mentoring

Research has explored the impact of near-peer mentoring on the psychological well-being of neurominorities, such as dyslexia and ADHD.

Haft et al., (2019) Conducted a trial of a near mentoring program (eye-to-eye) with elementary and middle school students (age 8-16 years). The study included typically developing control students (n=84), non-mentored students with LD/ADHD (n=51), and mentored students with LD/ADHD (n=99). Measures of self-esteem, interpersonal relations, depression, and anxiety were obtained in the fall and spring. Mentored students received 18 peer-mentorship sessions.

Change in Outcomes measures from fall to spring

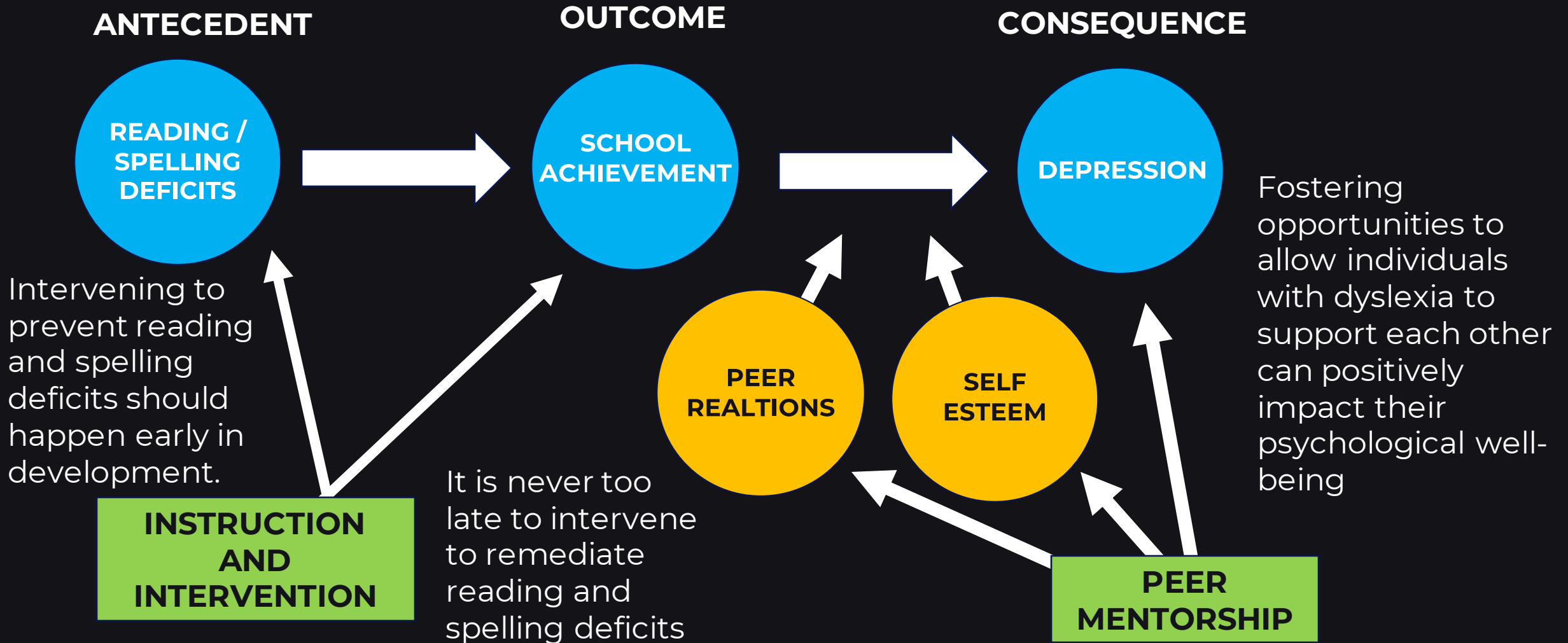
	TD-Control	NM-LD/ADHD	Mentored-LD/AHDH
Self-esteem	No Change	Decreased	Increased
Interpersonal Relations	Decreased	Decreased	No Change
Depression	No Change	Increased	Decreased
Anxiety	No Change	No Change	No Change

In this initial study, near-peer mentorship showed promise in supporting the psychological well-being of students with LD, ADHD, or both.



Developmental Epidemiological Framework

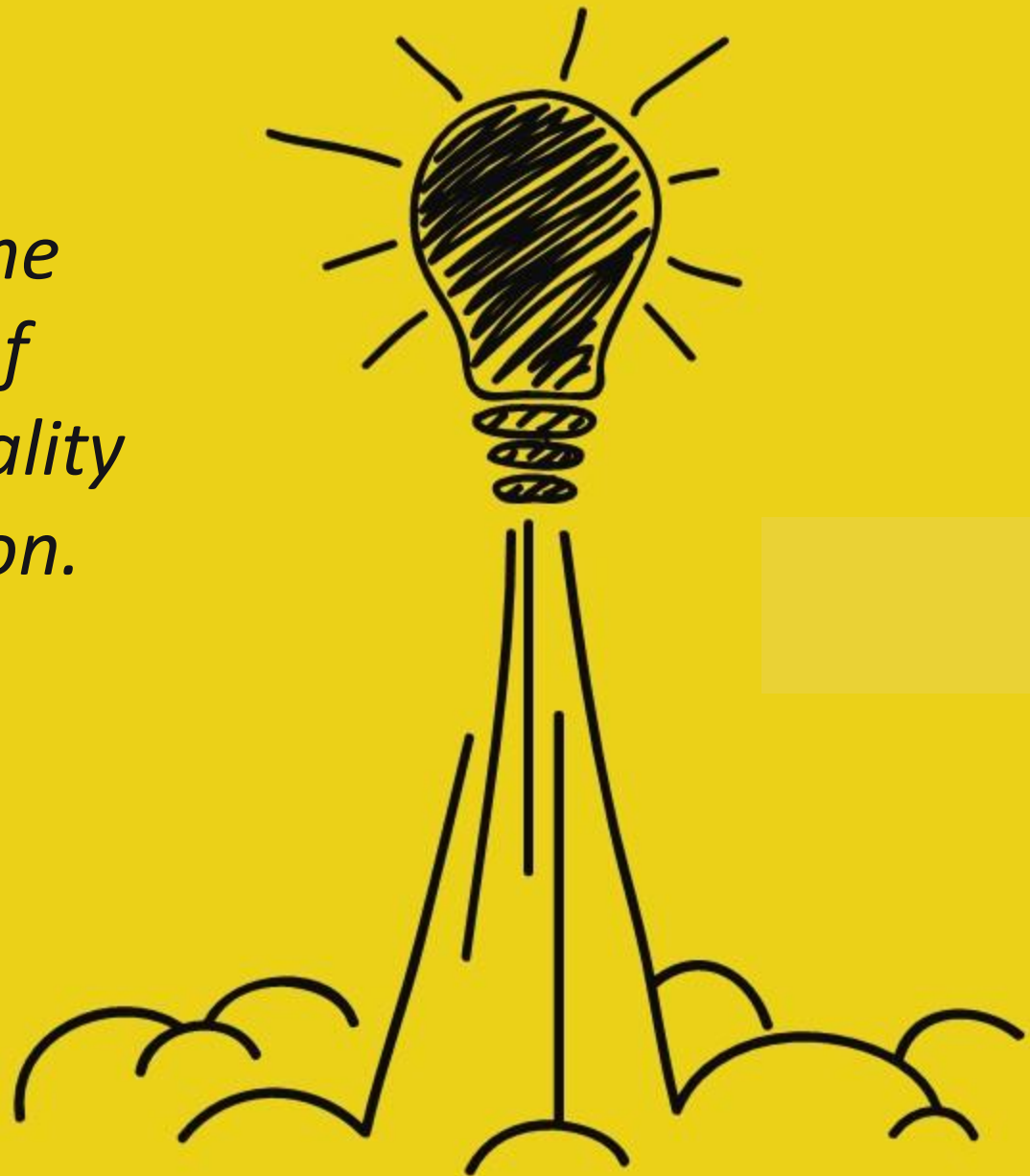
Kellam & Rebok, 1992; Kellam et al., 1994



Big Ideas

1) Educators can impact the psychological well-being of their students through quality instruction and intervention.

2) Students can support each other to raise their psychological well-being through peer mentorship.



The “WHO” and “WHERE”

Instructors

Tier 1:
General Education Classroom Teacher

Tier 2:
General or Special Education Teacher,
Reading Specialist, Interventionist

Tier 3:
Dyslexia Specialist, Interventionist, Special
Education Teacher

The “WHAT”

Structured Literacy

The “HOW”

Instructional content integrates the domains of language as they pertain to reading (word recognition and comprehension) and written expression (handwriting, spelling, and composition).

Essential principles of instruction guide how content is taught for written language (reading, written expression). These principles are beneficial for all students and necessary for struggling students.

Word Recognition, Spelling, and Handwriting

Comprehension, Composition

Direct & Systematic

Mastery Oriented with Practice for Automaticity

Phoneme Grapheme

Vocabulary, Background, Knowledge

Morphemes

Sentence Structure, Grammar

Syllables & Stress Patterns

Text Structure

Orthographic Conventions

Critical Thinking

Integrated Language, Reading & Writing Instruction Supporting Automaticity, Fluency, and Reading Proficiency

Explicit

Data Driven

Sequential

Targeted Prompt Feedback

Cumulative

Highly Interactive

Multimodal

Scaffolded

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