

Unmasking Dyslexia

What is Dyslexia?

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What is Dyslexia?

How society defines dyslexia

Dyslexia is a learning disability that makes it harder to read words, have accurate spelling, and fluent writing.

What this definition is missing ...

Dyslexia is one of the top three neurodiversity profiles. It is a processing style that has various ways of impacting your child, such as reading, writing, working memory, organization, executive functioning, social interactions, among others.

Up until recently the information around dyslexia only came through educational psychology, which is why we have limited understanding of this dyslexic processing style.

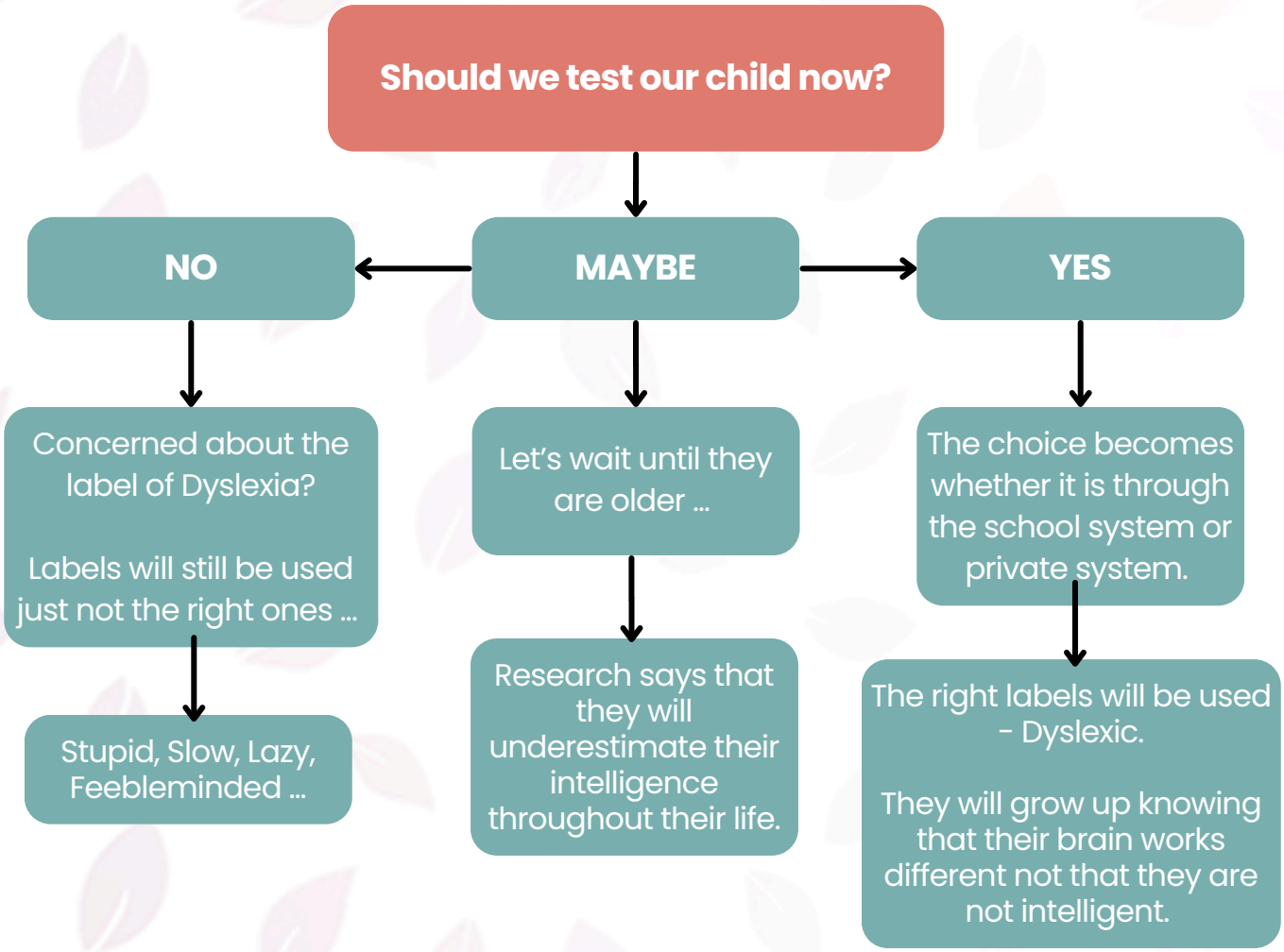
What research says dyslexia is ...

- Dyslexia is neurologically based (Garner, 2021; Palser et al., 2021)
- Has a distinctive brain organization (Caverzasi et al., 2018), with how brain areas are used and neural formations.
- Linked to multiple chromosomal regions (Schumacher et al., 2007; Zaki et al., 2024)
- Has a hereditary rate of 50% to 60% (Schumacher et al., 2007)
- Dyslexics use more of their brain (5% more) than the typical individual. (Washington University, 1999)
- Comes with both challenges and abilities.
- Is a lifelong processing style that does not get "fixed".

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To diagnosis or not

Whether you diagnos or not, there are various considerations to contemplate.



Tip:

Your dyslexic will know that they are different from others. By not having them diagnosed does not make them not dyslexic, it means that they are open to having others miss-label them and their abilities.

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Models of Thought

Different models of thought used towards Dyslexia

Medical Model (first used in 1760):
The search for what is wrong and what can be fixed. The language used to describe dyslexia "feebleminded" causes more harm than good and was a part of the eugenic movement.

Social Model (used since mid 1970's):
That society's misunderstandings contribute to the decreased well-being of the Dyslexic due to barriers that it puts in place – discrimination and prejudice.

Biopsychosocial Model: (used since late 1970's)
That along with the biological differences of the dyslexic brain, their social, physical and emotional environment also creates impact on how this processing style impacts them.

Neurodivergent Model (used since late 1980's):
Natural variation of brain function which focuses on unique abilities and perspectives of those with dyslexia.

Society still uses the medical model

The education system still works through the medical model of disability therefore misconceptions & eugenic belief systems towards dyslexic students still exist (Nisker, 2019).

65.4% of dyslexic adults showed symptoms of PTSD linked to school experiences. Trauma triggers include the smell of schools, small chairs, and visual aids (pictures).

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Types of Dyslexia

Phonological/ Auditory Dyslexia (Dysphonetic Dyslexia): presents as a struggle to connect letters to sounds (sound-symbol correspondence; UP, n.d.). Phonological issues affect the individual's ability to break down words into their phonemic sounds (or syllables), resulting in issues decoding words and words being said wrong.

Surface/Visual Dyslexia (Dyseidetic Dyslexia): issues visually recognizing the words they see, and in addition they struggle with remembering what they read. While they may be able to phonetically sound out words, they cannot recognize words based upon sight, resulting in the need to sound out each word they come across.

Rapid naming deficit: causes the individual to have difficulties quickly naming letters, numbers, and colours.

Double Deficit Dyslexia: individual has two types of dyslexia present for them

Dyslexia does not present the same for everyone.

Levels of dyslexia: Mild, Moderate, & Severe

Levels of the Dyslexic's are not stable levels but fluctuate within the individual's days as their level of well-being influences how they will present.

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Dyslexia & Well-being

Dyslexics carry an invisible stigma that fosters misperceptions and discrimination (Nalavany et al., 2015), potentially leading to devaluation in social settings (Nalavany et al., 2015).

Research shows these consistent results:

- Lower self-concept (self-esteem, self-image, self-perceptions, and self-worth; Humphrey, 2002).
- Dyslexics have a up to 16.6% increase in suicide ideation than the non-dyslexic (Fuller-Thomson et al., 2018).
- Female dyslexics have higher levels of anxiety, self-harm (use of food), and lower levels of self-esteem (Alexander-Passe, 2006, 2015) than the non-dyslexic female.
- 50% of adult dyslexics conceal their diagnosis at work (Gerber, 2012).
- Dyslexics have lower levels of self compassion towards themselves and their abilities (Niolaki et al., 2025).
- 35% Dyslexics report physical abuse before the age of 18 (Fuller-Thomson & Hooper, 2014).

Tip:

It is time that we begin supporting Dyslexics for the beauty that they bring to society rather than shame them for the aspects they cannot change. To do this we need to shift how we view them and move away from a deficit medical model base to a strength base neurodivergent approach.

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Abilities & Challenges

Dyslexic Abilities	Dyslexic Challenges
Material reasoning	Reading, Writing, & Spelling
Interconnected reasoning	Word recall
Pattern recognition	Short-term memory
Narrative reasoning	Language processing
Dynamic reasoning	Visuoperceptual and audio perceptual functions
Big-picture thinking	Right–left discrimination
Problem-solving abilities	Oral expression
Enhanced communication skills	Processing speed
Increased ability to process 3D information	Working memory
Visual-spatial abilities	Concentration
Networking and teamwork	Time management
Increased ability to access empathy	Self-organization
Curiosity	Procedural memory
Emotional intelligence	Prospective memory
Strong episodic memory	

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Masking & Stimming

- Memorizing
- Excuses
- Perfectionism
- Self harming humour
- Class Clown
- Quiet Achiever
- Over Studying
- Suppressing Emotions
- Social Scripts

- **Fidgeting**
- **Focus on movement**
- **Repetitive noises**
- **Rocking**
- **Chewing / biting**
- **Doodling**
- **Rubbing / stroking**
- **Light manipulation**
- **Humming / vocalizing**
- **Pacing**
- **Oral sensory**
- **Re-reading**
- **Pressure**
- **Visual patterns**
- **Spinning / jumping**
- **Skin picking**

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Positive Psychology



Positive psychology is the study of flourishing and well-being. It focuses on strengths, wellbeing, positive mindset, resilience, gratitude, meaningful life, positive emotions, positive relationships, meaning and happiness, which allow individuals, communities, and institutions to thrive.

Working with Dyslexics, positive psychology can help:

- Identify dyslexic innate strengths
- Improve communication & relationships
- Understand where support is needed
- Build up the dyslexic's well-being

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The Upside of Dyslexia

The Dyslexic individual is not broken! In fact, society NEEDS them.
Dyslexics are simply trying to thrive in a world not designed for them.

Industries that want dyslexic thinking skills

NASA, Microsoft, Virgin, LinkedIn, STEM fields (researchers, geneticists, lab-based roles), culinary arts, creative directors, marketing, creative arts, engineering, technology industries.

They all value dyslexic thinkers: exceptional spatial reasoning, 3D perception, and creative, "big-picture" problem-solving skills, narrative skills.

40% of billionaires are dyslexic.
35 to 40% of entrepreneurs are dyslexic

Inventions from dyslexic thinking skills

Thomas Edison: Lightbulb, phonograph, movie camera.
Alexander Graham Bell: Telephone.
Wright Brothers (Orville and Wilbur): First powered airplane.
Henry Ford: Model T car and assembly line manufacturing.
Steve Jobs: Apple products (iPad, iPhone, iPod).
Nikola Tesla: Alternating current (AC) electrical system.
Harvey Cushing: discovered Cushing Syndrome, father of neurosurgery.
Albert Eistein: revolutionized modern physics
Steven Hawking: numerous scientific inventions & ideologies

Dyslexic's have a higher association to the psychological construct of awe – an emotion that fosters a sense of wonder about the world (Palser et al., 2025).

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You & Your Dyslexic

The family's understanding of how dyslexia impacts the individual directly impacts the dyslexic's self-esteem (Rosenthal, 1973; Nalavany et al., 2015).

Questions to ask yourself

Q: How do I view dyslexia?

Q: What are my biases around dyslexics?

Q: Where do my views on dyslexia need to change?

Q: What are my dyslexic's strengths and how can I support these?

Q: Where do I need to be my dyslexic's ally and voice for change?

Q: How can I create a supportive home environment for my dyslexic?

Q: To what extent is my belief around extra education opportunities for my child for my benefit more than they are for my child's?

Q: When does extra learning become too much and I need to allow them to have a break?

Learn as much as you can about dyslexia from a neurodivergent perspective. Understand that your child has unique challenges AND amazing abilities - encourage these abilities and create a neuro-affirming home for them to thrive within.

Remember that dyslexia has 50 to 60% hereditary rates - meaning that your child is not alone within your family. Someone else is also dyslexic, whether they know it or not.

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Carleen & All That I AM

Carleen's work holds a simple but powerful belief: We all matter. And when we understand the unique meaning we bring into the world, we begin to live more fully, love more deeply, and lead with purpose. She offers individual coaching sessions, work shops, and presentations.

Social Skills & Confidence-Building Coaching Sessions:

Interactive sessions designed to strengthen communication, develop social skills, and build self-esteem in a supportive environment.

Educational Workshops & Training:

Informative sessions for schools, families, and workplaces to promote understanding, empathy, and practical strategies for the social world to support dyslexic individuals.

Advocacy & Awareness Campaigns:

Community outreach and public awareness initiatives aimed at challenging stigma, reshaping perceptions, and celebrating the strengths of dyslexia

Virtual World Wide Sessions:

• Positive Psychology Coaching • Unmasking Dyslexia sessions • Health Coaching • HeartMath Coherence sessions • Highly Sensitive focused sessions • Grief Recovery Method • Family Neurodivergent Mentoring

Carleen is dyslexic and has a Master of Science in Applied Posiitve Psychology Coaching Psychology, a Bachelor of Science in Psychology. Health Coaching Certificate, Heart Math Practitioner Certifications, and has conducted Dyslexic reserach which was presented at the European Conference of Positive Psychology in 2026.

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Further Support:

Schedule your first introductory session.
Start following and listening to Unmasking Dyslexia Podcast.



Schedule your free introduction session:

https://www.carleenross.com/book-online

Take one of Carleen's online self directed programs:

https://www.carleenross.com/virtual-programs

Unmasking Dyslexia explores the lived experience and untold strengths of dyslexic minds.

Hosted by Carleen Ross, Positive Psychology Practitioner & Coach. Each episode blends personal stories with science-backed insights from psychology and neuroscience.

Discover practical tools, reframe the narrative, and reconnect with what it truly means to thrive with dyslexia.

UNMASKING
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