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## Students' Experiences of Academic Success with Dyslexia

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## **Students' Experiences of Academic Success with Dyslexia**

## **Abstract**

This paper reports a small-scale study exploring the perspectives of five undergraduate students with dyslexia. Semi-structured interviews were conducted in two universities in the UK. The interviews explored participants' perceptions of their dyslexia label and how it had affected their academic success. The aim of the research was to identify facilitating factors that supported participants with dyslexia during their education. The following themes were identified: age of dyslexia identification, family support, dyslexic identity, self-advocacy skills and learning resources. The study makes a case for an intervention for children and young people (CYP) with dyslexia that, in addition to remedial literacy support, explores self-advocacy, thinking and study skills and facilitates positive academic self-concepts. Future research could evaluate such an intervention for its effectiveness on CYP's social emotional well-being and literacy skills.

Keywords: *Dyslexia, Dyslexic identity, academic self-concept, self-advocacy, intervention.*

## Introduction

This article will begin by considering differing definitions of dyslexia. It will then offer a brief review of literature which explores students' experiences and perceptions of having dyslexia. This will lead to an explanation of the current study's rationale, theoretical underpinnings and research question. The research methods and study design will be presented, followed by an outline of the study's results and discussion. Findings will be introduced with a thematic map and each theme will be discussed in turn, supported by excerpts from the five interviews. Finally, the report will conclude with a consideration of the study's limitations and key implications for practice.

### *Dyslexia Definitions*

Dyslexia is a complex term and its definition remains contested. The summary presented within the oft cited 'Rose Report' (Rose, 2009) is offered here by way of broadly and clearly capturing the meaning of dyslexia in the UK:

- *'Characteristic features of dyslexia are difficulties in phonological awareness, verbal memory and verbal processing speed.*
- *Dyslexia occurs across the range of intellectual abilities.*
- *It is best thought of as a continuum, not a distinct category, and there are no clear cut-off points.*
- *Co-occurring difficulties may be seen in aspects of language, motor co-ordination, mental calculation, concentration and personal organisation, but these are not, by themselves, markers of dyslexia.*
- *A good indication of the severity and persistence of dyslexia difficulties can be gained by examining how the individual responds or has responded to well-founded intervention.'*

(Rose, 2009, p10)

It is pertinent to note that this report was commissioned by the UK government and its definition differs from other sources. For example, the British Psychological Society's (BPS) (1999) working definition is:

*'Dyslexia is evident when accurate and fluent word reading and/or spelling develops very incompletely or with very great difficulty. This focuses on literacy learning at the "word" level and implies that the problem is severe and persistent despite appropriate learning opportunities' (BPS, 1999, p.64).*

Importantly, both definitions discuss dyslexia as the presence of difficulties despite the provision of adequate teaching. This systemic, environmental element to the definition existed in historical definitions of dyslexia, such as from the 1968 World Federation of Neurology:

*'a disorder in children who, despite conventional classroom experience, fail to attain the language skills of reading, writing and spelling commensurate with their intellectual abilities' (World Federation of Neurology, 1968, p. 26).*

The difference, however, is that historical definitions, such as this, favour the discrepancy model which expects a difference between cognitive ability and literacy achievement in those with dyslexia. This model has since been discredited for lack of evidence and its use in identifying dyslexia has declined in both the UK and US (Singleton, 2009).

It is important to recognise that within the literature there is debate as to whether the term dyslexia is a useful construct. Elliott (2015) argues that there is not a clear understanding of the nature of dyslexia, nor an agreed diagnostic criterion. He also comments that there are no specific interventions or additional resources to support dyslexia that are distinct from supporting general reading difficulties. The current paper explores the lived experiences of five students identified with dyslexia and thus offers a view as to whether the label is a useful construct to them.

## **Literature review**

### *Age of identification*

Several studies discuss the importance of the age at which dyslexia is first identified for a person. Stampoltzis and Polychronopoulou (2009) interviewed 16 university students in Greece and Ingesson (2007) interviewed 75 teenagers and young adults in Sweden, all with dyslexia. Both international studies specifically recommended early diagnosis of dyslexia. Ingesson (2007) reasoned that remedial interventions have been shown to be more effective with younger children and that the secondary effects of dyslexia (such as low self-esteem) may be prevented or alleviated by early diagnosis. Rowan (2014) interviewed four university students in New Zealand and observed the importance of the age at which participants were assessed. Two of Rowan's participants were seen, tested and supported at age seven and received additional tuition and a high level of parental involvement from that point. This is in contrast with their two other participants whose dyslexia were identified in their teenage years. Rowan (2014) discussed a clear difference in participants' identities at university, noting that those who received early diagnosis had self-confidence and a firmly established student identity. Thus, similarly to Ingesson (2007), Rowan (2014) suggests that there are both practical and emotional implications for the early identification of dyslexia.

It is pertinent to consider the international context of these three papers, for example, the later age at which children in Sweden start school than in Britain. Nonetheless, the British papers echoed similar conclusions to the international research cited. Armstrong and Humphrey (2009) conducted interviews and focus groups with twenty college students, exploring the psychological consequences of receiving a dyslexia

diagnosis. Similarly to Rowan (2014), they noted a difference between participants based on the age at which their dyslexia had been identified, with those identified later holding less positive views about themselves and dyslexia. The authors hypothesised that the self is more permeable at a younger age, meaning that integration of dyslexia into the sense of self is easier when the diagnosis is made early. Gibson and Kendall (2010) also discuss the emotional and practical impacts of a delayed identification; their participants had not received a diagnosis until late adolescence or early adulthood and reported feelings of failure at school. In accord, Glazzard (2010) argued that early diagnosis is crucial in order to stop these feelings of failure and the subsequent development of learned helplessness.

#### *Influence of teachers and peers*

Gibson and Kendall (2010) interviewed five first year university students, four with dyslexia, to explore factors that impact on academic achievement and self-esteem. Similarly, Glazzard (2010) interviewed nine secondary school pupils with dyslexia to investigate factors that affected their self-esteem. Both studies identified teachers and peers as key influencers. Participants had experienced mixed attitudes from teachers with some reporting negative teacher attitudes and some experiencing supportive teaching. With regard to peers, participants in each study had experienced verbal abuse from peers in relation to their literacy difficulties. Both studies concluded that negative attitudes from teachers and peers led to detrimental effects on the self-esteem of children with dyslexia. Gibson and Kendall (2010) argue that teachers need to respond to the personal, social and emotional needs of young people with dyslexia, in addition to academic needs.

### ***Label of dyslexia***

Labelling dyslexia has been presented as a positive step for individuals by some research. McNulty (2003) reported the life stories of 12 adults who were identified with dyslexia as children. Participants had experienced traumatic struggles or failures in school, however, the diagnosis of dyslexia improved their self-esteem. Equally, Glazzard (2010) found that participants' self-esteem increased after diagnosis due to participants feeling that their label offered an explanation for their difficulties, negating a self-concept of stupid or thick.

An important thread in the literature is the way in which the label is interpreted and accepted by individuals. Pollack (2005) reported the life histories of 32 university students with dyslexia. He noted that the students adopted a variety of discourses of dyslexia, from which four groups were identified:

- Patients - dyslexia viewed as a medical or neurological condition;
- Students - dyslexia viewed as reading, writing and learning difficulties;
- Hemispherists – dyslexia viewed as a difference in learning style; and
- Campaigners - dyslexia viewed as a political struggle.

He noted participants' internalisation of these discourses, which subsequently influenced their affective and social responses to the label. His findings suggested that hemispherists and campaigners had a more positive self-concept and approached higher education with more confidence than patients and students. Furthermore, he argued that participants overcame their difficulties by reframing them.

In a similar vein, a core theme within Armstrong and Humphrey's (2009) research was the positive reframing of the label; they commented that participants who had adjusted to their label subsequently took positive action to achieve academic



success. They also indicated that a lack of integration of the dyslexia label into an individual's sense of self can lead to negative self-appraisals, self-defeating strategies and negative consequences for self-esteem. To explore the level of participants' integration of their dyslexia label, Armstrong and Humphrey (2009) developed a theoretical model, as displayed in Figure 1:

**Insert Figure 1: Armstrong and Humphrey (2009) - Resistance-accommodation model**

The model is depicted by a continuum of resistance and accommodation to the diagnosis of dyslexia; resistance being an unwillingness or inability to accept dyslexia and accommodation being an integration of dyslexia into the notion of self. The authors posit that the model is flexible and dynamic and that varying degrees of resistance and accommodation can be displayed simultaneously and can change over time. The model is a useful and practical way of conceptualising acceptance to a label, and could be adapted for use in future research with dyslexia and other labels of SEND.

***Informing individuals about dyslexia***

Some articles offer clear recommendations for sharing the dyslexia identification with individuals. Gibson and Kendall (2010) argued that diagnoses need to be framed in a positive and sensitive way and that students' voices need to be listened to throughout the process. Ingesson (2007) stated that careful explanation of dyslexia and encouragement in areas where children and young people (CYP) can succeed is important for fostering a positive self-image. McNulty (2003) argued the need for sensitive explanations that provide useful and relevant information about dyslexia that help children to maintain positive self-esteem. Finally, and more broadly, Pollack

(2005) recommended that in order to be genuinely inclusive of students with dyslexia, institutions should reframe their definition of dyslexia in a positive way. To critique this position, while sensitive, careful and positive explanations of dyslexia are agreeably a good strategy to use with CYP, there is no universally agreed definition of dyslexia. The ontology of dyslexia remains contentious, thus making it more difficult to achieve the recommendations from research.

### ***Rationale for current study***

The current study aimed to explore the voices of students with dyslexia. This was identified by Kirwan and Leather (2011) and Armstrong and Humphrey (2009) as a gap in the literature. Additionally, Gibson and Kendall (2010) emphasised the need to consider the impact of dyslexic students' educational experiences on their academic success or failure.

Prevett, Bell and Ralph (2013) reviewed recent literature on dyslexia and noted a dearth of research that explores identity and how it is influenced by educational culture and practice. While there is a trend in the literature to dwell on the psychological damage caused by dyslexia (Armstrong and Humphrey, 2009), there is a counterargument that the formal labelling of dyslexia can be positive for people's identities (Burden and Burdette, 2005; Riddick, 2000). Riddick (2000) posits that this is largely due to the label offering a legitimate explanation for the associated difficulties of those with dyslexia.

Thus, there is an apparent need for strengths-based research which explores the views of students with dyslexia and seeks to answer questions about identity, labelling and success factors. University students with dyslexia are of particular interest here as they have successfully overcome their literacy difficulties to the point

of accessing higher education (Stampoltzis and Polychronopoulou, 2009). Consequently, the current research sought to illuminate the voices of five undergraduate students with dyslexia. The aim was to garner their wisdom and experiences of achieving academic success alongside dyslexia, and to disseminate these insights to strengthen practice with CYP with dyslexia.

The research question for the current study was:

*How do undergraduate students perceive their academic success as affected by having dyslexia?*

## **Research Methods and Design**

### ***Participants***

Participants attended one of two West Midlands universities which were both local to the authors. Participants were recruited through their respective university's special educational needs department who forwarded an email (composed by the researcher) inviting them to participate in the current research. Participation was therefore entirely voluntary. All participants who volunteered to participate in the research were invited to participate, resulting in five undergraduate students. There was a small incentive offered to participants in the form of a raffle for a £15 high-street voucher.

Table 1 offers brief details about participants; pseudonyms have been used to provide anonymity.

### **Insert Table 1: Characteristics of Participants**

### ***Methods***

Individual semi-structured interviews were carried out with participants; four participants were interviewed in a private room within their university and one interview took place through Skype™ - a web-based video calling tool. Each interview lasted between 30 and 45 minutes. The data were analysed by thematic analysis (Braun and Clarke, 2006). The current study used tenets of Armstrong and Humphrey's (2009) resistance-accommodation model within the interview schedule by using a ten-point rating scale, with zero as firmly resistant up to ten as firmly accommodating. Participants rated their feelings towards the identification of their dyslexia both retrospectively (at the time of diagnosis) and currently.

### ***Ethical considerations***

The study was conducted according to the ethical conventions outlined by the BPS Code of Conduct and Ethics (2009). A participant information sheet and consent form was signed by all participants. Participants were given the right to withdraw their data by sending an e-mail to the researcher by a specific date (4-6 weeks following interviews).

## **Results and Discussion**

*How do undergraduate students perceive their academic success as affected by having dyslexia?*

Five themes were identified in relation to this research question and are summarised in the thematic map in Figure 2:

**Insert Figure 2: Thematic map showing how undergraduate students perceive how their academic success is affected by a having dyslexia**

(i) **Age of identification**

Among the interviews there was a notable difference between the three participants who had been identified with dyslexia at a young age (4-8 years) and the two participants who had been identified later in life (17 and 21 years).

Amina and Warren, who were identified as young adults, shared negative experiences of being at school without the label:

**Warren:** *"I always knew I was bad at English...I never really had like an excuse...I took it quite hard on myself at times"*

*"I just got labelled as naughty"*

**Amina:** *"they [teachers] were like why can't you spell? What's wrong with you you know (.) how come you can't spell the word 'very' you know it's that easy...it did come across as laziness in my part I think."*

This is in accord with Riddick (1995) who noted that children whose dyslexia is not identified often get assigned with other, less positive labels such as 'lazy' or 'stupid'.

Darcy, Elijah and Jade, who were identified with dyslexia as young children, reported more positive experiences:

**Darcy:** *"...once I was diagnosed the resident learning support tutor at my primary school... gave me all sorts of tools...she would talk to my teachers when I was younger and would go "this is Darcy you know she probably would benefit with this""*

**Elijah:** *"...at my first school from four till thirteen I was there and they had the same erm like erm learning disability people working throughout the whole*

*school so from the whole time there I was involved with that erm they went through loads of different things”*

**Jade:** *“my middle school was really good so I always believed I could achieve anything I wanted to...the longer you're kind of told that when you're younger the more it sort of stays with you”*

Consistent with research that argues for early diagnosis of dyslexia (Armstrong and Humphrey, 2009; Gibson and Kendall, 2010; Glazzard, 2010; Ingesson, 2007; Rowan, 2014; Stampoltzis and Polychronopoulou, 2009), the current study found barriers in late identification and benefits of early identification. Overall, Amina and Warren experienced greater difficulties in education without the label and explanation of dyslexia. Jade, Darcy and Elijah received specialist support throughout education and displayed greater self-advocacy skills. Thus, the current study argues for early identification of dyslexia. However, it is recognised that this is a small-scale study with limited generalisability to the wider population of people with dyslexia.

## **(ii) Family support**

In accord with other research (Glazzard, 2010; Rowan, 2014; Wennas-Brante, 2014) all participants in the current study drew on the impact of having a supportive family. Interestingly, all participants discussed the support of family members who have dyslexia:

**Elijah:** *“...both my parents and my oldest brother are dyslexic erm so there's quite an understanding in the family we all like support each [other]”*

**Amina:** *“...they’d [older siblings] all been to university so they sort of understood the struggle if you get what I mean erm...like they can kind of relate to you know some of the difficulties I had.”*

Participants discussed different types of support that they received from family members, for example practical support like encouraging dyslexia assessment, paying for additional testing or support, reading and researching about dyslexia and speaking to school staff on their behalf. Participants also discussed emotional support, for example:

**Darcy:** *“...you always get dips where you’re like I don’t think I’m good enough...then my mum goes no no no think about it (.) she’d bring you out of your you know little spiral down”*

### **(iii) Dyslexic identity**

Participants were asked to reflect on how resistant or accommodating (Armstrong and Humphrey, 2009) they felt towards their label of dyslexia. They considered how they felt at the time they were diagnosed and how they felt at the time of the interview, they indicated their feelings on 0-10 rating scale (0 being the most resistant to the label and 10 being the most accommodating of the label). Table 2 reports their responses:

#### **Insert Table 2: Scores for Resistance-Accommodation to Dyslexia Label**

At the time of the interview, all participants felt very accommodating towards their dyslexia label, with 3/5 participants choosing the highest possible rating. In terms of their feelings at the time of diagnosis, the three participants whose dyslexia were identified in primary school had scores of 4 or below, whereas the two participants who were identified later had scores of 8 and 10, both of which matched their

present score. Therefore, those who were identified as young children were initially resistant to the label, whereas those identified as young adults welcomed it immediately. Consequently, there is an argument for the provision of support to younger children in order to help them make sense of their label and accommodate it positively.

The interview data also reflected how much participants felt that dyslexia was part of their identity:

**Darcy:** *“I’m very happy that I’m dyslexic actually because I wouldn’t want me another way”*

*“I don’t know where my personality stops and my dyslexia starts”*

**Warren:** *“...it’s difficult to isolate for me what differences make me just me and what differences are the ones that make me as a dyslexic person”*

**Jade:** *“...actually I like being dyslexic it’s like part of me”*

Armstrong and Humphrey (2009) found that the successful individuals in their research were those who reframed their dyslexia-associated difficulties in a psychologically positive way. This connects with Pollack’s (2005) work on discourses of dyslexia; Pollack stated that in his research, the participants with the highest self-esteem and confidence in education were those who identified dyslexia as a difference in thinking or learning style. Participants in the current study adopted a similar discourse:

**Elijah:** *“the only difference with a dyslexic person in my view anyway is that they have to learn to learn in a different way”*

*“it’s how your brain works differently”*



**Warren:** *“I wouldn’t even call it a disadvantage I would just say that it’s a different type of brain I’ve got a different (.) I think in a slightly different way to people”*

The current study would argue that a positive dyslexic identity is conducive to academic success. Participants accommodated their label of dyslexia and described it as a difference not a disability or neurological condition. In their view, this contributed to them becoming successful, determined university students. Armstrong and Humphrey (2009) corroborated this and cited the benefits of integrating dyslexia into identity as: motivation to study, use of educational support and success in academic work.

#### **(iv) Self-advocacy skills**

For Darcy, Jade and Elijah, whose dyslexia was identified as young children, there was an enduring theme of self-advocacy. They were proactive students who used their understanding of their label to succeed in education. For example, both Darcy and Elijah requested individual support from their teachers in secondary school:

**Darcy:** *“...I was going up to tutors and going I’m dyslexic and the way you’re running lessons is not beneficial to me would it be possible if I could have a copy of the book that I can write in”*

**Elijah:** *“...dyslexia is a way of being able to be like well this isn’t working for me can you take me aside and help me learn in another way.”*

*“I decided to use my teachers individually so I would ask them individually rather than going to the dyslexia department.”*

Jade had a proactive attitude towards school and attributed her success internally, i.e. she recognised that her success was due to her own efforts and personality:

**Jade:** *“I kept pushing myself...you have to motivate yourself...you can't use the excuse of dyslexia”*

Gibson and Kendall (2010) reported similar self-advocacy skills in one of their participants who, regardless of the internal and external barriers associated with dyslexia, was dedicated to academic success. Ingesson (2007) argues that self-advocacy arises through diagnosis and self-understanding. Kirwan and Leather (2011) promoted the teaching of self-advocacy skills in their research with 22 university students with dyslexia. They found that self-advocacy can be developed through modelling during tuition. Thus, a case can be presented that in addition to remedial literacy intervention, students with dyslexia should have access to study skills tuition which focuses on building self-advocacy skills. Rowan (2014) argued that by improving children's self-advocacy skills at school, students with learning disabilities will be able to better access services at university. Thus, there is a longitudinal argument for teaching CYP how to self-advocate.

Kirwan and Leather (2011) remarked that it is especially important for students with dyslexia to be able to advocate for themselves, due to the hidden and misunderstood nature of the disability. This point connects with wider research on self-advocacy within disability and emancipatory theory (e.g. Dowse, 2001; Goodley, 1997). In brief, it is argued that there is a dominant individualising, medical model of disability that understands disability as being caused by impairment. Under this lens, people with disabilities are passive and dependent, thus conflicting with notions of self-advocacy and self-determination (Goodley, 1997). In contrast, the social model of

disability considers *societies* as disabling, as opposed to impairments. Self-advocacy is part of this disability movement and describes the act of disabled people 'speaking up' for their rights (Dowse, 2001). This is analogous to participants in the current study speaking up and challenging the way that lessons were delivered. The important point here is that while the current research highlights a need for the fostering and promotion of self-advocacy skills in CYP with dyslexia, this need is part of a wider context of people with disabilities who would also benefit from such support.

#### **(v) Learning resources**

All participants discussed the resources they were given to support their learning with dyslexia. The most commonly discussed were: extra time in exams, DSA, technical equipment, computer software and private spaces for study and exams. Participants discussed the positive impact these resources had:

**Elijah:** *"I still get my extra time for exams which I feel is ideal so being diagnosed definitely gives me things it helped me like I get computer programmes and stuff which help with my revision"*

**Warren:** *"I wouldn't have been given...laptop printer scanner which is great...I have actually been using it I've got a big whiteboard just to help me lay out my ideas"*

Participants also discussed their need additional time. They felt that, in order to achieve academic success, they needed to invest more time and effort than their peers without dyslexia:

**Jade:** *“I did my A levels with extra time...although I could do all this maths I would write out every step to make sure I didn’t miss anything so it does just take that bit longer it wasn’t that I couldn’t do it”*

**Amina:** *“I think it was just knowing that I had to sort of work twice as hard”.*

This is consistent with Rowan (2014) whose participants expected to give more time and effort than their contemporaries to succeed at university. Equally, Wennas-Brante (2013) found that her participants could not identify any strategies for overcoming their dyslexia difficulties at university, other than investing a great amount of time in study. This is also echoed in recent research from MacCullagh et al. (2016) whose dyslexic participants reported the need for intense and frequent engagement in university learning tasks, which required a great deal of effort.

## **Limitations**

There was no formal identification of the severity of participants’ dyslexia, which is dissimilar to other research. For example, Armstrong and Humphrey (2008) assessed spelling, reading and comprehension, Rowan (2014) used a dyslexia indicator checklist and Stampoltzis and Polychronopoulou (2009) classified ‘mild’ or ‘moderate and severe’ needs. Greater efforts could have been made to access participants’ data from their recent university dyslexia assessments. Also, participants volunteered to be part of research which explored how the label of dyslexia contributed to their academic success. Thus, there is bias in that participants who had less positive views about dyslexia may have been dissuaded from volunteering. Finally, participants may have given socially desirable answers i.e. answered in a way that they think the researcher would prefer.

## **Implications for practice**

Although this is small scale research, alongside other research, this builds a case for an intervention to support students with dyslexia that is not based on remedial literacy skills training alone. Armstrong and Squires (2015) note that counselling and working on self-esteem is more effective in improving reading skills than spending the same time on remedial teaching. Similarly, Alexander-Passe (2006) remarked that counselling is a good way to bridge the emotional and academic effects of dyslexia, supplementing remedial education. Kirwan and Leather (2011) argue that it would be damaging to believe that persistent reading, writing and grammar interventions will provide the missing link for individuals with dyslexia. They recommend that in order to be holistic, other skills need to be addressed to help individuals take more control of their learning. They propose teaching self-advocacy skills directly. Finally, Firth, Frydenberg and Bond (2012) stated that in addition to excellent literacy provision for students with dyslexia, there is an urgent need to develop tools and environments that assist young people to develop adaptive coping responses.

In light of this argument, there are two suggested implications for practice. Firstly, CYP should be supported at the point of diagnosis to facilitate their understanding of what dyslexia is, what it means to them, what their personal strengths and difficulties are and to support the adoption of a positive discourse around dyslexia. In addition, CYP may need social and emotional support, depending on their personal reactions to the label.

Secondly, CYP could benefit from metacognitive interventions that explore learning styles, study skills and self-advocacy skills. Kirwan and Leather (2011) argue that to support students with dyslexia in changing their perceptions on studying, working and themselves, attention must be given to how the individual thinks and processes information. Participants in the current study were successful university students with positive academic self-concepts and many self-advocacy skills. They were aware of their strengths and knew which strategies supported their learning. Thus, there is argument for interventions which focus on these areas, as the current participants are testament to the outcomes of developing these skills and self-concepts.

### **Future research**

Considering the argument for rethinking intervention for children with dyslexia, future research could implement and evaluate an alternative intervention to the standard remedial literacy training. To date, no British research explores this. However, Firth *et al.* (2012) evaluated a pioneering Australian coping skills programme entitled 'Success and Dyslexia'. This intervention provided targeted support for those with dyslexia in their final year of primary school, in addition to a whole-school change model in relation to learning disabilities. The authors noted that there had been positive results in both aspects of the intervention and that staff were more responsive to children's special educational needs. Tenets of this Australian study could be replicated in future British research to implement and evaluate a similar programme with British CYP with dyslexia where coping, thinking and self-advocacy skills are worked on alongside the fostering of self-esteem and positive academic self-concept.

### **Concluding comments**

The findings indicate that students with dyslexia are an excellent source of knowledge about themselves, their difficulties, their learning styles, their specific needs and strategies that help them. These insights can be usefully disseminated to consider supporting CYP with dyslexia, and furthers the argument for empowering individuals' voices. Consistent with much of the cited research, factors which facilitate individuals in enjoying academic success with dyslexia are: early identification of dyslexia, supportive families, developing a positive 'dyslexic identity', developing self-advocacy skills and being provided with adequate learning resources.

**Word count: 4788 (without abstract, references and tables or figures)**

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## **Appendix 1: Interview Schedule**

1. At what age was it identified that you have dyslexia?

2. When I was given the label of dyslexia I felt:

Resistant to the label 0---1---2---3---4---5---6---7---8---9---10 Accommodating of the  
label

3. Currently, I feel:

Resistant to the label 0---1---2---3---4---5---6---7---8---9---10 Accommodating of the label

3. Do you think the label of dyslexia has contributed to your academic success?

4. Looking at the diagram, I am going to ask you about four different levels that may have impacted on your academic success – individual factors within yourself, factors related to people you are close to i.e. family and friends, factors related to education and work and factors related to the wider society. Could you talk about each level and comment on any factors that have contributed to your academic success as a student with dyslexia?

Discuss in turn:

- Yourself
- Your family
- Your friends
- School
- University
- Employment
- Society

