

Out of Hours

Dyslexia, dyspraxia, and ADHD in adults:

what you need to know

TWO COMMON MISCONCEPTIONS

There are two main common misconceptions: the first is that dyslexia's chief characteristic is difficulty with reading. This is very often not the case. An adult with dyslexia may be slightly slow in reading but otherwise competent. The chief characteristics of dyslexia in adulthood are weaknesses in phonology, auditory short-term memory (working memory), and visual processing skills. These weaknesses stand in contrast to strong verbal reasoning abilities.

The second is that dyspraxia in adulthood is characterised chiefly by poor motor coordination. This is also often not the case. Adults with dyspraxia often have improved their motor coordination skills over the years, and their chief difficulties in education and employment are more likely to be related to the cognitive aspects of dyspraxia, such as difficulty with sequencing and structuring information, organisational skills, time-keeping, and sometimes social skills.

A TYPICAL SCENARIO

A patient reports 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 going blank in conversations, and difficulty in relating to people. Are they depressed? Stressed? Agoraphobic? Suffering an anxiety disorder? Perhaps, but perhaps at least part of their problem is that they have hitherto unidentified 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 distressing emotions; and they may have to take time out of their studies or time off work because of stress.

HELP FOR DYSLEXIC DIFFICULTIES

Specialist training by a tutor, along with IT support and reasonable adjustments in the college or workplace, can make an immense difference and, for example, could mean the difference between a person gaining or failing a degree and keeping or losing a job. First and foremost tutors teach strategies. They don't attempt to make global improvements in, say, auditory short-

term memory; rather they teach strategies focusing on the aspects of a person's life which are being adversely affected by their difficulties. For a student, this would be study skills; for example, writing essays, reading for comprehension, or note-taking. For a white-collar working person, it would be analogous workplace skills; for example, contributing to meetings, taking minutes, or writing reports. Every working person with dyslexia — be they an actor, scaffolder, IT adviser, or taxi driver — would need to be taught strategies enabling them to use their strengths to compensate for their weaknesses and become more efficient in their daily and working lives. Tutors also discuss the emotional aspects of having dyslexia with their clients, helping them to gain more confidence and greater self-esteem.

IS THERE ANY FUNDING FOR HELP AVAILABLE?

If a person is attending, or planning to attend, a university, it is very likely that university or government funds would be available to pay for whatever is needed. For people in employment, the situation is much more complex. Ideally, an employer would fund both a diagnostic assessment and a workplace needs assessment (as the workplace needs assessments provided free by the government's Access to Work scheme are often far from adequate). If a person is neither at a university nor in employment, the best hope would be to try to identify a charity who could provide the appropriate funding. More advice about

this can be sought from the British Dyslexia Association (Box 1).

HOW CAN AN ADULT WITH THESE DIFFICULTIES ACCESS HELP, EITHER FOR ASSESSMENT OR SKILLS TRAINING?

Dyslexia assessors screen for conditions by observing the client's behaviour in the assessment session, taking a history and administering relevant checklists. If the client reports severe difficulties with motor coordination, then it would be recommended that they approach their GP to discuss a referral to an occupational therapist. If ADHD tendencies (for example, poor concentration, procrastination, restlessness, and impulsivity) were very evident, it would be suggested that the client approach their GP for a referral to a specialist. In both cases the assessor would make relevant educational and workplace recommendations for help and support. Initially it is best to refer individuals to the relevant advice organisations listed in Box 1. It is unlikely to be useful to refer them to the (neuro) psychology services at the local hospital or to an educational psychologist, who works mainly with children.

VISUAL PROCESSING PROBLEMS

Commonly associated with dyslexia are two visual problems that are not picked up in routine eye tests. These are visual stress, the main symptoms of which are seeing text shifting about on the page and finding that white paper 'glares'; and binocular problems, indications of which would be the client losing their place while reading text, missing out words and lines and misreading words. If a client reports symptoms of either of the above, they would be referred on for an assessment and treatment to an optometrist who specialises in vision and learning. A list of practitioners can be found at the Society of Coloured Lens Providers (www.s4clp.org). Visual stress is treated with colorimetry and binocular problems with eye exercises.

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Box 1. Organisations providing help

Dyslexia

- British Dyslexia Association;
Tel: 0845 251 9002
www.bdadyslexia.org.uk

Dyspraxia

- Dyspraxia Foundation; Tel: 01462 454 986
www.dyspraxiafoundation.org.uk
- Dyspraxia UK; Tel: 01223 967 897
www.dyspraxiauk.com

AD(H)D

- www.aadduk.org
- www.simplywellbeing.com
- www.addiss.co.uk