**Colleague Manessa post to class 6 week 3 discussion 1**

**The symptoms of dyslexia disorder**

Childhood dyslexia starts before a child enters school which makes it sometimes difficult for a child to be diagnosed as dyslexia. Dyslexia is a reading disability that affects areas of the brain, a child who has dyslexia have a difficult time reading and problems with identifying sounds, learning how to put letters together to form words. Dyslexia is a learning disability. A child with dyslexia can be successful while attending school but will need some assistance from a tutor and some form of special education that can be provided within the schools. There are times when a child who has dyslexia may not receive the necessary treatment or services due to the teacher did not notice or the parent. The child who is dyslexia may tend to act out in class and the teacher will label the child as behavior issues not realizing he/she is trying to hide the fact have issues reading and forming words. Those with dyslexia have a difficult time processing and understanding what he/she reads.

**The diagnosis is made by:**

A child will need to be evaluated and this will allow whoever is doing the evaluation to gather the necessary information to detect if a child has dyslexia. The evaluation is based on the information received from the teacher since most likely the first encounter will be received from the teacher through what she/he observed within the classroom. The parents may have noticed some issues during the time spent while either child learning letters in his/her name and not being able to do the basics. The child will have to take some tests to determine what the weakness and strengths are and developed on the bases of what those weaknesses findings are to determine if the diagnosis is dyslexia. During this evaluation, there are many areas to look into, a child's ability to decode reading unfamiliar words/letters/sounds, spelling by memory, an oral language which is the ability to express thoughts, listen, understand, and make sounds (Sawyer & Jones, 2020).

**The neurobiology basis for the dyslexia disorders (CNS structures involved and neurotransmitters)**

The best-understood cause for dyslexia is a weakness in phonological awareness (PA) for spoken (auditory) language that predicts and accompanies dyslexia. Whereas learning a spoken language happens almost effortlessly, learning to read requires explicit knowledge and practice (Norton, Beach, &Gabrieli, 2014). The functional magnetic and resonance imaging has helped with the structure involving neuroimager. There will need to be continued studies on dyslexia understanding of the brain. The way a child learns to read is not always easy for that one child, but being able to understand how the child's brain is operating on the frontal lobe.

**Describe the functional deficits associated with the disorder including how these may impact the patient’s ability to carry out a daily living (e.g., social, occupational, recreational).**

Dyslexia does impact a person being able to fluently read but does not make this person less just means he/she is not a good reader and has a difficult time with writing. Dyslexia does interfere with fundamental skills (Gonzalez, Karipidis&Tijms, 2018). A person being dyslexia can affect his/her quality of life once they are older because will not be able to function in society, not wanting to go further in school fear of having to read and understand what is being read. Not being able to form the correct word while reading, feeling as though people are labeling them, and just feeling as though dumb. The thought of taking them longer to understand certain things, having to read materials repeatedly. People with dyslexia take them longer to read and comprehend the information.

Reference

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