

DYSLEXIA AND INTIMATE RELATIONSHIPS:

**Disconnection, disunion
or a call to embrace difference?**

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ABSTRACT

The phenomenological study that forms the central focus of this portfolio investigates the effects that dyslexia has on communication processes, and the experiences of relational connection between partners in intimate relationships in which only one partner has dyslexia. In-depth, open-ended interviews were undertaken with six couples and with each individual partner. The findings indicate that dyslexia may be directly responsible for some major difficulties with communication, every day functioning, and emotional issues that result in disruptions in connection between intimate partners. In addition the study confirms that dyslexia affects much more than simply reading and writing: it has a considerable impact across several fundamental domains of adult functioning and relating. This inquiry supports the phonological deficit theory of dyslexia and provides evidence for executive functioning issues being implicated in the dyslexic syndrome as well. Implications for professionals and practitioners are discussed and Drawing Talk, a method for aiding communication in dyslexia, is introduced.

Out beyond ideas
of wrong doing and right doing
there is a field.
I will meet you there.

When the soul lies down in that grass,
the world is too full
to talk about.

Ideas, language,
even the phrase 'each other'
doesn't make any sense.

Rumi

AUTHOR'S NOTE

I prefer to describe individuals who have dyslexia as “persons with dyslexia” or “persons who live with dyslexia” rather than “dyslexic persons” or “dyslexics” due to concerns about labelling and identity. However, in the research report, for the sake of writing flow and word count, I have used the word “dyslexic”. I mean no harm in doing so. I do not view individuals who live with dyslexia through that lens as if it is their sole identity. While I believe that diagnosis can be helpful and a relief for individuals with dyslexia (and the years I have worked in private practice and the findings of this study suggest that is so), I do not encourage labels that limit an individual to one particular description, temperament, psychodynamic “part”, or condition. Rather, I see that we are all, as humans, a beautiful blend of many parts, experiences, feelings, thoughts and knowing, both conscious and unconscious, and these are always changing and moving in different contexts and across time.

Also, throughout this research report the terms “learning disability” and “learning difficulty” are used interchangeably. There is an ongoing debate in the field concerning what is the most accurate term for these learning challenges, with a more recent description being “learning difference”. Much of the empirical research refers to this as a “learning disability”, and while the condition can be a form of “disability” (if it is so severe that a person is unable to do certain things, such as reading) I find the term negative as I think it pathologises individuals as if they are “dysfunctional” when perhaps they haven’t had the support required.

I therefore prefer to use the term “difficulty”. This describes the condition as challenging, but the characteristics that are associated with it (such as problems with reading) could possibly be ameliorated with the right intervention. The reader will therefore find the term “disability” used within some of the literature and “difficulty” used in my commentary as well as by some other researchers.

DEDICATION

This research project is dedicated
to all the couples and families who live
with dyslexia in New Zealand.

May it encourage you, support you, and
inspire you to keep going on the journey.

ACKNOWLEDGEMENTS

In an ideal dyslexic world life would be less linear and more circular, less sequential and more whole picture, less academically hierarchical and more equal. As I think of the people who have supported me in this work I feel constrained by the limits of having to write acknowledgements in sequential order, as if one comes before another in importance. If I could have my way (even though a few stand next to me on either side) I would draw a picture of a circle with everyone in their place on it, equal, included, and enjoying the dance of working at this together.

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I wish to express my deep gratitude to my practice supervisor, Kay Ryan, whose knowledge, wisdom, expertise, encouragement, and belief in me as a practitioner and academic, has been invaluable. Thank you for believing in me when at times I couldn't. You are one of those rare women in life who "gets it".

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I would like to acknowledge the staff at Indigo Assessment and Counselling. Thank you for your patience in promoting this research and the advertising throughout the lengthy time it took to find participants.

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inspiration. I have learned much from you, felt loved much, and grown much within your support and friendship. Thank you for your cooking, input and wisdom when I finally pulled the discussion chapter together. May this work bless your family and practice also.

Finally, my deepest thanks to the 12 amazing people who were willing to participate in this study. It has been an absolute privilege to hear your stories, be invited into your lives, and to hear the rich and passionate descriptions of what it is like to live with dyslexia as couples. May it be of encouragement to you to know your stories may encourage other couples who are struggling with dyslexia, and that together we may promote greater awareness for practitioners and other professionals when working with people living with dyslexia in New Zealand.

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GLOSSARY

Acquired Dyslexia:	Dyslexia that has been acquired as a result of a head injury, stroke, or other neural damage
ADHD:	(Or Attention-Deficit/Hyperactivity Disorder) A persistent pattern of inattention, and/or hyperactivity-impulsivity that interferes with functioning or development
Developmental Dyslexia:	Dyslexia that is a hereditary, neurodevelopmental condition with a neuro-biological origin
Dyscalculia:	Difficulties with mastering number sense, number facts or calculation, mastering mathematical concepts
Dysgraphia:	Difficulty with handwriting, often slow and illegible
Dyslexia:	Difficulties with reading, understanding the meaning of what is read, spelling, written expression
Dyspraxia:	(Or "Developmental Coordination Disorder") Difficulty with the acquisition and execution of coordinated motor skills and planning
Executive Functioning:	An umbrella term for the cognitive functions that control planning, organisation, ordering, sequencing, working memory, flexibility of response to changing situations, the ability to begin a task, inhibition of behaviour, and emotional regulation.
Neurodiversity:	A term for neurologically diverse people (i.e., Autism, dyslexia, ADHD) who have always been part of the human community yet emphasize their differences from the dominant culture (which often marginalises them) rather than trying to pass as "normal".

Specific Learning

Difficulties (SLD):

An umbrella term for a heterogeneous cluster of learning difficulties

CHAPTER ONE

Introduction

Purpose of the Study

The purpose of this study was to examine the effects that dyslexia may have on communication processes, and the experiences of relational connection, between partners in intimate relationships in which only one partner has dyslexia. Despite increasing empirical evidence that suggests dyslexia, and many of its concomitant difficulties, persists throughout the life span (Gerber, Schnieders, Paradise, Reiff, Ginsberg & Popp, 1990; Goldberg, Higgins, Raskind & Herman, 2003; McNulty, 2003), there is a dearth of research that explores the complicating factor of dyslexia in either couples or families.

The myth that pervades many people's thinking around dyslexia is that it is simply a problem with reading and writing. Even though the understanding of specific learning difficulties has burgeoned in recent years, stereotypes surrounding dyslexia continue and often include the perception that dyslexia is related to laziness and lower intelligence. A chasm exists between the way in which dyslexia is understood by many in society and what the condition actually is, in terms of both its causal basis and its manifestation. Further, the dyslexia field is currently inundated with neuro-scientific and educational studies which focus mostly on children, while research that addresses socio-emotional experiences associated with dyslexia lags well behind. Few studies have looked at how dyslexia affects adults and a void exists concerning the emotional experiences of those living with dyslexia (McNulty, 2003). Much quantitative research has focused on or about this population, but few qualitative studies have been conducted that give adults with dyslexia a voice about what they experience. A comprehensive review of the literature revealed virtually no research on dyslexia and intimate relationships. This study aims to begin to address this gap in the literature.

What is Dyslexia?

According to the Dyslexia Foundation of New Zealand (2006) dyslexia is an "alternative way of thinking". They also characterise dyslexia as "a learning preference based on individuals preferring to process and present information in ways that make more sense to the dyslexic-

wired brain". It is estimated that in New Zealand one in ten people are dyslexic, though this is known to be a conservative figure.

Most people use the left hemisphere of their brain to read and understand words. Ground breaking research from the University of Auckland has recently revealed that dyslexic individuals use the "pictorial" right hemisphere to process language (Waldie, Haigh, Badzakova-Trajkov, Buckley & Kirk, 2013). This can make it a longer, slower journey for dyslexic persons to understand spoken and written language. However dyslexia also carries with it unique talents and strengths, as dyslexic individuals are often strongly creative, have strengths in visual/spatial abilities, are good problem-solvers, and tend to be lateral thinkers (Dyslexia Foundation of New Zealand, 2006), as well as being manually practical (Buchanan & Wolf, 1986).

Dyslexia tends to run in families (Dyslexia Foundation of New Zealand, 2006). Children often struggle at school due to difficulties with decoding words and language, and understanding their meaning, and often a parent may also be dyslexic and therefore unable to help their child with their education struggles. Dyslexia is complex and challenging and dyslexic individuals tend to be highly vulnerable to the environment be it school, workplace, home, or societal communities, which can maximise or minimise its effects depending on how dyslexia is understood and accepted by others and how dyslexic individuals are treated (Berresford, 2012).

Dyslexia impacts on much more than simply reading and writing. It affects auditory and visual processes (Berresford, 2012), organisation and planning, short term memory, concentration, taking in information and instructions, and time keeping (Shaywitz, 2003). It also affects a person's sense of self due to constant difficulties and failures in school, as well as the pervading feeling of being "different", which can result in high levels of anxiety, fear and frustration that can lead to depression, isolation, and disempowerment. This can continue on to lack of motivation (Buchanan & Wolf, 1986), avoidance behaviours, further educational deficit, loss of confidence, behaviour problems, difficulties in the workplace, and social issues (King, 2010).

Literacy difficulties are just the tip of the iceberg; underneath there is a whole lot more going on. King (2016) wrote, "If we continue to see Dyslexia as being merely a reading and writing

problem, we will continue to deprive these people of any real understanding or support in terms of the extent and depth of their difficulties.”

Since dyslexic people tend to use their right hemispheres to process language this can affect the way they take in and express communication, and can therefore lead to problems when relating to someone who processes information differently in their left hemisphere. It can be likened to the seas at Cape Agulhas, which lies 150kms east-southeast of the Cape of Good Hope where the waters of the Atlantic and Indian Oceans meet. The cold Antarctic Circumpolar current comes up against the warmer Agulhas current and these conflicting currents of divergent densities, along with the strong west winds, make for extremely hazardous conditions. Mammoth rogue waves up to 30 metres high have made the area treacherous for sailors and the coast is littered with wrecks. However, this convergence of the waters also results in an area teeming with nutrient-rich oceanic life. In fact, the waters of the Agulhas Bank are renowned as one of the best fishing grounds in South Africa (Wikipedia, 2016).

In the same way, when two people, who connect with the world in very different ways come together, they must navigate the turbulent waters where they meet. Hendrix (2008) pointed out that in Buber’s “I-Thou” relationship (Buber, 1958) the hyphen serves as both a connection and a distance holder between people. It signifies that the most fulfilling relationship occurs where two people are intimately connected with one another yet hold a respectful distance in respect of each one’s “otherness”. The two are connected yet separate at the same time. The distance in itself provides room for differentiation (or ability for an individual to stand in their “I”) and promotes longing for connection. Otherness denotes difference, and therefore difference is one of the key factors for a fulfilling relationship as each person must stand in their “I” and learn to respect the “other” and their unique ways of being.

Living with dyslexia in relationships can therefore be an exciting and/or sometimes terrifying journey, like navigating the seas at the Cape of Agulhas, where two often very different selves merge and collide. From my experience it can be stormy, it can be disastrous, yet it can be rich and rewarding as two people embrace their differences and find ways to bring their unique self into union.

The Neuroscience of Dyslexia

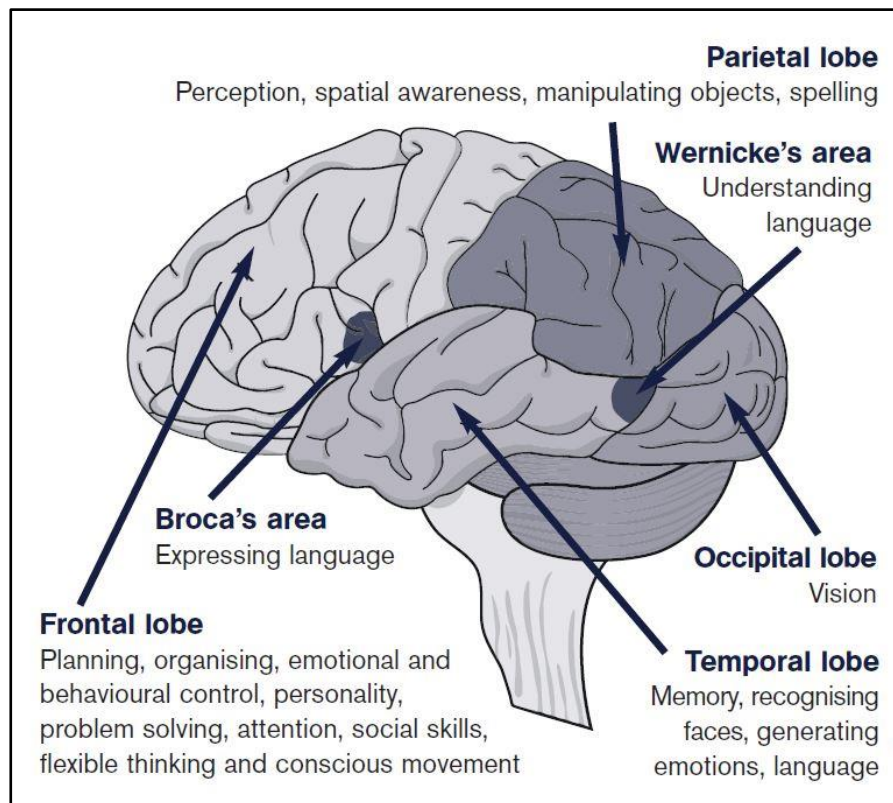
Dyslexia is most often described as being a hereditary, familial, neurobiological disorder that is caused by a disruption in the fundamental neural circuitry within the language areas of the brain. Core difficulties in phonological decoding and processing give rise to impairments in reading and written linguistic processes and expression, and also affect spelling, word retrieval and articulation, and memory processes (Shaywitz, 1998; 2005). Such studies suggest there is a biological basis for dyslexia, however the fundamental neural causes are still being debated and are still active areas of research. For example, in matching children with Attention Deficit Hyperactivity Disorder (ADHD) and developmental dyslexia, Waldie and Housmann (2010) found certain underlying neural deficits were shared by both groups as indicated by disturbances in the right fronto-parietal network in the brain and/or pathology of the corpus callosum (which involves communication between the left and right hemispheres). In another study, decreased activation within the left hemispherical language system and hyper-activation in the right hemisphere of dyslexics was found (Waldie et al., 2013).

Habib (2000) reviewed neuroscientific evidence concerning three current theories that support understandings of neuro-functional defects underlying dyslexia. The phonological processing theory suggests the “deficit” in dyslexia is to do with phonological awareness (or oral language rather than visual perception at the level of phoneme representation) (see Shaywitz [2005] for a full explanation). Other studies have reported a visual processing deficit: the “magnosystem” theory, which appear to support a visual subtype of dyslexia (Boder, 1973; Valdois, Gerard, Vanault & Dugas, 1995). The temporal processing theory (De Martino, Espesser, Rey & Habib, 2001; Habib, 2000) postulates that the different difficulties all stem from a common basic neural fault in the brain’s ability to process the rate and temporal aspects of various stimuli. In other words the brain is unable to process rapid stimuli in either auditory or visual fields. In concordance with the temporal processing theory, Temple et al. (2000) found a disrupted neural response to rapid auditory stimuli in dyslexic adults, and indicated that the left prefrontal cortex was specifically involved in such processing.

Other neuroscientific studies have emphasised that the left inferior frontal cortex within the frontal lobe (see Figure 1) involves “executive functioning” abilities and that developmental dyslexia (see glossary for definitions) is associated with deficits in such executive control

(Brosnan et al., 2002; Vasic, Lohr, Steinbrink, Martin & Wolf, 2007). One hypothesis by Llinas (1993) suggests that dyslexia may actually be a “dyschronia”. He proposed that the issue of timing may be responsible in the dyslexic syndrome, and that this dyschronicity interferes with the rapid processing of sensory stimuli disrupting sequencing and processing speed in lexical, visual, and auditory tasks.

Figure 1: Parts of the brain



(Inteligencia123, 2014)

Learning difficulties such as dyslexia, dyspraxia, dyscalculia, and dysgraphia (see glossary for explanation) are a complex, heterogeneous group most often classed under the umbrella term Specific Learning Difficulties (SLD). It seems vital, therefore, that neuroscientists continue to speculate and inquire into the neurological background of these conditions as it seems plausible that there may be a general, common, underlying anomaly, most likely in the left hemisphere of the brain. Indeed, dyslexia affects much more than only the neural processes used for decoding language. It can also indicate difficulties with sequencing, ordering, timekeeping, concentration, speed of processing and expression of information, memory, and the ability to process instructions (Buchanan & Wolf, 1986; Nalavany, Carawan & Rennick, 2010). This is also evidenced by findings of the current study, which will be

presented in this report and reveal that dyslexia is not just a difficulty with phonological awareness and processing but clearly involves difficulties with sequencing, detailing, organisation, timekeeping, and emotional processing as well.

Psychosocial Issues

There is growing evidence that dyslexia may have both causal and secondary effects on emotions and psychosocial functioning. Various cerebral dysfunction theories have been developed to explain the relationship between emotional issues and learning difficulties (Rourke & Fuerst, 1996; Spreen, 1989). Secondary emotional problems arising from learning difficulties such as anxiety (Nelson & Harwood, 2010), low self-esteem, trauma, shame, (McNulty, 2003), and extensive social skill deficits (Kavale & Forness, 1996) are well recognised.

Considering the evidence—that dyslexics have difficulty with processing language, word retrieval and expression; that they have difficulties with the organising, sequencing and processing of instructions; that dyslexia persists well into adulthood; and that social ability is affected—then it stands to reason that the condition may well be impacting on couples' lives. Since human beings yearn for connection in relationship with others with whom we feel safe (Brown, 2012; Hendrix, 2008) wherein we can better find ourselves—or our “I” as Buber (1958) calls it—and since communication is one of the major pathways to building that safe connection (Hendrix, 2008), it seems clear that a disruption in communication processes will be a complicating factor for intimate partners.

Since no empirical studies were found that focus directly on dyslexia and couples, research examining social factors in dyslexia are of interest (as noted in the literature review below) as they may illuminate relational factors. Indeed, McLoughlin, Leather and Stringer (2002) found that secondary issues resulting from living with dyslexia such as shame, frustration, anxiety, low self-esteem, and depression affected personal and relational functioning. McNulty (2003) also found that research participants experienced intense feelings of shame from school experiences as children, and that others' lack of understanding resulted in loneliness and isolation, leaving them with emotional insecurity as adults which extended to affect interpersonal relationships.

Researcher's Background and Experience

My interest in this subject has been cultivated by my personal experience of living in a family (both immediate and extended family) where some individuals have dyslexia. In this sense I am an insider researcher in this topic. Dyslexia certainly had a major effect on education, self-esteem, functioning, and relationships, and at times family life was quite strained and often felt chaotic.

As I grew in my understanding of dyslexia from these experiences I became curious about how dyslexia may be affecting other people. My interest in the conundrum of dyslexia in areas of life other than learning and schooling grew. At this time I was a professional counsellor working in my own private practice. People with dyslexia began to approach me for counselling, and there were many adults I saw who were not aware they had dyslexia and as a result of our work sought assessment and diagnosis. Each one reported they felt relief in discovering the difficulties they had experienced through their life were attributed to something causative. I could see from working with clients that dyslexia impacted on much more than simply reading, writing, and spelling. The couples I worked with all experienced challenges in the same areas: finding the words to communicate effectively, speed of communication, circular arguments, completely different ways of seeing the world (beyond just perceptions), intensive fear of vulnerability and feeling emotions, and major obstacles in organisation, planning, and sequencing.

My personal and professional experience confirms that these difficulties can be profound for persons living with dyslexia. As an eternally curious being I decided I wanted to know *why*. Why were these couples all sharing the same difficulties? Why was conventional talking therapy not helping my dyslexic clients at the same speed it helped others? Why did couples hit a brick wall in therapy and seem unable to gain the understanding and connection they desired? Why was there little support? What could be done about it?

Specific Aims of the Study

My goal for this research was three-fold. Firstly, I wished to help illuminate the field of specific learning difficulties by potentially identifying further evidence that dyslexia has a far wider impact than is currently suggested. This could help increase awareness and

understanding and thereby gain needed support for people living with dyslexia in New Zealand. Second, it is my passion to help couples and families find ways to navigate their differences and grow closer relationally rather than the breakdown I most often see, and have experienced. Dudley-Marling (2004) wrote, “one cannot be learning disabled on one’s own” (p. 482). Learning difficulties are constructed in socio-cultural practices. Although there have been many changes since dyslexia was recognised officially by the New Zealand government in 2007, and the education system is becoming more “dyslexia friendly” (MacKay, 2006), dyslexics are still marginalised in a system that continues to equate education with mastery of literacy and numeracy skills and to favour a left-brained way of teaching. Those who are different, who compensate by using the right (more pictorial) hemisphere (Waldie et al., 2013) are still treated as deficient and are at a specific disadvantage (King, 2010).

This research therefore supports a cry for justice. Thus, my third goal is for persons with dyslexia to find their voice. Silberman (2015), in applauding neurodiversity activists who have pushed for more representation for autistic persons in policy-making by their slogan “Nothing about us, without us” (p. 473), believes this should extend to the process of science also. It is vital for the voices and experiences of those with dyslexia to be fully heard. Neurodiversity advocates propose that instead of seeing such conditions as a deficit or an error to be ameliorated, society needs to view them as a valuable part of our “genetic legacy”, a gift to humanity (Silberman, 2015, p. 470). I agree and I write more about embracing difference in the conclusion of this research report.

Research Question

This research is guided by the following question: *Does dyslexia affect communication and relational connection between partners in intimate relationships where only one partner has dyslexia, and if so, how?*

CHAPTER TWO

Systematic Literature Review

A broad overview of the empirical literature generally on the topic of learning difficulties was surveyed initially to gain a global picture of the arena. This enabled me to ascertain the scope for conducting this study and helped me gain a comprehensive picture of past and current literature in the field. Research is skewed in one direction with a dominance of quantitative studies over those employing qualitative methods. Most of these positivist studies concentrate on neuroscience and education, and most focus on children. This is understandable since the trend amongst scientists and professionals is to support early diagnosis and intervention so as to ameliorate learning difficulties early and thereby alleviate negative outcomes for individuals. I found a paucity of qualitative enquiries into dyslexia and few that attended to adults, or specifically to their socio-emotional experiences, and even fewer that gave a voice to those living with the condition. At the time of writing no peer-reviewed studies could be found specifically exploring the impact of dyslexia on intimate relationships.

Method

Since studies on dyslexia and intimate relationships appear to have little, if any, coverage in the field, this enquiry may therefore be of global importance. Thus it was my intention to execute a literature review that was as thorough and rigorous as possible. A systematic review was therefore conducted using a broad number of databases, grey literature, and reference lists with dates left open to include older studies. Titles were noted, and for those that included “learning disabilities”, abstracts were read and often the body of the article was perused to ensure that the studies did not include intellectual disabilities.

First, the University of Auckland’s library database was trawled by using free text searches for “dyslexia and marriage”, “dyslexia and intimate relationships” and “dyslexia, family, relationships”. Secondly, block searches were used: “dyslexia and marriage”, “dyslexia and intimate relationships”, “dyslexia and intimacy” and “dyslexia and communication” which yielded no results. Next, an advanced multi-database search was undertaken. The following databases were trawled: The Australian Family and Society Abstracts Database, Medline,

ProQuest, PsychINFO (Ovid), and Sage Journals Online. Again, the same free text and block searches were used. Due to the large number of articles published by Sage that were found during the multi-database search, Sage Full Text Journal Collected was then trawled, this time adding “dyslexia, communication, marriage, partners”. Articles that were included from the library and multi-database were duplicated there.

I then contacted one of New Zealand’s leading experts on dyslexia, Lynn Berresford, for her comment. Lynn suggested using “specific learning disability” and “dyspraxia” alongside marriage, intimacy, communication, and intimate relationships. Sage Full Text, and another library and multi-database search were repeated, using these terms. No results were found.

Next Google Scholar was trawled using the same free text and block searches. Under “dyslexia and marriage” the first thousand results were considered, again by noting titles, then abstracts and the full article if “learning disability” was included. Any articles that included “intellectual disability” were excluded. “Specific learning disability” was also included in the search. Cinahl Plus, and Embase, which include grey literature, were then trawled in the same fashion, which yielded no results. After this, articles concerning the impact of visual and hearing loss on marriage were pursued. A free text search of the library was conducted using search terms “hearing loss”, “vision loss”, and “dual sensory loss” alongside the terms “marriage” and “intimate relationships”. A discussion of the rationale for doing this is included later in this review.

Finally, a search of references was performed using various articles and books on dyslexia, and by hand searching relevant books at the SPELD Auckland library as well as unpublished theses in the University of Auckland library.

Literature on Couples

A search for current research on couple communication and processes linked to relational connection was also conducted. Free text searches within the library database and Google Scholar from 2010 to 2016 were performed and articles from some reference lists were extracted. Those relevant to this study were included and used in conjunction with information from the three main books on couple communication and intimacy that are used throughout this thesis (Greenberg & Johnson, 1988; Hendrix, 2008; Schnarch, 2009).

Findings

My research is about the interaction of dyslexia with communication processes and relational connection between partners. Since I found no peer-reviewed articles that looked specifically at how dyslexia impacts intimate relationships I needed to review literature around the edges of this topic. According to Erikson (as cited in Papalia, Olds & Feldman, 2001), intimacy vs isolation is the major task of the psychosocial developmental stage of young adulthood which extends throughout adult development and so I looked solely at research that focused on dyslexic adults within these stages.

A published knowledge base was identified about the characteristics and functioning of adults with learning disabilities overall, some of which includes comparisons from school age to adult years. As well, there is a knowledge base for the characteristics and functioning of adults with dyslexia specifically, which includes emotional and psychosocial experiences; and also for adults with dyslexia including both socio-emotional issues and family functioning and relations, which the following sections will summarise. See Tables 1, 2, and 3 for a summary of the dyslexia literature. The second to last section will focus on literature on the impact of visual and auditory impairments on intimate relationships. The last section reviews relevant literature on couple communication.

Adults with Learning Disabilities

It is well established in the literature that learning disabilities persist into adulthood. People with learning difficulties who are navigating the complexities of adulthood with its many challenges and responsibilities appear to be highly vulnerable. Three early studies explored the persistence of learning disabilities from childhood to adulthood and provide insights into the characteristics associated with adults challenged by these. Buchanan and Wolf (1986) found characteristic strengths and problem areas that persisted into adulthood. Strengths included: creativity, ambition, being manually practical, critical thinking, and enthusiasm. Five distinct problem areas were noted: hyperactivity, affect lability, disorganisation, lacking motivation, and low self-esteem. This study is of interest as it sheds some light on adult experiences related to functioning and emotional issues which may influence couples' experiences. In focusing on moderately and highly successful adults, Gerber et al. (1990)

found an overwhelming trend that the problems experienced in childhood persisted into adulthood and actually worsened. Their study provided evidence that the added complexities of the responsibilities and challenges in the adult years may exacerbate the difficulties and challenges for adults with learning difficulties. Marriage and family life are major factors in adult development that in themselves increase demands on individuals with learning difficulties.

Three themes emerged from a study by Polloway, Schewel and Patton (1992) who found that negative school experiences had lasting effects in adulthood. Effective coping strategies, positive influences (such as activity in a sports programme), and the encouragement, continuous assistance and support of significant others were found to mediate successful life outcomes for adults. If such levels of need for support are significant for adults with learning disabilities then it stands to reason that this may well affect couples.

In a more current, evidence-based literature review, Gerber (2012) identified a myriad of challenges and outcomes for adults whose learning disabilities persisted into the adult years. There were many areas of functioning in which he found they needed to adapt, including managing cognitive challenges, employment, family life, social and emotional domains, and other demands of daily life. Concerning the need for support, Werner (1993, as cited in Gerber, 2012) found that positive self-esteem in learning disabled adults was promoted via supportive relationships, and Gerber and Reiff (1991, as cited in Gerber, 2012) found marginally adjusted adults were dependent on their spouses or parents.

Each of these studies reveals that learning difficulties may impact on intimate partners in their functioning in daily life, emotionality, coping, social skills, and employment, and indicate a strong need for assistance and support for those with learning disabilities. See Table 1 for a summary of this section of the literature.

Table 1.

Sources Related to Adults with Learning Disabilities

AUTHORS, TITLE, YEAR	METHOD	EVALUATION	SAMPLE	STRENGTHS LIMITATIONS
Buchanan & Wolf (1986) A comprehensive study of LD adults	Quantitative	Described characteristics of LD adults. Findings: Many characteristics persist into adulthood.	33 LD adults Self-referred or referred by professionals 10 females 23 males	<u>Strengths</u> All participants diagnostically assessed. <u>Limitations</u> Small scale study; Studies LD overall (not specific to dyslexia).
Gerber et al. (1990) Persistent problems of adults with LD: Self-reported comparisons from their school-age and adult years	Quantitative	Investigated the persistence of LD into adulthood. Findings: Persistent problems are pervasive in many areas of adult functioning. Problems actually worsened.	133 adults 81 males 52 females Ages: 23-71 yrs	<u>Strengths</u> Wide age range <u>Limitations</u> Small sample; Successful adults only so not generalizable to population; Not specific to dyslexia.
Polloway, Schewel & Patton (1992) LD in adulthood: Personal perspectives	Qualitative	Selected responses from participants to help complete a portrait of adults with LD.	51 LD adults Ages: 18-40	<u>Strengths</u> Focuses on participants' experiences <u>Limitations</u> Small sample; Not specific to dyslexia; Not clear if a full assessment was completed.
Gerber (2012) The impact of LD on adulthood: A review of the evidenced-based literature for research and practice in adult education	Literature Review	Sought to discover relevant knowledge for practitioners. Findings: There are a myriad of challenges and outcomes for adults.		Thorough search including term "dyslexia".

Adult Dyslexia and Emotional and Psychosocial Functioning

Five studies were found that focused on adults with learning disabilities with an emphasis on emotional and/or psychosocial processes. Four of these studies concentrated on dyslexia specifically. A study that is frequently cited by other researchers looked at the emotional experiences of living with dyslexia across the life course (McNulty, 2003). This study found that as children, participants commonly became aware of their difficulties in early childhood, and failures in school led to deep experiences of shame, inferiority, and often trauma which had a profound effect on self-esteem that continued into adulthood. McNulty (2003) discussed various patterns of compensation in adulthood and pointed out that awareness, understanding, and continued support from significant others and professionals were vital in achieving positive outcomes.

Nalavany, Carawan and Rennick (2011), in describing the psychosocial experiences of adults with dyslexia, found the strongest essentials for successful living were working to strengths, positive social support systems (provided by significant others), effective compensatory strategies, and identification of risk and resilience factors. Participants found that social misunderstandings of their dyslexia were most difficult. This study stressed that dyslexic adults needed continued help across the lifespan and particularly the “tremendous and continuing need for support services” (p. 76). In a review of the literature, Vogel and Forness (1992) also focused on the social functioning of adults with learning disabilities. Various studies they reviewed revealed that adults struggled with poor social skills and poor interpersonal skills. One study suggested that social abilities were affected by language deficits (saying wrong words) and memory deficits (interrupting, and forgetting the topic), and some studies linked this to self-esteem and confidence issues.

In an early study exploring whether a link could be identified between dyslexia and psychiatric disorders in adults, Saunders and Barker (1972) observed seven dyslexic patients. An incidental result of their study was the finding that marital friction was common. Dyslexic partners tended to be highly dependent on spouses and the marriages were stormy. It is unclear however whether the marital friction was attributed to the characteristics of dyslexia itself, or the co-morbidity of a psychiatric disorder.

Of relevance to the current study is also a paper by Sang (1988) which was based on the author's own clinical experience and case histories from her psychotherapy practice. A whole section in this paper addressed the influence of dyslexia on relationships, and described a long history of relationship difficulties beginning with parents and teachers. Sang (1988) suggested that dyslexics often lack the necessary skills for adulthood and that such limitations may cause problems for intimate partners in the areas of acceptance, differences in functioning, misunderstandings of coping strategies, communication problems (including misinterpreting what is said, vague communicating, poor word retrieval, working memory issues), and difficulties in reading social cues. This paper provides a potent description of personal experiences of dyslexia and its impact on intimate relationships, though it is limited in that it is only one person's reflections.

What can be seen from these five studies is an overwhelming trend that continuous support from significant others (and support services) is likely to be necessary to enable dyslexic individuals to successfully navigate the complexities of life from childhood well into adulthood. A multiplicity of challenges face dyslexic adults, particularly in terms of emotional and social functioning. What is of interest is the bearing this may have on partners in intimate relationships and how that contributes to, or obstructs, relationship satisfaction. See Table 2 for a summary of each paper.

Table 2.

Adult Dyslexia and Emotional and Psychosocial Functioning

AUTHORS	METHOD	EVALUATION	SAMPLE	STRENGTHS LIMITATIONS
McNulty (2003) Dyslexia and the life course	Qualitative (Narrative Analysis)	Examined life stories of dyslexic adults diagnosed as children, with emphasis on emotional experiences. Findings: Outlines characteristics, compensation strategies, and implications.	12 adults 8 men 4 women Age: 25-45 yrs	<u>Strengths</u> Dyslexia specific; Rich interview process; High rate of review. <u>Limitations</u> Small scale study; Some participants self-reported dyslexia (not diagnostically assessed).
Nalavany, Carawan & Rennick (2011) Psychosocial experiences associated with confirmed and self-identified dyslexia: A participant-driven concept map of adult perspectives	Mixed Methods (Concept Mapping)	Described the psychosocial experiences of adults. Findings: Personal strengths, positive support system, and compensatory strategies relate to adult success.	15 adults, primarily women Age: 25-66 yrs Second screening: 39 adults, primarily women Age: 24-73 yrs	<u>Strengths</u> Dyslexia specific; Rich rigorous method. <u>Limitations</u> Small sample; Limited to demographics - not representative of population
Saunders & Barker (1972) Dyslexia as cause of psychiatric disorders in adults	Case studies	Investigated effects of dyslexia in patients. Findings: Dyslexia has major effects on adult functioning	7 patients 6 males 1 female Age: 28-62 yrs	<u>Strengths</u> All diagnostically assessed <u>Limitations</u> Clinician observation only
Vogel & Forness (1992) Social functioning in adults with LD	Literature Review	Studied possible causes of social functioning deficits in adults with LD. Findings: Wide number of emotional and social issues for adults.		<u>Strengths</u> Considers causal neuro deficits <u>Limitations</u> Not dyslexia specific
Sang (1988) On being female and dyslexic	Case Studies; Auto ethnography	Described everyday difficulties and psychological problems.		<u>Strengths</u> In-depth descriptions of experience <u>Limitations</u> Based on clinical observation only

Adult Dyslexia and Family Relations (Including Emotional and Psychosocial Functioning)

Literature that evaluated the effects of dyslexia on family relationships was included in this review as it highlighted relational dynamics which may correlate with intimate partnerships. Morrison and Cosden (1997) reviewed concepts of risk and resilience for successful adaptation of individuals with learning disabilities. For this study I focused on the sections concerning adults. Risk factors for adults included weak verbal skills, denial of their disability, and school dropout. Protective factors included higher verbal skills, having graduated from high school, awareness of the condition, self-awareness, and having a supportive and responsive environment (from significant others who offered emotional and practical support), all of which helped adults successfully adapt to the demands of adulthood. The authors found that adults with learning difficulties shared certain characteristics which included a continuation of educational and/or social problems as well as a prolonged period of dependence on their families.

In exploring how families with reading problems navigated decision making tasks, Peck and Stackhouse (1973) found that families took longer to reach a decision, spent greater time in silence with fewer exchanges of information, and suffered from reduced communication effectiveness. Though this is an older study it highlighted the communication difficulties in families with reading problems. In another older case report by Lenkowsky and Saposnek (1978) dyslexia was found to substantially affect the marriage relationship and the functioning of the family. The dyslexic husband suffered from major emotional challenges. There was severe communication and relational breakdown between the couple which appeared to be directly related to his dyslexic difficulties, and which affected the entire family destructively. The wife was overwhelmed with responsibility for most household tasks as her partner depended heavily on her because of his struggles. This study reveals how deleterious the effects of dyslexia can be on marital life, however it did not focus on how communication was affected by dyslexia, nor how this influenced the breakdown in connection.

Two enquiries into the mediational role of emotional experience between perceived family support and self-esteem in adulthood highlighted the pivotal role family support plays in the lives of adults with dyslexia. Nalavany and Carawan (2012) found that positive perceived family support had an effect of lessening negative emotional experiences in young and middle adulthood, and that this subsequently facilitated positive self-esteem. Family support

was directly instrumental in helping adults cope and regulate emotions. In a follow-up study, Carawan, Nalavany and Jenkins (2015) found that perceived family support also provided a buffer for emotional difficulties in late adulthood. Again, low self-esteem was mediated by the positive support of family. Each of these studies highlighted the need for assistance and support for dyslexic adults to enhance self-esteem.

Finally, in a study on the personal experiences and adjustment of Dutch adults with dyslexia, Hellendoorn and Ruijsenaars (2000) reported that dyslexia had a strong impact on daily life. Adults suffered from educational and career problems, social and emotional problems were common, and family support was a powerful predictor of successful adult adjustment and wellbeing. A weakness in this study is some inconsistency on the part of the authors, who reported in their findings that those who were married or living in a de facto partnership were all positive about their relationships. However, later in the discussion they contradicted themselves by reporting that many participants experienced difficulties in their intimate relationships. The findings from this study are therefore ambiguous and support the need for an in-depth enquiry into exactly what is happening for intimate partners where dyslexia is involved.

These papers are summarised below (see Table 3).

Table 3.***Adult Dyslexia and Family Relations (Including Emotional and Psychosocial Functioning)***

AUTHORS	METHOD	EVALUATION	SAMPLE	STRENGTHS LIMITATIONS
Morrison & Cosden (1997) Risk, resilience, and adjustment of individuals with LD	Literature Review	Used concepts of risk and resiliency to frame how LD affects emotional adjustment.		<u>Limitations</u> Not dyslexia specific
Peck & Stackhouse (1973) Reading problems and family dynamics	Quantitative	Studied how families complete a decision-making task. Findings: Communication and decision-making are affected.	30 families 15 reading problem 15 "normal"	<u>Limitations</u> Assessment not specific – school reported; Small sample
Lenkowsky & Saposnek (1978) Family consequences of parental dyslexia	Case study	Outlined family problems accompanying dyslexia. Findings: Dyslexia has a major impact on family.	1 family	<u>Strengths</u> Specific to dyslexia <u>Limitations</u> Small study Clinician's observation only
Nalavany & Carawan (2012) Perceived family support and self-esteem: The mediational role of emotional experience in adults with dyslexia	Quantitative	Studied the effect of family support on self-esteem across adulthood. Findings: Perceived family support positively affects self-esteem through the emotions.	224 adults Average age: 49.1 yrs 64.7% males	<u>Strengths</u> Good sized study <u>Limitations</u> Not dyslexia specific (self-identified thus not confirmed); Not generalizable to population
Carawan, Nalavany & Jenkins (2015) Emotional experience with dyslexia and self-esteem: The protective role of perceived family support in late adulthood	Quantitative	Focused on late adulthood. Findings: Family support can buffer the emotional toll caused by dyslexia in late adulthood.	50 older adults Age: 60+ yrs	<u>Strengths</u> Specific to dyslexia <u>Limitations</u> Small sample; Not generalizable to population; Self-identified dyslexia (not confirmed)
Hellendoorn & Ruijsenaars (2000) Personal experiences and adjustment of Dutch adults with dyslexia	Mixed methods	Explored the way dyslexic Dutch adults coped in life. Findings: Strong impact of dyslexia on daily life across a number of factors.	27 adults Age: 20-39 yrs 7 married 1 divorced 9 defacto 10 single	<u>Strengths</u> Specific to dyslexia; Confirmed diagnostically <u>Limitations</u> Small sample

The Impact of Visual and Auditory Impairments on Intimate Relationships

As mentioned earlier, theories of dyslexia have been proposed that are based on the language system (Shaywitz, 1998), visual system (Boder, 1973), both language and visual systems (Waldie et al., 2013), and temporal processing system (Habib, 2000). Berresford (2012) has noted that dyslexia can be a weakness in both auditory and/or visual processing and she suggested that most classic dyslexics are limited by both of these sequencing processing difficulties. As Waldie et al. (2013) have suggested, visual and auditory processing are essential for learning and dyslexia may affect both. In the light of this, I suggest that hearing loss may be similar to an individual with auditory dyslexia not being able to make sense of what they hear, and visual loss similar to the person with visual dyslexia having difficulty seeing the position and order of letters. Several articles on hearing and visual impairments in intimate relationships were therefore included in this review.

In a review of the literature on couples living with hearing disabilities, Hetu, Jones and Getty (1993) found that the impact of hearing loss was felt by both partners. Each partner suffered from various negative emotions due to struggling with the impairment which affected self-image. Difficulties in communication resulted in frustration, especially as the non-impaired spouse perceived their partner as non-responsive. Partners misunderstood each other's experiences and each had quite differing perspectives. It was suggested that professional support was required by each partner individually according to their own particular needs, and as a couple, in order to resolve issues. Better understanding and awareness were required to understand the effects of the disability on their lives and both needed to learn new skills for adaptation.

In their study of the experiences of wives whose husbands had severe hearing loss, Hallberg and Barrenas (1993) similarly found that couples experienced significant difficulties with communication. Again, wives interpreted their husbands as being ignorant and unaware. The disability was felt by both spouses and a majority of the husbands were unwilling to accept their disability or its effects on the relationship. This resulted in negative coping strategies by the wives, including denial of the disability, minimising of problems, distancing (lack of connection), and over-functioning with regards to taking responsibility for the husband.

Finally, Brennan and Bally (2007) studied psychosocial adaptations to dual sensory loss in adulthood. They found that combined visual and auditory loss significantly impeded communication and that negotiating daily life was a significant challenge. Emotional difficulties were common, social dynamics were affected, and spouses were particularly vulnerable to experiencing the emotional impact felt by their disabled partners. Again, dual loss affected both partners negatively. The non-impaired partners were more likely to be caregivers, resulting in strain and fatigue.

In all three of the above-mentioned studies, it was stressed that both spouses should be involved in any rehabilitation, in order to maximise positive outcomes.

These enquiries revealed that auditory loss, visual loss, and dual sensory loss had major implications for couples living with these difficulties. The articles reporting these studies were perused in the hope that they may help to shed some light on experiences between intimate partners who live with dyslexia. It is possible that dyslexia (which can involve visual and auditory sequelae) may cause similar challenges for intimate partners.

Communication and Connection in Intimate Relationships

It has been well established in the literature that couple intimacy is linked to overall relationship satisfaction. Couples report high levels of fulfilment in their relationships when they have positive feelings of intimacy (Yoo, Bartle-Haring, Day & Gangamma, 2014). The term “intimacy” in this study generally refers to intimate partners’ ability to bring themselves into encounter with each other—or “into-me-see”—which includes emotional communication and sexuality. Schnarch (1997) wrote, “Intimacy is an ‘I-Thou’ experience” (p. 102). This involves the intrinsic awareness that we are separate from our partner (I) yet in-relation with them (I-Thou).

Effective positive communication has long been seen as the bedrock of intimacy. Gottman (1994) outlined that couple communication is consistently linked to relationship satisfaction and he found destructive communication (i.e., defensiveness, contempt, criticism, and stonewalling) to be strongly correlated with poor relationship quality and satisfaction. Consistently low relationship satisfaction was found to lead to separation and divorce (Gottman & Levenson, 1992). Holman (2001) also found the quality of couple

communication, particularly constructive communication, to be one of the strongest predictors of relationship satisfaction. Intimacy was identified by Goleman (1996) as a most vital stage of adulthood and he suggested that this connection is best achieved when partners effectively communicate, though he added that individual control of each one's own emotional responses helps to preserve relationships. Schnarch (1997) also saw the importance of differentiation as one of the keys to intimacy. In preserving a solid sense of self (or the ability to keep emotional balance while interacting in relationships) a partner is more in touch with their "I", and therefore more able to bring themselves into connection. Since intimacy involves being accurately known, when two people "hold onto themselves", they are more able to be known and intimacy grows (Schnarch, 2009, p. 89).

In their exploration into the mediating impact of couples' experiences of their family-of-origin processes and relationship quality on their attachment behaviours, Knapp, Sandberg, Novak, and Larson (2015) found that negative family-of-origin experiences contributed to negative couple communication and that unhealthy couple attachment behaviours were associated with poor communication. This supports the view by Greenberg and Johnson (1988) that positive adult attachment behaviour is essential to form emotional bonds in intimate relationships and that the "I-Thou" dialogue, with affective expression central to the process, is a crucial form of communication that improves the quality of close relationships.

Research on couple communication and stress revealed that marital satisfaction was affected by stress originating within the relationship (e.g., divergent attitudes) which was in turn affected by daily stress external to the relationship, and that low levels of stress from within the relationship and high levels of positive communication were important for a successful relationship (Bodenmann, Ledermann & Bradbury, 2007; Ledermann, Bodenmann, Rudaz & Bradbury, 2010). Carroll, Hill, Yorgason, Larson and Sandberg (2013) studied the mediating effects of communication on work-family conflict and marital satisfaction. They found that constructive communication can be a buffer against negative factors that can lower relational satisfaction, whereas destructive communication exacerbated work-family conflict. This corresponds with other findings that link negative communication to lower intimacy quality (Gottman, 1994; Yoo et al., 2014).

Thus research has consistently shown that communication is a crucial factor that enables or hinders intimacy in intimate relationships, positive communication is essential for healthy

couples (Ledermann et al., 2010), and therefore effective communication skills are vital in order to achieve long lasting relationships.

There are a number of factors from the research reviewed that may implicate dyslexia in relationship breakdown. Firstly it is a condition that involves disruption in language systems and since language is required for communication (notwithstanding that non-verbal communication also is involved) then it is possible that communication may be affected. Dyslexia has been identified as a familial and hereditary condition that can have detrimental consequences in childhood which persist into the adult years and affect adult functioning in multiple ways. It is therefore possible that negative family-of-origin experiences and negative attachment behaviours may be transferred into intimate relationships. Clearly many dyslexic individuals are highly vulnerable to environmental stress, particularly workplace stress. According to McNulty (2003) failure to find a niche in life contributes to ongoing struggles. In addition, stress has a deleterious effect on couples although it is positively mediated by healthy communication. If there are communication difficulties, negative historical factors, and high stress situations both outside and inside the relationship, couples living with dyslexia may be profoundly affected.

In perusing the literature it becomes evident that dyslexic partners may lean heavily on their non-dyslexic partners for assistance and support. An overwhelming finding of this review is the extent to which dyslexic adults require continuous support in numerous ways right through adulthood. As well, there is evidence of a need for better understanding and awareness, recognition of social struggles, effective communication strategies, and emotional support and regulation skills for adults with dyslexia. Exploring how dyslexia may contribute to intimate relational experiences is therefore vital if professionals, practitioners, and family members are to provide the necessary and adequate support clearly required by this population group.

The current study was therefore undertaken to investigate whether communication was disrupted between partners when one partner has dyslexia. If so, a further aim was to investigate in what way communication was disrupted, as well as the possible effects on relational connection.

CHAPTER THREE

Methodology and Method

Methodological Approach

This research was undertaken using a qualitative, phenomenological approach. Due to the numbers of quantitative studies that predominate in the dyslexia field, and the paucity of qualitative enquiries, particularly concerning adults' experiences, it seemed important to aim to capture individuals' and couples' experiences of dyslexia, including the meaning these had in their intimate relationships. This approach would support persons with dyslexia to have their voices heard about their experiences and what it means to them to live in this world.

Since I have lived and breathed the personal effects of dyslexia in my family life which propelled me to specialise in, and formally research this topic, in many respects I have been a researcher immersed in my own heuristic enquiry (Moustakas, 1994). I have grown to have a deep understanding of this phenomenon as I have observed the process within the family and searched for my own personal meaning from it throughout these years. This helped me discover more about myself which culminated in publishing an auto-ethnographic article (McWilliams, 2012). It was therefore time to focus away from myself and onto the lived experiences of dyslexic individuals and the implications for the fields of counselling and specific learning difficulties.

In phenomenological studies the researcher refrains from acting on one's own suppositions and instead focuses on a topic naively and freshly, to capture the essence of what is being described. Choosing phenomenology meant remaining faithful to my philosophy which is centred within "relationality," or Buber's interpersonal theory of "I and Thou" (Buber, 1958). I-Thou relationships respect difference, are characterised by mutuality, equality, and respect, and hold a high view of both self and "other". Past experiences had formed my "I" and I now wanted to focus solely on my participant's voices (or "Thou").

Phenomenology

McLeod (2003) explained the aim of phenomenology as attempting to find new ways of understanding and seeing the *essence* of the phenomenon being studied. The very act of such searching illuminates meanings and experiences. This approach involves focusing on *experience* in order to obtain “comprehensive descriptions that provide the basis for a reflective structural analysis” that captures the essences of those experiences (Moustakas, 1994, p. 13). Phenomenology generates knowledge about people’s experiences and captures the lived experiences of people’s everyday lives (Hesse-Biber & Leavy, 2011).

“Phenomenological reduction” is the method I used to discover the essential meanings of participants’ experiences. It is a deliberate, purposive exploration of a phenomenon’s own meanings (Groenewald, 2004) and concentrates on explicating the essential nature of what is being studied. This involves a reflective description of data just as they appear, then reducing them to specific themes and organising those themes into a coherent textural description of the phenomenon.

The first step to phenomenological reduction is “Epoche”, a Greek word for “to stay away from” (Moustakas, 1994). In Epoche the researcher sets aside their assumptions, preconceived ideas, and hypotheses and instead “brackets” the world, or phenomenon, being studied, thus it can be gazed upon with fresh eyes. Moustakas (1994) explained, “Although the Epoche is rarely perfectly achieved, the... attention, and work involved... and the attitude... significantly reduce the influence of preconceived... biases” (p. 90). This allows an experience to emerge just as it is and the researcher can come to know it as it discloses itself.

Participants

The number of couples that I wished to include in this study was six. Although the results of such a small scale study could not be taken as representative of the whole population of people with dyslexia, nevertheless I wanted to align the sample with the apparent percentage per national population of males and females with dyslexia, which may be four males to two females, as indicated by Berresford (2012). Six couples were therefore a suitable sample to

illuminate the phenomenon. This resulted in a total of twelve participants: four males with dyslexia, and two females with dyslexia, and their six non-dyslexic partners.

To increase the trustworthiness and credibility of the study, all dyslexic participants were formally diagnostically assessed as having dyslexia (rather than self-confirmed). This assessment was completed by Indigo Assessment and Counselling via administration of the Wechsler Adult Intelligence Scale – Fourth Edition (WAIS-IV), Australian and New Zealand Language Adaptation. This test assesses adults' cognitive ability and enables comparisons between abilities (verbal comprehension and perceptual reasoning) and proficiencies (working memory and processing speed). It also delineates strengths and weaknesses over the four cognitive domains, as well as generating a composite score representing general intellectual ability (or Full Scale IQ) (Wechsler, 2008). See Table 4 for a summary of the dyslexic participants' scores.

The Wechsler intelligence scales have frequently been updated over the last 77 years in order to incorporate advances in intellectual assessments and changes in population and clinical trends. The WAIS-IV is a widely accepted standardised test commonly used by psychologists and other specifically trained professionals to measure cognitive intelligence. Individuals are diagnosed with learning disorders when their performance on the test is significantly below what is expected for their intellectual ability. Individuals with dyslexia generally obtain higher scores for verbal comprehension and perceptual reasoning and much lower scores for working memory and processing speed.

Other criteria for inclusion were that partners needed to be married or in a de-facto relationship for at least one year. All participants were of New Zealand European or Pākehā ethnicity and all were heterosexual.

Recruitment of Participants

To find participants I used purposive snowball sampling. This is used when appropriate participants are difficult to find and researchers need to rely on personal networking (McLeod, 2003). Dyslexia is still a relatively new concept in New Zealand with most diagnostic assessments carried out on children. I assumed that finding recognised dyslexic adults would be a complicated task, which it was as it took eight months to find a valid sample.

Since dyslexia is hereditary I needed access to parents of diagnosed children, so placed an advertisement at Indigo Assessment and Counselling where assessments are conducted. An advertisement was also placed on the Dyslexia Foundation of New Zealand's website at the same time as Dyslexia Awareness Week. Word snowballed and slowly people came forward to be appraised for inclusion. To move into the phase of being formally assessed, individuals needed to self-confirm dyslexia, or have some idea they were dyslexic from childhood, or have their own children confirmed as dyslexic, as well as fulfilling the other inclusion criteria. Each one was then fully diagnostically assessed and if they were confirmed as having dyslexia they were included in the study. All dyslexic participants were provided with a psychologist's report from their assessment. As researcher I met the cost of this assessment for each participant.

Non-dyslexic partners completed a list of questions that checks for dyslexia from SPELD NZ to confirm they were not dyslexic. If this was certified, and they fulfilled the rest of the inclusion criteria, the couple was included in the study. An Arno Profile System temperament analysis test (see Appendix L) was administered to all participants as an adjunct to the study. Each participant was provided with a report of their profile.

Portraits of Participants

The following is a brief description of each of the 12 participants (grouped here as couples) in the study. Each portrait gives the pseudonym, age, and synopsis of the diagnostic assessment of each partner with dyslexia, as well as a vignette of each couple relationship. Every couple in this study reported their socio-economic status (classified in this project as low, middle or high) as being in the middle. See Tables 4 and 5 for a summary of the participant sample.

Lily and David

Lily (40) and David (43) have been married for 14 years. Both are in professional careers. They have dyslexic children. They reported their relationship as being safe, respectful, secure, and describe themselves as: "quite comfortable with each other," "we trust each other" and "we are seen as one".

Lily was assessed to be included in this study. From the WAIS-IV her Verbal Comprehension was ranked at 70, Perceptual Reasoning at 96 (Superior), Working Memory at 23, and Processing Speed at 34. This cognitive profile reflects classic dyslexia. Lily has a superior visual strength but results revealed that both auditory and visual domains are affected. Lily completed high school with Sixth Form Certificate and then achieved a bachelor's degree. She had special education through SPELD during Forms One and Two at school.

Mary and Boris

Mary (38) and Boris (41) have been married for 14 years. Mary has a professional career and Boris is a farmer. One of their children was diagnosed with dyslexia, dyspraxia, and ADHD. Mary and Boris described their relationship as “really connected” and both said that it brought the best out in each other.

Mary was assessed to be included in this study. She believed she was dyslexic after finding out their child was diagnosed. From the WAIS-IV her Verbal Comprehension was ranked at 70, Perceptual Reasoning at 21 (timed) and 50 (untimed), Working Memory at 42, and Processing Speed at 8. This cognitive profile reflects classic dyslexia. Mary's results revealed a high verbal strength and both auditory and visual domains are affected. Mary finished high school with G.C.S.E. in six subjects and recently completed her bachelor's degree.

Bob and Sarah

Bob (44) and Sarah (49) have been in a de-facto relationship for 15 months. Sarah has three gifted children, two of whom also have a learning difficulty, and Bob works as a Beekeeper. Sarah describes them as “soul mates,” and Bob says “I've found my person”. At the time of finishing this research portfolio Bob and Sarah phoned to ask to see me while they were in the neighbourhood. They declared they had recently become engaged and were due to marry in a few months.

Bob was assessed to be included in this study. From the WAIS-IV his Verbal Comprehension was ranked at 63, Perceptual Reasoning at 94 (Superior), Working Memory at 23, and Processing Speed at 18. This cognitive profile reflects classic dyslexia. Bob has a

superior visual strength but results reveal both auditory and visual domains are affected. He also has difficulties with mathematics (possible dyscalculia). Bob has no high school or tertiary qualifications.

Oliver and Tina

Oliver (49) and Tina (47) have been married for 18 years. Tina stays at home to care for the family and Oliver has a professional career. They have dyslexic children. They describe their relationship as “strong at the core of things” and say “we have a very special relationship,” and “we’re pulling on the same string”.

Oliver was assessed to be included in this study. From the WAIS-IV his Verbal Comprehension was ranked at 99.8 (very superior), Perceptual Reasoning at 99.6 with no time restraints (very superior), 97 with time restraints (superior), Working Memory at 18, and Processing Speed at 93 (superior). This cognitive profile reflects classic dyslexia. Oliver has excellent verbal and visual perceptual abilities but results revealed dyslexic auditory sequencing issues. Oliver gained his O-Levels in seven subjects. He went on to pass a Cambridge English: Business Certificate, a Higher National Certificate, and then a bachelor’s degree. He had a few lessons with a remedial spelling teacher when he was 13.

James and Rosie

James (39) and Rosie (38) have been married for three years (though they have been together for 10 years). James is a tradesman and Rosie is in a professional career. They described their relationship as having “a lack of connection,” and stated “we don’t have a close relationship”.

James was identified as have a learning disability as a child through SPELD NZ. He was assessed to be included in this study. From the WAIS-IV his Verbal Comprehension was ranked at 86 (high average), Perceptual Reasoning at 81 (high average), Working Memory at 37, and Processing Speed at 42. This cognitive profile reflects dyslexia. This score reflects some visual sequencing difficulties and clear auditory difficulties. James completed high school with Sixth Form Certificate and then gained a Trade Certificate as well as NZQA results in cooking. He had special education through SPELD for several school terms.

Dean and Patricia

Dean (43) and Patricia (38) have been married for three years. For each of them this was their second marriage. Patricia has her own business and Dean is a manager for a building company. They described their relationship as “really good,” with connection being “really high”. Patricia said “we have good trust,” and Dean said “I’m very well connected to Patricia.”

Dean was assessed to be included in this study. From the WAIS-IV his Verbal Comprehension was ranked at 68, Perceptual Reasoning at 87 (high average), Working Memory at 18, and Processing Speed at 34. This cognitive profile reflects dyslexia. Dean has visual strengths due to his high average perceptual reasoning score and results revealed a strong auditory dyslexia but also a visual dyslexia. Dean finished high school with School Certificate and later completed a Trade Certificate. He had reading assistance during primary school.

Table 4.*Sample of dyslexic participants*

Subject	Gender	Age	Ethnicity	SES	FSIQ Score (P)	VC Score (P)	PR Score (P)	WM Score (P)	PS Score (P)	Highest School Achievement	Highest Level of Tertiary Achievement	Time in Special Education
Lily	Female	40	New Zealand European	Middle	108 (70)	108 (70)	127 (96)	89 (23)	94 (34)	Sixth Form Cert.	Bachelor's Degree	SPELD Forms 1 and 2
Mary	Female	38	Irish	Middle	97 (42)	- (70)	- (21)	- (42)	- (8)	G.C.S.E. 6 subjects	Bachelor's Degree	None
Oliver	Male	49	British	Middle	128 (97)	- (99.8)	- (99.6)	- (18)	- (93)	O-Levels 7 subjects	Higher National Certificate, Bachelor's degree (Hons)	Remedial Reading (a few lessons age 13)
James	Male	39	New Zealand European	Middle	108 (70)	116 (86)	113 (81)	95 (37)	97 (42)	Sixth Form Cert.	Trade Certificate	SPELD (two terms)
Dean	Male	43	New Zealand European	Middle	104 (61)	107 (68)	117 (87)	86 (18)	94 (34)	School Cert.	Trade Certificate	Reading Assistance
Bob	Male	44	New Zealand European	Middle	104 (61)	105 (63)	123 (94)	89 (23)	86 (18)	None	None	Reading Recovery (all of school), SPELD (several yrs)

Test used: Wechsler Adult Intelligence Scale – Fourth Edition (WAIS-IV) - Australian and New Zealand Language Adaptation

Above codes: FSIQ: Full Score IQ; VC: Verbal Comprehension; PR: Perceptual Reasoning; WM: Working Memory; PS: Processing Speed
(P): Percentile Rank; SES: Socio-Economic Status

Table 5.

Sample of non-dyslexic partners

Subject	Gender	Age	Ethnicity	SES	Highest Level of School Achievement	Highest Level of Tertiary Achievement
David	Male	43	New Zealand European	Middle	University Entrance	Bachelor's degree
Boris	Male	41	New Zealand European	Middle	School Certificate	None
Tina	Female	47	European	Middle	University Entrance	Master's degree
Rosie	Female	38	New Zealand European	Middle	A Levels	Master's degree
Patricia	Female	38	New Zealand European	Middle	University Entrance	None
Sarah	Female	49	New Zealand European	Middle	School Certificate	None

Above codes: SES: Socio-Economic Status

Procedure

Data were collected by way of in-depth, semi-structured, open-ended interviews (see Appendix D for key interview questions). Three interviews per couple were conducted. With two couples these were undertaken in my office and the other four couples in their homes. Each individual participant was interviewed for 60 minutes and couples were then interviewed together for 90 minutes. These were audio recorded.

As the process of data analysis progressed some of the dyslexic participants were contacted by phone again in order to clarify statements or answer additional questions, and all were contacted towards the end of the analysis to answer a new question that emerged from the findings (outlined below).

All interviews were transcribed by a professional transcriber (see Appendix I) and individual interview transcripts were sent to each participant to give corrective feedback. Transcripts of couple interviews were not sent for feedback as any changes made by individuals would affect the couple data. I checked all audio files and transcripts fully (three for each couple) to ensure the transcribing was accurate.

Data Analysis

To ensure I followed the phenomenological process as thoroughly and rigorously as possible, and to ensure the essences of experiences were gathered as closely as possible to the ways in which participants described them, I analysed the data as follows. In order to make this clear for readers I have itemised this in sections.

Transcripts

By using an iterative process of phenomenological reduction (as explained above) I began working with each transcript in-depth. I first read straight through all transcripts separately, then re-read each one while starting to record emerging data, and then read them again to ensure I had captured as clearly as possible the experiences being described by each individual and each couple.

A1 Paper (1)

Next I re-read my recorded data and re-wrote the participants' statements onto large sheets of A1 paper according to each theme that was emerging. These statements were recorded under each theme in blue pen for the dyslexic participants' statements, red pen for the non-dyslexic partners' statements, and black pen for comments made in couple interviews. I eventually joined these sheets together to form two large sets of data recorded under each couple.

Post-it Notes

I then needed to analyse whether the descriptions from each couple (and the individual partners within those couples), as listed on the above sets of data, were common across the sample. I therefore ascribed a different coloured post-it note for each couple and re-read the statements that were recorded in blue, red, and black pen. I re-wrote these statements directly onto the post-it notes according to each colour and placed them onto separate A1 sheets of paper under each identified theme in order to see exactly how many couples were expressing the same points and where they differed.

A1 Paper (2)

The statements on the post-it notes were analysed again according to both common statements and ones that differed and from these I produced my own descriptions from the data that captured the essences of the participants' experiences under each identified theme. The findings were then written up in the report. To add examples of participants' statements to the findings I went back over the first sets of data to find what I wanted to include and then checked that these examples were an exact replica of the statements made by checking the transcripts again.

This was a very thorough explication of the data that ensured the phenomenological process was followed as closely as possible. A fundamental issue in qualitative research is the robust nature of the research processes, the equivalent in this paradigm of validity and reliability in positivist, quantitative research (Hesse-Biber & Leavy, 2011). The data in this study were rigorously analysed using a multi-stage process involving repetitive written recordings and

analysis of the participants' descriptions *in their own words*, which added to its trustworthiness. As well, two professional third parties, one an expert in the field of learning difficulties, independently checked the analysis for credibility.

Ethical Considerations

This was very sensitive research in that I was working with vulnerable people as participants who may have experienced stigmatisation or marginalisation. Morton (2006) wrote that there is a clear potential for researchers to objectify and unwittingly exploit participants with "disability". The very fact that as researcher I was positioned as someone non-dyslexic, with the privilege of status through having earned qualifications which I was continuing to gain by researching this population group, meant that this very study could be working against the "other" (Morton, 2006). It was imperative that I worked according to my philosophy of "I-Thou" by treating each participant with the highest regard and respect to build rapport and guard against their disempowerment. I formed my questions and responses in a way that ensured they did not suffer stigmatisation or discomfort. I stayed attuned to my own limitations and worked to remain aware of my own judgements (particularly from my marital history) so I could remain safe for my participants. To help with this I attended regular personal therapy sessions throughout the research process.

Interviewing invites revelation of highly intimate and personal details, particularly when interviewing couples, and emotions may be stirred as stories are shared. Research has shown that adults with dyslexia may have emotional challenges and also may have difficulty with emotional regulation, as well as low self-esteem. Therefore this research carried emotional risk for both dyslexic and non-dyslexic partners as it may have caused distress while talking about a sensitive subject. As a professional counsellor with 15 years of experience I have extensive experience in working with trauma, dyslexia, and domestic violence, and I am experienced in couples counselling. I was therefore well prepared to be able to manage overwhelming emotions or trauma responses should they be stirred in the interview process. As researcher, however, I could not counsel participants and so a free session of counselling with an experienced practitioner was offered as part of the research process should they require it. This was outlined in the Participant Information Sheet prior to beginning the study (see Appendix D) and on the Consent Form (see Appendix E).

It was also important that I checked the language I used in interviews since complex concepts and questions may be a challenge for some persons with dyslexia. I was also aware of the effect that labelling may have on participants so was careful when using the term “dyslexic”. Since all participants were confirmed as having dyslexia, and had given their informed consent to participating in the study, the possibility of harm concerning use of this term was minimised.

All participants chose a pseudonym to ensure their identity was protected in the writing of this research report. Any personal details that could identify participants were erased or excluded from the data as the transcripts were analysed and were disguised or omitted from this research report. Participants’ privacy as well as their confidentiality were therefore ensured throughout the process.

CHAPTER FOUR

Findings

The results of this study reveal that dyslexia can affect intimate relationships in multiple ways. These effects are presented as key themes and sub-themes, in accordance with the commonalities that were identified across couples and individuals, as well as aspects of the phenomenon that were experienced by single or few participants. Although these couples' experiences have much in common, caution should be taken in generalising these results to all couples who live with dyslexia. Nor can these findings be generalised to all dyslexic persons or their partners. Learning difficulties are complex and heterogeneous, and often occur with concomitant difficulties. However these results do provide insight into how dyslexia may be contributing to intimate partnership problems.

Without my asking, all dyslexic partners commented on the main way dyslexia affected either themselves individually, or as a couple. Most couples named their emotions as having the greatest impact: James, for example, said the emotions were the main driver with dyslexia, Lily identified the main difficulty in their relationship "*in a nutshell*" was their emotions, while Bob also said the main issue in his relationship was "*the wall*" (or emotional self-protection). Sarah, his partner, believed dyslexia primarily affected their communication but agreed that "*the wall is the main issue in our intimacy.*" Dean said the main impact of dyslexia on his relationship was related to his self-esteem.

THINKING/PROCESSING

Memory

Since one of the diagnostic criteria for dyslexia is a low Working Memory (Wechsler, 2008) it is not surprising that memory was one area that affected all dyslexic participants and most couples. This led to an emotional reaction for many participants with the most common feeling noted as "*frustration*". The biggest difficulty was not being able to recall words or an event in history, or their inability to recall or retain information, including birthdays and anniversaries. Many dyslexic partners also said they had difficulty in arguments if their

partners brought up an issue as they couldn't remember what had happened (see Arguments section below). For example, Dean commented:

I really do need to take notes because I was arguing with Patricia... I can't remember what she said, so, I'm going to write notes because she can recite everything you said up to six months to a year ago.

James said he struggled when people gave him commands:

I need to write it down. When it comes back to trying and doing it, you know there's another step you missed but for the life of you, you can't remember what it is.

Memory is something that caused arguments between Rosie and James. Rosie said: *"I'll tell him we're doing this on this day and I'll tell him two or three times and he won't remember and says I never told him."* They attributed James losing things to his working memory issues from dyslexia which greatly impacted on their relationship. Rosie said:

It feels like you don't take the time to think about it... for me, when I lose something, if I go back and think about it, I can figure out where I last had it. It's a constant losing things.

Lily said losing things was *"extremely frustrating"*:

You've got so much going on in the brain everywhere and its chaos everywhere that you just lose things a lot... it will really consume me. It will stop me from doing other things... because I'll be looking for it. So you lose time... I'm going to be extremely late.

Many dyslexic participants struggled with time or remembering dates and events, which could be upsetting for their partners. Patricia commented on Dean's forgetting the anniversary of their first date:

For Dean, dates and stuff don't even... he forgets his own birthday... I could've spent the day being... angry. It comes across... you just don't care... but I could see

that he was struggling... on his whiteboard at work in a corner he has... first date, anniversary... my birthday. He won't remember it's there and he probably won't even look at it but he's tried.

Both Lily and Dean said they became overloaded when there was too much running through their heads at once. Lily said if she was overconsumed her memory would be weaker, which would impact on the family. For example, when going away Lily had a lot to arrange and she forgot to tell David to pick their daughter up from school. David said these issues didn't really get to him, *"I'm quite tolerant. Lily's got her ways and I've always known she's had her certain ways."* Lily also reported that if she had something on her mind she wanted to resolve it, and if it had an emotional tie to it (which she called *"not a good head space"*), that she tended to lock onto what was in her mind and it was very frustrating to have to come away from it. She said:

...just brain on something else and I need to find a way to go off button. That's really hard, really hard.

When overwhelmed Dean said:

I can't do or be too many things at one time. It's like that blockage... I couldn't move from that spot. Can't let it go. I physically can't move myself. That's when I need to leave an argument. With 50% of my brain working on the problems and 50% of my brain locked into that... I can't move from this spot.

He added:

I didn't understand the lesson. Came outside...half my brain was whirring over what they were talking about and trying to work it out and people started talking to me and I just couldn't respond... there was lots of people in the room and they were all talking at once... I had to leave. It's just confusion and frustration.

Processing

Four couples reported that they were affected by difficulties with processing information. This related to the dyslexic partner not thinking things through or planning. Sarah said this caused a lot of misunderstandings as *“he doesn’t think and plan anything... it is about the dyslexia.”* She added:

The sequencing thing is a big issue. Even this weekend, which has been planned for ages, he said to me, “Now what is it we’re doing this weekend?” It’s that getting in sequence of, “Where are we going first? Then where are we going? What time was that?” He finds that very, very difficult to think ahead and plan anything. It’s quite frustrating if you have to go over things and over things and over things and over things.

Bob said *“I don’t analyse things.”* Sarah said Bob didn’t understand that other people had to organise things. She said, *“He thinks in a very different way than I do....He plans nothing. He is very spur-of-the –moment...I think I’m organising another child!...It is definitely frustrating... because I’m very organised.”* Sarah also observed:

I think he’s very easily distracted with his dyslexia. He really does go off-centre a lot and loses where he’s at and what he’s supposed to be doing which is why I think he loses track of time. I have to remind him about things quite a lot. It’s quite frustrating.

Sarah also said, however, that she understood: *“I do understand. I know he’s not doing it deliberately and he can’t help it. He really can’t help it.”* Rosie also found her partner’s processing difficulties frustrating and said this caused a lot of arguments:

It’s his brain’s just on a different... he might be half listening to me but he’s also looking everywhere. It’s like he’s not really looking at you or he’s scattered, like he’s somewhere else completely.

COMMUNICATION

Couple Awareness

All couples were generally aware of their communication dynamics and reported that they struggled with communication in various ways. Those whose communication had improved said they had learned from their difficulties or worked at it. Four couples were aware they were not communicating well and identified dyslexia as the main contributor to this, although all couples except James and Rosie said that their conversation was generally good as they did talk, and often, about a lot of things. In this sense it was not *how much* talking was happening but rather *how* they communicated.

Oliver and Tina identified their problem as mainly communication, which most of their arguments centred around. Oliver said *“there are a lot of issues and arguments that have been driven through dyslexia cos they’re generally based around a miscommunication.”* They felt they were *“not communicating properly”* though often came to realise they were actually saying the same thing, but as Tina commented, *“we just didn’t hear each other.”* They agreed *“it’s the way we communicate that’s the problem rather than the actual issue.”*

Bob and Sarah also said it was not the amount of communicating but *“clarification of the communication”*. Sarah believed that her understanding of dyslexia (due to her children) was a strong factor in the relationship working. She said:

If you didn’t know that, your communication would be very different... and it would be taken as not interested... doesn’t care... indifferent... There’s no doubt if you’ve got dyslexia you think differently and you communicate differently than everybody else.

Lily and David both agreed that what disrupted their communication was *“the emotional side”*. Lily said *“when feelings get into it and I get this overwhelmed... I can’t communicate...I get quite overwhelmed and just want to run away.”* Lily shared that she had learned over time to be clear about exactly what she was saying to David. Overall, however, they reported *“we talk to each other a lot... there’s nothing hidden.”*

Mary and Boris agreed that their communication was good and Boris said “*communication’s always been really good*” but “*for a while communication was hard*” during some times of conflict when Mary was more “*highly strung*” and back then “*we used to hold our problems... wouldn’t have shared them as much as we do now.*” Mary said that since doing a counselling course she has learned to “*catch*” her emotions, which has helped her “*sit down and have a normal conversation.*” In the past Mary’s anger used to disrupt their communication.

Overall Rosie and James struggled the most with communication and they had the most relationship difficulties. Rosie said:

I never really completely feel understood and I get frustrated ‘cos I think we’ve had a conversation and he’s understood and then it comes back again and he’s not really got what I was trying to say. So it gets frustrating.

Texting

All dyslexic participants reported that they had difficulty with texting, due to words, spelling, slowness, and concern of misinterpretation. Dean and Patricia said they have learned not to have emotionally charged conversations over text because “*we get all tangled up. Dean doesn’t read all of it, he’ll miss out... important words. It’s just miscommunication.*” Most participants said they preferred to call and most said predictive texting helped.

Accessing Words

Five couples mentioned that the dyslexic partners struggled with accessing words, particularly the right words, and that this affected communication between them. It was often reported that their words came across wrongly, or that they struggled to get a point across and that this caused miscommunication, confusion and frustration. Sarah said Bob mispronounced a lot of words:

For instance he came home from work and said he had an “elevation” done today, instead of an “evaluation.” That’s all the time, constantly I hear that.

Oliver often used the wrong words which caused general confusion. For example he said “please pass the *tomato*” when he meant “*potato*,” and in a love letter to Tina wrote, “*you’re the love of my liver.*” Tina shared:

Sometimes it’s really frustrating cos Oliver uses the wrong words, he would say “it’s in the pantry” meaning the fridge... I’ll be looking there and after a while I’d say “well you said pantry,” he said, “nah I said fridge.” “No you didn’t.” It’s a bit annoying but since I know it’s not something he’s doing on purpose... that sort of helps.

Sarah found when Bob said something that came across wrongly she would take it to heart and they wouldn’t talk for a couple of days. She said she felt confused, upset, and hurt. She later realised “*it wasn’t really what it was meant to be, it was the way it came out and it’s not what he meant.*” Bob commented that Sarah gets “*pissed off because she’s taken it the wrong way. Then she’d go quiet and give me the cold shoulder.*” Sarah said she couldn’t take what Bob was communicating straight off:

What he thinks he said he thinks that’s what it means, whereas everybody else listens to what he said... and thinks he means something totally different.

James commented it was hard to get words to explain what he was trying to do, which disrupted communication between him and Rosie. He said:

I know what I wanna do. I know how I’d like it to sound but will end up sounding like completely different rubbish and that’s what I find really frustrating.

Tina said she had to stop and think what Oliver meant, breaking the flow of communication between them:

I have to think what does he mean by that? Cos I know that’s not, if you put the key in the fridge he means the cupboard or... drawer.... “It’s like God can’t you get it right? Seems such a simple thing to name an object, but he just gets it wrong so often. I can be a bit snitchy... “Oh Oliver!” rolling my eyes.

Dean explained that the problem was “*coming up with the correct word.*” He described this experience as if “*the gear wouldn’t lock in,*” and if this continued under pressure he became angry. He commented that if he had better access to words in his head...

I’d be able to argue with her better. I could be a more effective partner, be a more effective communicator. I could communicate with her on another level. She wants to understand why I can’t communicate with her at that level or why I can’t keep up with her or why I get frustrated.

Ordering Words

As with accessing words, the same five couples found the dyslexic partners struggled with putting the words together and then expressing them. It was often mentioned that they had difficulty: ordering the words in sequence; getting the message across; that it was hard to explain what they were thinking; it took longer to say what they intended; and some tended to over-communicate. These difficulties caused disruption, misunderstandings and frustration, and some non-dyslexic partners didn’t feel listened to.

In describing his experience, Oliver said: “*The stuttering... that’s while your brain’s trying to marshal its thoughts.*” He said his dyslexia “*certainly felt like an impediment.*” Tina said she starts talking because nothing was coming from Oliver:

My thoughts are keeping going and I need to talk. I’m already onto the next thought and he hasn’t responded yet and it breaks the flow of communication.

James commented that communication is harder when the conversation gets interrupted. He said, “*I have a thought, then she interrupts me and then the rest of the points get lost.*”

Bob said “*I still can’t put the words in the right order that I want sometimes*” and Sarah commented:

He often blurts things out without thinking. Often he’s not actually even talking to me, he’s talking to himself... doesn’t even relate to what I think it relates to. There’s a lot of misunderstandings just because of the way he thinks.

They found clarifying helped by saying *“What did you mean by that? Did you mean this or did you mean that?”*

James said:

I have the words generally but it's getting those words out and in a quick enough fashion to be able to form a coherent argument. That's the frustrating side.

He said conversations go around in circles *“like a merry-go-round... we're not getting anywhere... just doing another round of arguing and getting frustrated and storming off or sulking. Something's getting skipped in the processing stage. I know what my point is but getting it into some semblance of order and accuracy....”*

Lily said *“I do get bogged down with all the words.”* She used more words to get her thoughts out, and described this as:

I'm trying to get a point across. We have moments where I try to say something but it's misunderstood so that's not even the amount of words it's the language I've chosen. Communication is tricky because I'm over here but I kind of go five steps forward and then to come back and explain steps two and three, because I can't do it as easily as someone who can do it in less words.

Lily said this affected their communication as *“getting the message across can be a bit tricky so we often have to chew things out to a certain level so he gets things repeated a lot more.”*

Then she tended to over-explain things:

I've got less words to grab but I can't put things in the right order, so it's the ordering. You actually end up using more words so you haven't got the vocab to get them in order specifically... it ends up being wordy because of this ordering problem.

I asked each of the couples what it was like if the non-dyslexic partner tried to help by suggesting words for their dyslexic partner when they were struggling to express themselves. Three dyslexic partners commented that it was unhelpful. For example, Bob said:

Sarah will say, “This is how I feel, blah, blah, blah” and I’m like, “Well that’s taken the words out of my mouth if I could put them together. It feels bad when she does that because even though you can’t find the words yourself, she’s beaten you to it... Sometimes you’d like to say it first... but you can’t.

Oliver commented to Tina, *“When you suggest your own specific word... it feels like you’re making the judgment and that’s not what I want.”*

Dean said, *“If you spell a word without me asking you for help then you’re telling me I’m stupid. If I ask you for help and you don’t give me help then it’s like you think I’m stupid.”*

Flow of Communication

As a result of the difficulties identified above, some participants observed that their communication could become circular at times. Commenting on this, Tina and Oliver reported that though they didn’t recognise it, they were often talking about the same thing. For example when driving to the airport Oliver wanted to turn left at one junction whereas Tina thought the road to take was at the next intersection. This caused a disagreement. Oliver said:

We’re at different points in the thought process. I’m actually where I am spatially and time-wise and Tina has gone further on. So there’s a temporal and spatial difference there.

Tina added:

When we have disagreements we’re actually meaning the same thing and we’re arguing about it, and it takes a while for us to figure out we’re actually saying the same thing. Just seeing it from different angles or expressing it in a different way.

Rose and James had the same experience:

Seventy per cent of our arguments end up arguing the same thing but in a different way and not hearing what the other person's saying. We both agree on the same thing but thinking we don't cos it's not how we are seeing it.

Sarah also indicated that their flow of communication was disrupted by the way in which Bob receives information, and thought this was directly affected by dyslexia:

You have to spell it out to Bob. If you want him to know something you have to really spell it out very clearly. He's gotta have a little bit of a think about it, take it all in. He's quite oblivious. It makes me quite frustrated and a bit cross cos I think why don't you know that? You should know that, it was obvious. He doesn't pick up cues... just goes over the top of his head... it just doesn't compute at all. It definitely does affect communication... definitely need clarification on a lot of things.

Sarah also didn't assume Bob understood what she meant:

I realise that just because he hasn't reacted to something I've said or done it's not because he doesn't care or he wasn't listening or wasn't interested, it's cos he didn't actually understand what I meant, didn't pick up.

This communication problem was having a serious effect on Rosie, who said she was ready to leave her marriage if communication didn't improve. Like Sarah, she said:

James doesn't often get the feeling behind what I'm trying to say. I feel sometimes he's misunderstood totally what I've been trying to say when later I realise he's taken it a different way.

James explained that while he was trying to get his words out, Rosie would talk over him, which disrupted communication:

It's still me trying to get out my point and I'm a step behind. I haven't finished saying my piece and now you're trying to say something that's half spurned from what I was trying to say and potentially being misconstrued.

Listening

Five couples reported that listening was a problem in their communication. Non-dyslexic partners often felt that their partner wasn't listening, however this was often linked to: too much information to take in and sequence, processing thoughts, and not hearing what was being said. For instance Boris said he would feel frustrated when he and Mary were working on a job together. He declared: *"It was winding me up that she wasn't listening."* Mary clarified:

I'll be so busy listening and then you've a whole pile of tasks to do so you're not hearing everything clearly. So then I'll do something wrong... because there's so much to take in.

James responded,

It's not that she's not being listened to, it's that it's not been computed, it's not being understood. I'm listening but I'm not hearing what she's saying. That's the dyslexia. Hey I am listening, I just don't know what you're saying, give me some time to process it.

Rosie commented:

He only listens to a small percentage and assumes the rest. I'll be trying to have a conversation with him and then he'll ask me a question about some completely different topic and I'm like, "aren't you even listening to me at all?" He's like, "Yeah, but this pops into my head" and he has to ask it straight away... he obviously says stuff straight away otherwise he'd probably forget it.

Arguments

Five couples reported a specific difference between them that caused conflict in their relationships, particularly around communication processes. The dyslexic partners tended not to work in detail, whereas their partners were very detailed. For the dyslexic partners too many details meant: too much information to take in, too much to process, and details would

be forgotten which affected argument resolution. This sequence seemed related to organisation problems (see Functioning), and this was also often interpreted as failure to listen on the part of the dyslexic partner.

Several dyslexic participants said that their partner wasn't talking fast enough (e.g., they paused in sentences), or that they knew what the others were going to say, when in fact it was that they were not comfortable listening to all the detail. James agreed when Rosie commented:

James gets aggravated that I'm checking what he's saying. I think he takes it personally that I didn't get what he said the first time. For me it's repeating back what was said to make sure you that you heard it right. I feel James takes it as a criticism.

James acknowledged:

"I find it hard if people speak slowly. I get frustrated because I think I know what they're trying to say. We're going out for coffee, and then we're gonna go for that... you've told me before, you don't need to tell me again. It's just more information... its details that I don't need and that's what frustrates Rosie. She is big on details. "We're going shopping," that's all the details I need. I don't need to know where or what or in what order. That's where quite a few of our arguments stem from.

Bob said he did the same thing: he could not be bothered listening to irrelevant information and that it was about the pressure of keeping up. Sarah would be running through details and in his reply *"everything will be short."* She said he was *"snappy"* whereas Bob said:

We're going to Auckland... that's all I need. She'll give me the whole detail and then thinks that's me being snappy. When I give her the information it's snappy line, snappy line, snappy line. Short information. I wouldn't know how it impacts her other than she thinks I'm in a bad mood and gets a bit stropky.

The differences between being detailed and not had implications for how couples navigated conflict resolution. This also involved the partners' memory for details as outlined above. For instance Dean said:

She remembers everything you said up to 6 months to a year ago. I wish I had recorded the conversation. I don't know what you said. It's one thing to bring up something I said, that was in response to something you said, I can't remember either of them. It's unfair for you to bring up that bit because I don't know what it was about. Frustrating like hell.

James echoed Dean:

Rosie remembers all the details and I don't. When these things are revisited I don't have an argument to stand in cos I don't recall all those details. So I'm already on the back foot. No way are you going to win this argument because you've got no ammunition, which I find really frustrating.

Most couples believed that arguments could be triggered by some aspect of their histories, personalities and self-esteem. For instance Rosie said:

We both take things personally and are sensitive about our shortcomings and it probably causes more arguments. We both very quickly get defensive.

Finally several couples acknowledged that in arguments they were usually meaning the same thing but were seeing it from different angles or expressing it in a different way, and believed this was linked to dyslexia. Arguments also often happened when partners disagreed on how they remembered something.

For all couples arguments became emotionally charged. All dyslexic partners reported specific emotional experiences that appear to be related to dyslexia. These findings are presented in the "Emotions" section below.

Body language

Four dyslexic partners stated they had difficulty reading their partner's body language (or that of any person). James also read Rosie's tone of voice as accusatory which she denied; it is possible that this interpretation by James related to his experience of school teachers' voices.

Oliver observed that *“there’s a lot of things that are taken as read which can be a great cause of miscommunication”* and Bob said *“I couldn’t tell you what people are doing and what age they are... you don’t know if they’re teasing you.”*

FUNCTIONING

The term “functioning” here refers to the ways in which couples navigate the organising, ordering, and responsibilities of their environment. Most of the couples talked about experiencing disorganisation and “chaos” in their homes which they attributed to dyslexia, and this affected their relationships.

Most couples described their homes with words like “chaos,” “messy,” “disorganised,” or “untidy” and often both partners felt high levels of frustration. Rosie said that dyslexia affected the environment in which they lived, which James called *“organised chaos.”* Lily described her home as *“mess and chaos everywhere”* which she found *“extremely frustrating.”* David called home *“organic”* and said, *“it would be very chaotic... if we didn’t have that... keep going, keep going, keep going, keep going... process in place.”* From the data it appeared that the more chaotic the environment, the harder it was for the dyslexic participant to function.

There was a strong reliance on non-dyslexic partners for organising and planning, particularly with sorting finances. For example Sarah, who described herself as *“a pretty organised and responsible person,”* and *“a very good multi-tasker”* often had to take responsibility for running things. She commented, *“He needs to be constantly reminded to keep things moving along.”* Nearly all non-dyslexic partners could be described as being highly organised and high functioning.

It was also clear that organisational difficulties triggered self-esteem issues and concomitant emotional reactions for dyslexic partners. These difficulties with functioning clearly affected the sense of connection between partners in numerous ways. A messy, disorganised home adversely affected connection. There was a strong reliance on the non-dyslexic partner to carry more responsibility in the home. The disorganisation was a constant, on-going struggle. The planning that was necessary when going places and doing things was affected

with the dyslexic participant relying on their partner to remind them of what was happening. Both parties felt major frustration, with the dyslexic partner sometimes feeling overwhelmed. Generally the non-dyslexic partner didn't want a messy, disorganised home, but equally the dyslexic partner didn't cope in mess either, and needed order to function more effectively.

Organisation

For Lily and David the area of their lives that dyslexia most affected was organisation. Lily said, *"If I had a magic wand that's the one thing I could correct."* She clarified that the problem with tidiness was *"too many things around, too much, I can't order it."* David said he was precise, liked things tidy and was organised, whereas Lily said:

I won't plan anything but it'll be like "oh I think I should do that, that needs doing" and I can kinda get my head around certain things but there's some things that just won't.

She added, *"everything I do's so long winded it takes me longer than most... it'll take me twice as long as David"* which David said was *"frustrating"* and which was why he took over some tasks which would then affect Lily, who *"doesn't like me tidying... stepping on her toes... you can see her stewing."* He said, *"I take over and she gets upset... there is that emotional side to the whole thing... cos her self-esteem's not huge."* David said *"the house is mostly untidy most of the time"* and Lily said he would come home *"...and go 'My goodness what've you done all day?'"* which triggers an emotional reaction in Lily. She would become upset which she linked to her self-esteem, or *"a story running in my head that I'm no good."*

For Lily, these struggles around ordering her home were very challenging for them as a couple. They commented that this matter causes disruption between them and that how this was handled depended on the *"level of tolerance on David's part and where [Lily's] head space is."* When it breaks down they both reported feeling unhappy and frustrated.

Both Lily and Mary commented that managing the home was harder for them when the children were little and that they needed more support from their husbands during that time. Lily also referred to being able to do things better when she had support and some pressure or push on her to do certain things.

Rosie commented,

I get very frustrated because I don't like to come home to a messy place...Nothing ever gets put away... he can't close cupboard doors, he leaves rubbish lying around and not think about putting it away for days and days.

This affected her as she said:

I do end up normally picking it up... or I try to have conversations about it but it doesn't really... things change, but slowly.

She saw their ideas of organisation as completely different. *"I'm the alphabetiser of things and James is shove everything in the nearest cupboard, which infuriates me."* James described his *"floor-drobe"* as being a *"dyslexia thing."*

Patricia, who is very high functioning, did most of the organising and planning. She explained that if she didn't do things they *"would not get done."* They each worked at the things they were good at in the home which helped it to function. However Patricia said, *"his car is a mess,"* and regarding Dean's bedside table:

It's just disgusting. It's just dirty tissues, receipts, papers, just junk. His drawers are full of junk, probably 90% needs to be thrown in the bin, wrappers, just crap... he doesn't throw stuff away."

When I asked her how dyslexia affects her as a partner she said:

Just little annoying things that I can let it go. Like if he is putting away the dishes, it's good luck to finding where he put them. They are just anywhere! It is really annoying but I just have to tell myself... It doesn't matter. When he doesn't eat all his lunch... he just puts it all in the sink... and if I didn't do the dishes they would sit.

Patricia handled her annoyance by adopting the attitude *"it doesn't matter in the big picture... he's faithful, he comes home, he loves me."*

Working on Tasks Together

Several couples said their relationship was affected when they worked on home tasks together and this was mostly to do with following details (including taking in information) and processing. The non-dyslexic partner wanted to work in detail and the dyslexic partner wanted to simply get the job done. For Mary and Boris this area—working on tasks together—was the main cause of disruption in their marriage. Mary stated that dyslexia *“definitely affects us when we’re working together and him giving me directions or what to do... we would have a row but we get over it.”* She said, *“When we’re working together I find that really hard.”* For instance, Boris wanted things done in a certain order (e.g., painting the doors with the handles off and lying down) and Mary just wanted to *“get it done and dusted.”* Boris said he would feel *“highly frustrated”*. Mary saw dyslexia as affecting them *“definitely with directions... I struggle sometimes understanding things and Boris telling me what to do in a job... Boris will give them, I’ll write them down, or you’d draw a map for me,”* which she sometimes struggled to follow.

James also said *“we have an argument every time we do DIY.”* He saw Rosie as a details person who wants everything aligned, whereas he thought:

It’s still going to be perfectly functioning... I find it so frustrating... I just wanna get in and get things done and get it finished whereas Rosie will take hours and hours and by that time I’ve lost patience, concentration, enthusiasm. I give up on it. I don’t want it any more.

Rosie and James saw this as reflecting a difference between them in sequencing and *“visual versus detail”* as well as communication difficulties. Rosie said James would

have a sequence in his head and be doing it and I won’t necessarily know... sometimes you find it hard to explain what you’re actually thinking and then you get frustrated and then because I asked questions you get even more frustrated.

Finances

Several couples said the dyslexic partner struggled with managing finances. James said Rosie did the administration such as banking, mortgage, paying bills because *“I can’t... Why would I struggle and frustrate myself doing that when Rosie is perfectly capable doing it better than I would.”* Patricia said she managed the money because *“he’s bad at it... I know he’d make a mess.”* Mary had a tendency to put incoming cheques and bills into a drawer and then she would forget about them which Boris found frustrating.

EMOTIONS

In this study most couples reported specific emotional experiences related to difficulties with communicating and the way arguments ensued. The emotion most commonly felt and noted right throughout the interviews was frustration.

For many couples, processing, planning, sequencing, distractibility, and difficulties with working memory (including retrieving words and information), remembering dates, losing things, and overloaded minds, all led to emotional reactions in both partners. As well, accessing and ordering words led to frustration, with several participants also describing feelings like confusion, upset and hurt occurring due to the breakdown in communication flow because of these difficulties. For example, Dean said, *“It’s just a flood of frustration because I can’t find the words.”* As indicated above, non-dyslexic partners suggesting words or feelings for their dyslexic partner led to a lot of upset for the dyslexic individual. Oliver said it was more helpful to be asked *“Where do you feel that in your body?”* He said, *“...to root around and try and dig it out is the better process but it does take longer.”* Often each partner’s *different way of thinking* led to emotional reactions.

Historical negative self-esteem issues from living with dyslexia in childhood were seen as affecting the emotions of all dyslexic partners and were most often triggered by the cognitive difficulties discussed above. (See “Self-Esteem” section). Negative childhood experiences of most non-dyslexic partners were also named as triggering emotional reactions which affected their relationships. Boris, for example, said he had a dysfunctional upbringing which he linked to finding conflict challenging, and Rosie said *“we both take things personally and*

are sensitive about our shortcomings. We both very quickly get defensive in arguments.” As well it was reported by five of the six couples that differences between being detailed and non-detailed, as indicated above, led to emotional reactions. This mainly affected the dyslexic partners who reacted when experiencing too much incoming information to process, as well as memory difficulties in arguments.

Analysis of the data showed that couples often described the dyslexic partner as experiencing difficulties with naming and communicating their feelings. Also the emotions of the dyslexic partners were described across the data as being very high in intensity and quite volatile, and all dyslexic participants said they coped with these overwhelming feelings by numbing them and/or by withdrawing, with half of them experiencing a “shutting down” in their cognitive processing abilities when feeling intense emotions. The next sections outline how these emotions were experienced and how this affected the couples.

Naming and Communicating Feelings

All couples described the dyslexic partner as having difficulty naming and communicating their feelings. My observation while interviewing was that each dyslexic partner struggled when talking about their feelings and for some it was very hard to continue unless I moved away from discussing them for a while. The difficulty appears to be two-fold: knowing what the emotion is, and finding the word for the feeling, which then cycles into more emotional reactivity and, in turn, less cognisant ability to find a word or meaning, and so forth.

Regarding naming feelings, Oliver said:

I don't understand them... I've got some that I can feel but I don't know what they mean. I can't interpret them. It's been over 10 years trying to work out what those feelings are and I still struggle to interpret them.

Tina said, *“He had no idea what the emotion was and then even if he did he couldn't put it into words.”* Both discussed the difference after Oliver completed some personal workshops. Oliver reflected:

I've managed to get myself a bit more in touch with them [emotions] but it's still a slow process... you find it hard to communicate it and that puts a barrier in the relationship.

Upon considering that dyslexia might be affecting how Oliver expressed feelings, Tina said this evoked compassion in her and she realised she needed to exercise more patience.

Four participants said they struggled to name feelings and tended to feel them singly, e.g., “I’m hungry. I’m tired” (James); “Sad or angry or guilty” (Mary – prior to counselling training); “I’m hungry or I need to go to the toilet” (Dean). Dean also said, “I don’t have any feelings. I only have one... I’m either all happy, I’m all sad, I’m all hungry.” He also said, “I can’t talk about my feelings... I don’t like talking about those.”

Rosie said, “We’re struggling to get feelings felt,” to which James added, “I’m not really good with it particularly cos it comes to exposing yourself to vulnerability,” and when I asked about how that affected them Rosie shared, “Normally I feel like my feelings have not been understood by you... I feel disconnected.” When I asked how they shared feelings Rosie said:

I don’t feel like there’s very much of it happens. I don’t think he really knows how to. I don’t know if James really understands how he feels most of the time.

Bob shared a similar experience:

Understanding the emotional side is missing is a problem... I know I’ve had them there and I’ve wanted them out but I don’t know how to get them out... You want to tell her how you feel and you can’t.

Sarah agreed that Bob found it very hard to express feelings:

He finds it really hard. Really, really hard. He can never find the right words. What I want to hear, he feels, but can’t say. He tells me... “I just don’t have a heart. I don’t really have any feelings.”

She disclosed that she had considered leaving because this affected their intimacy and connection, and she didn't want to be in a relationship with someone who didn't express emotionally. As indicated earlier, this couple described Bob having a "wall" which he used to emotionally self-protect. Sarah said, *"I find it quite frustrating because I know it's all there... if I could just get that wall down."*

David described Lily as being *"a little bit muddled in her emotions"* and said, *"I think maybe she doesn't know how to work through them."* Lily acknowledged *"I do find some things difficult to share."*

Emotions Block Thinking

Several dyslexic partners alluded to not being able to process cognitively when they were feeling emotions. James explained if he was rational he was more succinct but if in emotion it was harder, as *"it disrupts the processing process."* Lily said, *"When feelings get into it and I get this overwhelmed... I can't communicate. I get quite overwhelmed and just want to run away... I lose all sense of reason."* Dean reported:

Can't talk if I'm crying, so what's the point? It's a waste of time! I wanna be able to talk! It's not a matter of wanting to cry or not wanting to cry. I can't express what I'm trying to say if I'm crying, I just can't talk.

When I asked Dean if he could cry first then talk later he said:

No cos then I'll lose my place so I suppress it so I can finish what I'm saying... I can't do both at the same time. I can't. I just can't. Cos I will get blocked and then that's it. Gone.

Dean said, *"You start flooding with emotion... then we're in big trouble because I now can't find the words"*. Patricia said she has learned when Dean is emotionally reacting that the best thing is, *"to leave it alone, to just hold back, be quiet, just remain loving to him and give him a bit of space"*.

Emotional Intensity

All couples reported that the dyslexic partner felt their emotions intensely with some suggesting this was more than people would usually, and some to the point of being volatile. For most couples intense emotional reactions affected their sense of connection. For example, Tina said, *“He can get furious. He can get completely mental.”*

Tina recalled an incident where Oliver was upset when the children didn't have helmets on while riding. Tina felt his emotional expression was too strong, saying:

...he threw a complete wobbly... it was something that wasn't life threatening and... I was wanting to take their side... and he just said, “oh, f... you” and off he went... it was just the situation got completely out of proportion. Yeah... he just lost it. He just couldn't handle it and it wasn't very nice [tears].

Rosie recalled a time when somebody said to James “Oh, you're stupid” and he got really upset and stormed off. She said people's impression of him was that he could be quite volatile emotionally, *“he could be moody, and sensitive, sometimes fly off the handle for what would seem like no reason.”* She saw this as James protecting his insecurities. When reflecting on how he coped when he was upset, James said *“I have a habit of walking away – spit the dummy, throw my toys out of the cot and then walk off but I find it's easier than getting fully upset.”* He said his emotions were *“intense”* and called them *“a nuisance.”* He described them as being like the emotions of someone who was bipolar: *“their highs are really high and their lows are really low whereas most people average out.”*

Dean described his flooded emotions as:

Like a room of different voices. I just can't do it. I can't be here. I need to get out of there before I get to a point where I explode or implode. Then I don't know what would happen... and I don't wanna find out.

He added later that his angry outbursts had to do with covering his inadequacy:

“The fear and shame was making me upset. The angry outbursts are because of frustration that leads to anger and not always what it appears to be. It’s born from trying to escape.

Looking behind the wall that covered his emotions, Bob declared:

I would rather take a cheese grater to my foot with a bag of salt and have physical pain than to go back to that emotional pain. I’m also scared to go back there because if I do pop that bubble it’s gonna be like a dam bursting and you don’t wanna be in the valley below. It’ll be tears, anger, it’ll be the whole lot and I’m not sure when it will stop.

Mary saw herself as *“too emotionally driven”* however, Boris said he didn’t see Mary as emotional saying, *“She’s not one that cries easy or anything like that.”* She said in an argument *“I’ll be really angry and then cry”* and that this felt physically like *“something burning up through me”* which she then let out verbally. Looking back she said, *“I’ve been more explosive in the past”* which affected their relationship as Boris said he didn’t like this and walked on eggshells around her. Mary reflected, *“I was emotionally driven as in reacting to things but I wasn’t naming them.”* In contrast she noted that she now “catches” her emotions, which has helped with their connection.

Are Emotions as Intense if they are “Positive”?

Towards the end of analysing this part of the data I became curious about whether the dyslexic participants felt their “positive” emotions as intensely (i.e., happiness, joy, excitement) as they did their “negative” emotions (i.e., anger, shame, fear). I started to wonder if the cause of emotional intensity was only to do with self-esteem triggers from childhood or whether there was something more going on. I arranged phone calls to each dyslexic participant and asked them the following question:

Is it as difficult for you to process (i.e., think or speak) when you are feeling a “positive” emotion (such as joy) as it is a “negative” emotion (such as anger), and do you feel it as intensely as you do a “negative” emotion?

Many of the participants said they feel “positive” emotions as intensely as “negative emotions”. Lily described the percentage of feeling excited or thrilled as being at the same level as angry. Dean said he loses words if he is extremely angry and also if he is extremely happy... he *“can’t get the words out.”* Bob described them as the same... *“You clog up because you don’t want to let it out.”* He described watching a moving performance on Britain’s Got Talent which he said really touched him (positively) and said:

Words get caught up in that air block. I know what I want to say but it’s like getting a ball build up in the back of your throat. I will bawl out loud.

James said that he loses words when feeling emotions that are both “negative” and “positive” but more when they are “negative.” The “positive” are *“not as strong or as bad.”* Mary’s experience was similar. She said she felt a burning feeling going through her body when feeling angry but with a “positive” emotion she did not feel the burning as much, although she said there was *“still energy”* but *“not as consumed.”*

Oliver said it was easier to find words for “negative” emotions but “positive” did not always *“come quicker”*. He attributed this to having worked on his “negative” emotions and added *“getting the mouth up to speed is the same ‘negative’ as ‘positive’.”*

Coping with Emotions

Without exception, all dyslexic partners coped when their emotions were too overwhelming or intense by leaving or walking away. Most got in their cars and drove away and said they needed around half an hour to calm down.

Rosie said:

He can get angry and storm away. He often does the walking away mid-argument... we’ve meant to have come to an agreement whereby he doesn’t just walk away and leave me in the lurch... the aim is to try and say, “I can’t talk about this now. Give me half an hour to think about it” but it doesn’t always happen and he’s actually started to storm off and leave and disappear and I’ve not known where he’s gone.”

Rosie said she follows James and nags because she can't let things go until they are resolved. They both said they need to take a break but they agree to come back to discuss things later, with James pointing out, *"Let's revisit it in half an hour... so I can get my head together as opposed to just hammering it out and hammering it out and hammering it out."*

Driving gave Lily time to calm down and gave her something to do. David understood that leaving gave Lily space to calm herself down, clear her head and think what to do. Dean also said that when he was in a *"bad space"* he needed to *"escape and run away."* This affected Patricia who *"needs me to just stand there and talk to her and of course we can't do that cos I need to walk away."* He said they both needed to cool off and that they have had some *"severe battles"* getting to that point. If he was allowed to leave he would go for a drive which he said helps as:

You've gotta concentrate on your feet... hands... road. Then everything else is busy so then I can just think and then clarity comes. I can tie up 20% of that noise with having to use my right hand on the steering wheel.

Many dyslexic partners said they suppressed their emotions in order to cope. Oliver explained:

I can box feelings... I can box all feelings... Tina's feelings as well. For a long time I didn't have to cope with them because they weren't there... they were quite happily boxed away. I'm distant from them.

Tina said Oliver used to *"do this man cave thing where he'd just completely stone wall... I knew something wasn't quite right and I'd ask him, he just wouldn't say anything and the more I tried to probe... there was nothing coming back."* She commented that doing emotional work has helped Oliver which has improved the relationship.

James declared that his feelings must be *"just ignored. They must be punished,"* suggesting that he saw them in a very negative light and that they were unacceptable, and Dean commented:

If I was feeling sad and about to cry... I'd choke it down and strangle it. I squash it... look away, think about something else very quickly and stop. Stop works.

Bob had an exceptionally hard time emotionally. He said, “*I'd stuffed that down really, really low. I'd buried all my feelings. We're working on pulling them out.*” In describing the “wall” he said:

You isolate yourself because then you can't get hurt anymore, you can't get disknowledged [sic]. It's your wall, you just bury your feelings, you just can't get hurt anymore. I buried my emotions and feelings very quickly... I felt I had a hole in my chest, there was just nothing there—no heart, no feeling, no emotions.

Dean, Oliver and James said that they liked to joke when they were feeling emotions. For example, Oliver found deeper conversations hard and so kept them light saying “*I tend to dip into the jokey*” and Dean saw laughing as a way of coping.

To cope with her feelings prior to undertaking her counselling course, Mary said:

I would've rejected them. I guess I've always kept myself busy... sometimes I find if I'm sad, or I'm not coping I find that whole determination would come through... it's like, you have to get on with it.

Self-Esteem

All dyslexic participants saw their negative self-esteem as a barrier in their lives and five said that it affected their relationships. One participant did not see her self-esteem as impacting on the relationship but stated that her self-esteem was adversely affected by her studies via stress which dyslexia made more challenging. Mary smoked in order to reduce stress, which in turn negatively affected Boris who didn't like her smoking, and it was a topic this couple did not like to talk about with each other. Mary's self-esteem issues from external factors were therefore affecting this relationship, and they were also indirectly affecting marital communication, even though this couple reported that dyslexia did not affect their communication.

A sense of inadequacy, loss of self-confidence, negative self-beliefs, and insecurities, when triggered, resulted in emotional reactions (either by reactivity or suppression) that affected all couples. The main feelings mentioned by participants concerning self-esteem were fear and shame (i.e., I'm not enough) which disrupted communication and connection. Many mentioned they felt "dumb" or "stupid" and other negative descriptions of self were evident in the interviews, for example Dean called himself a "looney."

All six dyslexic participants attributed their struggles with self-esteem to childhood, particularly school experiences. Bob said school was *"somewhere to eat my lunch"* and described his self-esteem as *"... it's like a hit inside, the negative below side is what brings you down, which makes it hard through school which is all negative."* Relating to school and family, Dean said his self-esteem issues were a result of the dyslexia:

You're always scared you're not good enough. Fear is a constant feeling at work, at home, relationships, it's always there... Fear of shame, yeah, that's always there.

Patricia commented:

Any time he asks how to spell something he's being a bit vulnerable. He's very sensitive to being told he's dumb or not good enough or doesn't measure up... It's very easy to insult him because his self-esteem is so fragile.

In remembering school, Lily said, *"to me unless you were at the top, you're weren't good enough"* and David said, *"...her self-esteem was shot when she was younger."*

Rosie and James agreed that self-esteem affected their relationship *"quite a bit."* James said he got defensive because *"I tend to take anything as a criticism."* He linked the risk of feeling rejection, shame and humiliation to school and teachers, and commented that opening himself up to vulnerability was painful and not worth the risk. Rosie said, *"He obviously does feel vulnerable about what he feels are his inadequacies and to being teased or perceived as stupid, and he'll do anything to protect himself from that."*

Most non-dyslexic partners also mentioned they were triggered by childhood issues. Rosie, for example, observed that self-esteem issues *"can cause more arguments because we both*

take things personally", and Patricia and Dean commented that they both become insulted when their "inner children" were triggered in their relationships.

What is clear from the data, however, is the extent to which dyslexia in childhood affects self-esteem negatively leaving all dyslexic participants strongly vulnerable to triggers and emotional reactions which affected their relationships. For instance Lily commented on a barrier in her connection with David: *"The barrier was more me. I was very unsure of myself. I didn't think I was worth very much."* Tina said of Oliver, dyslexia *"robs him of his self-confidence... he gets quite insecure and that translates into a mood"*. She also indicated it didn't matter how much she affirmed him, *"it doesn't seem to be enough."*

CONNECTION

It was interesting to note that several dyslexic participants initially did not understand what I meant by "connection." They asked me to clarify this in more depth, after which they were able to reflect on their experience of connection, though some found it difficult to put this into words.

Every couple except one said they had a good connection regardless of experiencing difficulties and differences with thinking/processing, communication, functioning, self-esteem and emotional reactions that affected their relationships. Boris and Mary said they had felt *"really connected"* from the start of their relationship. Patricia described their connection as *"really high"* and Oliver and Tina also said *"we have a strong connection"*.

Most couples described their connection in deeper, sometimes spiritual terms. For example, Mary alluded to experiencing a *"deeper connection... something that is a spiritual level"* and called Boris her *"soul-mate."* She also called it *"a bond that's just there... not something that we had to make"* and stressed that little arguments could not break that *"underlying bond."* Sarah echoed Boris in calling Bob her *"soul-mate"* while Bob said, *"I've found my person."* Oliver described their relationship as having a solid *"core"* that had always been there. For these couples the challenges outlined in the findings above were not enough to break these deep bonds.

On the other hand Rosie commented, “...*the intimacy in our relationship is not very deep*” and, “*the lack of connection frustrates me,*” though she felt they were committed, persevering, and were “*mending*” the relationship.

All couples said that their sense of connection was negatively impacted by the way the dyslexic partners handled their emotions, though several reported having worked on their emotionality and reported this had improved connection. All couples mentioned external stressors as having negative effects, such as work, pressures with children, finances, etc. Four couples said communication difficulties had a negative effect on connection, and several noted that functioning difficulties had an impact. One couple commented on sexual issues affecting connection, and one couple reported that the dyslexic partner being on the iPad disrupted connection.

In addition, self-esteem issues contributed greatly to the disruption of connection, particularly fears of being vulnerable with their partner. For example when I asked what got in the way of James connecting with Rosie he said, “*my own unwillingness... emotional insecurities of letting myself be vulnerable.*” “*The wall*” (or emotional vulnerability) was the only thing disrupting connection between Bob and Sarah, and though Dean and Patricia said dyslexia did not affect their connection, they did talk about historical shame and vulnerability impacting on them. Since on Dean’s part this vulnerability came from living with dyslexia in his childhood, it could be said that dyslexia did in fact affect their connection.

Quite poignantly, Patricia suggested that it could be very easy to be disconnected from a partner who is dyslexic:

If you’re with someone who never thinks of you and forgets your birthday and can sit in a mess and it doesn’t bother them and they don’t even think to clean it up and doesn’t do the little things like turn on your electric blanket... you would feel quite lonely. But I understand him and I know he tries really hard. If there were a more naïve couple and a less good guy it would be a disaster.”

Sex

Several couples mentioned that sex was a form of connection for the male dyslexic partners who were described as being more “tactile” (perceiving through touch). Oliver said sex was *“a form of communication that doesn’t need words and doesn’t need writing down,”* and *“It’s trying to deal with the inability to communicate the other part.”* Tina said, *“For Oliver touch and sex is a release of energy... he’s using that to get relaxed... finding solace.”* This couple shared they had struggled with their differing sexual desires which they resolved through having an open relationship. James shared that sex is *“a more deeper connection... because you can’t or won’t or don’t have the conversational side of things”* and that dyslexia is a contributor to that.

IMPACT ON NON-DYSLEXIC PARTNER

There were some consistent statements made in the data that showed that most non-dyslexic partners were impacted in similar ways. All non-dyslexic partners except one said they felt varying degrees of frustration and, again, this was the most common emotion that was felt. It was reported that their frustration came from their partner’s communication difficulties, messiness, disorganised thinking, emotional reactivity, and fear of vulnerability.

Most non-dyslexic partners were what could be termed “high functioning.” By this I mean they were usually very organised and responsible with a high level of ability and capacity to manage their lives. This did not depend on gender. Nearly all the non-dyslexic partners carried more responsibility in the relationship in various areas, such as ordering, organising, planning, deciphering their partner’s communication, tidying, having to remind their partner about arrangements they had made, where they were going, and when, and reminding their partner about organisational details at home and what needed doing. Sarah shared, *“I have to remind him about things quite a lot. It’s like I’ve told you already and you’re not doing it, why haven’t you done it?”* The non-dyslexic partners often helped their partner with reading, spelling, work administration, study notes, etc. Patricia reported, *“I find that I pick up more of the load, decision-making, money definitely. I do carry that... that’s just my role in the relationship.”* When I asked Tina what it was like for her to live with dyslexia she said:

It has caused a lot of extra work but I can also see that there is a lot of gifts in there and a lot of positive things... I'm trying to see the good side of dyslexia but sometimes it's just a bit tiring... and costly as well.

Understanding and acceptance were important qualities in helping these partnerships to work. David said, *"You have to be quite tolerant"* while Sarah empathised, *"His intentions are great... just doesn't necessarily pan out. I have to try and understand that. He's not doing this on purpose to annoy me."*

The study highlighted a high level of need for support from the non-dyslexic partner. For example, both Sarah and Patricia mentioned feeling like they were looking after a child, for example:

He uses that... a lot... "You need to look after me". He doesn't mean I wanna be the baby and you do everything for me. He just means I need your help. I need your support. There are things I'm not good at I need you to do."

WHAT HELPS?

The following points have been compiled from the participants' descriptions of what they said helped their relationships to work in positive terms. I have ordered these points in order of significance, beginning with what was said by every couple down to what was said by one to two couples.

All six couples reported that counselling helps; for some this was couples counselling and for others it was individual counselling. Many participants stressed it was important that the counsellor had a good understanding of the effects of dyslexia. All couples stated that understanding dyslexia and what it affects helps, as does acceptance i.e., this is the way it is, and accepting what each partner can and cannot do. All couples also said that having good communication skills helps.

Five couples stated that diagnosis, working to strengths and “compensating for each other,” clarifying communication (by checking out what the partner meant by what they said), and support from the non-dyslexic partner help their relationships.

Four couples described team work, i.e., working co-operatively and being prepared to work on the relationship, as helping and they also said that doing things together helped them feel more connected.

Three couples said that what helps were their commitment to each other, spending more time together, talking more, and having an underlying bond that provided a sense of connection beyond any difficulties they encountered. They also noted determination, trust, individual partners taking ownership of their own issues, relational strategies (such as using techniques for listening and communicating), and viewing the relationship as a more important priority than an organised home, were all helpful.

Finally, self-awareness, having common ideals in life, being on the same page, extra money to do things, perseverance, less work stress, the non-dyslexic partner *not* taking all the responsibility, socialising with other dyslexic people, and the non-dyslexic partner not assuming the dyslexic partner understood what they meant, were named as helpful for a few of the couples.

Summary of Findings

In summary, the data revealed that dyslexia affects intimate relationships in the following ways:

Communication is disrupted due to problems with accessing and ordering words which affects outgoing communication, and taking in, processing, and understanding incoming information. Memory problems and a slower processing speed were implicated in struggles with communication. These difficulties affect listening, the flow of communication between partners, taking in and following details, communicating “trains of thought,” and resolution of arguments, and lead to a disconnection between partners.

Dyslexia affects functioning in the areas of organisation and ordering (and therefore tidiness), planning, time management, taking in and following details (and therefore working on tasks together) and handling finances. Struggles in functioning led to a disconnection between partners. Again, working memory and a slower processing speed were implicated in functioning difficulties.

Dyslexia causes problems with being able to name and communicate feelings. Apart from leading to overload and feeling overwhelmed, the struggle to find and order words, to process information, and issues with organisation and planning all trigger self-esteem issues for dyslexics (from childhood) and combine with emotional reactivity that in turn blocks processing. It appears that people who are dyslexic feel emotions intensely, whether they be “negative” or “positive” and these are difficult to regulate. To cope with emotions partners either *express* by becoming explosive, or, more commonly, *suppress* by shutting emotions down, and exiting the situation. Not being able to share feelings, and these forms of coping, led to a disconnection between partners.

CHAPTER FIVE

The Use of Metaphor

The use of metaphor can be a rich way to symbolise life experiences. The following metaphors were used by participants to describe their experiences of living with dyslexia as couples. I have included pictures as symbols for the metaphors that were used throughout the interview process. Some metaphors were difficult to depict and so have been articulated in hand drawn sketches by a dyslexic artist (see acknowledgements).

COMMUNICATION



"We go around in circles when communicating. **Like a merry-go-round**".

Being forced to have to talk is like being... **"A trained seal"**.

"What I tell you today, come sunset, doesn't mean anything tomorrow. It's a wiped clean slate".



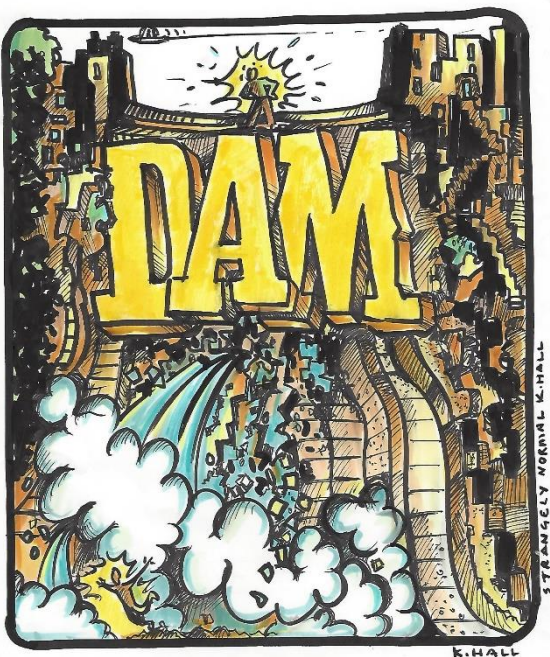


The words won't come...
"The gear wouldn't lock in".



It's like a bouncy ball. "We've bounced apart, when we come back together again if I don't come at it at exactly the right angle then we bounce and we go flying".

EMOTIONS



When there is a flood of emotion...
"...like a dam bursting. I don't want to be in the valley below".



Feelings... **"I'd choke it down and strangle it".**



Feelings... ***“Like a flood of emotion”.***



Buried emotions:
“I felt I had a hole in my chest – there was just nothing there – no heart, no feeling, no emotions”.



Feeling the pain of childhood history... ***“I’d rather take a cheese grater to my foot with a bag of salt and have physical pain than go back to that emotional pain”.***



Emotions: ***“There’s a moat, a drawbridge, and boats. You’ve gotta make your own oars, there are piranhas in there”.***



Self-protecting emotionally
"He's like a fortress. You need a bus ticket to get across the top. It's a three hour drive".

CONNECTION



The core that holds their relationship together regardless of the difficulties:

"The flower petals on the outside are the things we're working on but the core has always been there and solid".



"We're pulling on the same string in the same direction".



"Doing relationship is like riding a bicycle. You've never seen one before, someone sits you on the seat, shoves you down a hill. When I fall over she picked me up and pushed me again, "Why aren't you getting it?"



"Chewing things out".

FUNCTIONING DIFFICULTIES



"He has a 'floor-drobe' on his side of the bed".



It's like "Ground Hog Day"



***Too many things to manage:
"The wheels fall off".***



***If there is too much to do...
"It's like talking to a rock".***

Coping with too many things to do: ***"It's like floating through the world"***.



Too much happening in the brain:
"I need to go off-button".

SELF-ESTEEM

Low self-esteem related to childhood wounds:
"Being told you're an expert helps self-esteem for that split second but you can't go back to unpluck the chicken, it's done".



THINKING/PROCESSING



Experience of losing thoughts as they pass through the brain:

"Like a rope, how much I could remember is like one metre long. You are moving along and asked to "repeat this". If I stayed inside this bit of rope I could repeat it. In 30 seconds it was gone and I could literally feel that bit of rope falling away".



"You open the swiss army knife to the scissors and you need the screwdriver, so you put that away, you take it out, no, that's the knife, okay no, that's the magnifying glass and I can't find the screwdriver!!"

DETAILS



Too much incoming information to process:

“Like a spider has eight eyes round its head, a 360° view of its world. That’s a truck load of information to process”.

EXPLAINING TASKS



“Don’t flog a dead horse... show me how to do it, don’t tell me, show me”.

CHAPTER SIX

Discussion

From the participants' rich descriptions of their experiences three major findings have emerged: dyslexia affects communication, dyslexia affects functioning, and dyslexia affects emotions. From these, a fourth major theme has emerged: dyslexia affects connection. This has been reported as a distinct theme rather than incorporated within each of the other three because it both encompasses outcomes from the preceding major themes yet also illuminates additional aspects of the participants' relational experiences. Cyclic patterns became evident within the couples' descriptions of what transpired in their relationships in relation to the three main themes and a diagrammatic explanation will be provided representing each of these cycles. A diagram related to the effect of dyslexia on connection, the fourth theme, is also included and draws together the outcomes from the first three themes.

It is now well established that dyslexia persists into adulthood and pervades many areas of adult functioning and there are a myriad of challenges to which dyslexic adults are required to adapt (Buchanan & Wolf, 1986; Gerber, 2012; McNulty, 2003; Polloway et al., 1992). Gerber et al. (1990) found that the problems experienced in childhood can be the same experienced in adulthood, but that they actually worsened. Carawan et al. (2015) discovered that dyslexia is also a risk factor in late adulthood.

Overall the current study adds evidence for the persistence of dyslexia into the adult years. Gerber (2012) stressed that most studies of adults with learning disabilities are skewed towards early adulthood and so investigations are needed that address the variety of experiences across the many phases and contexts of adulthood. The current study addresses an aspect of this gap as participants' ages ranged from 38 to 49 years and the focus was on adult experiences within the context of intimate relationships. The findings indicate that dyslexia can have a major impact on intimate relationships in multiple ways.

DYSLEXIA AFFECTS COMMUNICATION

Phonological Processing

A strong consensus has developed among researchers that a phonological processing deficit is the central difficulty in dyslexia (Pennington, van Orden, Smith, Green & Haith, 1990; Shaywitz, 1998, Shaywitz, 2003; Shaywitz et al., 2004; Torgesen, Wagner & Rashotte, 1994). To begin understanding what is happening for the couples with regard to communication I refer to Shaywitz (2003).

Shaywitz (2003) noted that dyslexia is “a localized weakness within a specific component of the language system: the phonologic module” (p. 40), or in other words within the “language factory” within the brain. At the foundational level of language production lies the phoneme (e.g., “c” as in “c-a-t”) which is the most fundamental element of the language system and the building block of written and spoken words. Someone who is speaking must retrieve and then order the phonemes in order to make a word, and then order the words to make a sentence and so forth. According to Shaywitz (2003), dyslexics have a hard time selecting the correct phonemes and may instead select ones that are similar sounding (for example “t-o-m-a-t-o” instead of “p-o-t-a-t-o” in the case of Oliver). She stressed that the core difficulty in dyslexia is phonologic, or “getting to the sound structure of the spoken word” (p. 54).

Shaywitz (2003) also pointed out that another complication is that a listener of spoken communication has to receive phonemes (ordered within words, and words ordered within sentences) at a sufficiently fast speed to then hold them in short-term memory and then integrate them to hear the intended phrases. In short, in dyslexia, phonological awareness is impaired. This has no bearing however on high-order intellectual abilities and is not an indicator of lack of intelligence.

The neurological pathways responsible for language are Broca’s area, which is part of the inferior frontal gyrus (word articulation/word analysis), the parieto-temporal region (word analysis), and the occipito-temporal region (word form/whole words) (See Figure 1). Shaywitz (2003) found that these pathways are impaired in dyslexic readers who instead compensate by using alternative pathways particularly in the right hemisphere of the brain. In support of that study Waldie et al. (2013) also found reduced activation in the left

hemisphere and over-activation in the right hemisphere of dyslexic readers, including those of adults, which they suggested may be to do with recruiting the right hemisphere to assist with visual coding.

Shaywitz (2003) also pointed out that other consequences of phonologic dysfunction apart from word retrieval and articulation are difficulties with naming objects, memorising and/or doing things by rote, and oral presentation. However she pointed out that if dyslexic individuals are given enough time, and without pressure, they are capable of excellent oral expression. Functional magnetic resonance imaging (fMRI) studies have shown that the prefrontal cortex is implicated in several processes of working memory, such as executive control and when verbal material has to be processed in working memory (Vasic et al., 2008).

Consistent with the phonological processing deficit theory (Habib, 2000), most of the dyslexic participants in this study at various times had difficulty accessing words and ordering words when communicating with their partners. They also had difficulty taking in and understanding incoming information from partners. Too much incoming information to process (for example, having to listen to too many people talking together or too much information being shared by partners) quickly led them to feeling overloaded cognitively and overwhelmed emotionally.

Classic dyslexia is usually diagnosed when an individual presents with a high ability in verbal comprehension and visual perceptual reasoning and a low proficiency in working memory and processing speed (for an example of a WAIS-IV graph see Appendix A). According to the WAIS-IV (Wechsler, 2008), working memory is the ability to maintain information within conscious awareness, manipulate that information cognitively and produce something from it. It is a skill needed to be able to hold phonological processes in memory and re-sequence them. Processing speed is a skill, the effectiveness of which is related to how long it takes an individual to produce output (such as hand writing or reading).

Most of the dyslexic participants (male and female) presented with low working memory and processing speed skills, and phonologic processing difficulties regarding both incoming and outgoing communication. This directly affected their ability at times to listen to their partner and take in what the partner was saying, and to take in and follow details, causing them to lose their train-of-thought, particularly if their partner interrupted them, and to be unsure of what to say or how to begin communication at times. Partners often failed to realise that the

dyslexic was in fact working hard at listening but could not hold in working memory everything being shared. Instead, they interpreted the behaviour as reflecting the partner's lack of interest in what they were saying.

Sometimes dyslexic individuals thought they had communicated something orally but in fact they had not. They had "said" it internally in their mind and believed they had said it out loud, when in fact it was only processed in their head. This was frustrating for partners especially when the dyslexic argued that he or she *had* spoken to them. The speed of processing of both incoming and outgoing communication was slower for the dyslexics, which was often frustrating for their partners who lost their own train-of-thought, or had to wait for the dyslexic to respond. They would sometimes interrupt or suggest words which their dyslexic partners found unhelpful (and which triggered self-esteem issues).

Some dyslexic participants used more words than needed to express themselves. The tendency to do this came from trying to access the word(s) they wanted to use and not being able to find them, and as a result, using more words in a scramble to articulate what they were trying to say. This was at times frustrating for the non-dyslexic who had to work harder to follow what their partner was saying.

All of this led to breaks in the flow of communication between partners. This supports findings by Vogel and Forness (1992) that social relationships may be affected by language difficulties (saying the wrong thing) and memory difficulties (forgetting facts or interrupting), and also findings by Sang (1988) who suggested that misinterpretations of what is being said, poor word retrieval, forgetting names, and dyslexics saying one thing when they meant another, led to communication problems. It also affected arguments which tended to become circular and go nowhere. Lerner (2004) wrote that many couples can be caught up in circular dances when navigating anger, and it is therefore not just couples living with dyslexia who become stuck in this pattern. However it seems likely that it can be harder for dyslexic individuals to process what is happening in conversations, and to express themselves, especially their emotions (see emotion section), leaving them more vulnerable to becoming stuck in unhelpful power dynamics.

Dyslexic partners were often unable to discuss and argue effectively due to not being able to remember details about what had happened, or find the words to say, or do this fast enough

to keep up with their non-dyslexic partner, and so conflicts could remain unresolved. This supports findings by Peck and Stackhouse (1973) who found that “reading-problem” family members’ tendency not to communicate led to unresolved arguments and difficulties in decision-making.

There was one exception concerning communication amongst the participants: Mary reported that she did not have any trouble with communicating. The effects of dyslexia can often be masked by an individual’s higher abilities. For example: some dyslexic children read well, however, if it was suggested to their teacher that their good reader was dyslexic, they would strongly discount the idea. Nevertheless, with a highly visual-spatial dyslexic their spelling may be bad but their reading good. Mary was assessed as being “high verbal” which means she has high verbal processing abilities which mask her dyslexia. Though communication is not a difficulty, other factors may be (see functioning).

It seems important that couples who live with dyslexia realise that dyslexia can have a major impact on communication processes. The results of this study suggest that slowing down in relational interchanges is vital, because the non-dyslexic needs to give more time for the dyslexic partner to find the words they need to say, and in the exchange to take in the information and details being shared with them. It may be helpful to use fewer words or limit the amount being said so that the dyslexic partner has time to take in and process the dialogue. It is clear that words will often get mixed up in conversation and the dyslexic may say one thing when they mean another, but this is not done to be intentionally disruptive. It is also important for the dyslexic partner to realise that they may at times *think* they have communicated what was on their mind, but in fact they have not externalised it.

In the current study it was evident that high levels of frustration for both parties were common when these disruptions happened and the non-dyslexic partner had to do more work to figure out what their partner meant. Many couples reported they became defensive with their partners and some non-dyslexics became quite critical of their partner’s difficulties. Gottman (1994) wrote that defensiveness, criticism, contempt, and stonewalling are destructive to communication and correspond negatively with relationship quality. Research on regulated couples (using positive behaviours) vs nonregulated couples (using complaints, criticism, defensiveness, put downs) found that nonregulated couples engaged in more conflict, were more angry, were less engaged listeners, and less connected which led to relational

breakdown (Gottman & Levenson, 1992). This sort of destructive communication did link to negative self-esteem triggers for both partners (with a seemingly more intense negative emotional effect for the dyslexic partner which I discuss in the third theme) and resulted in disrupted relational connection.

Communication seems difficult enough regarding phonological processes for these couples let alone having to navigate these destructive forms of relating as well. Holman (2001) found that constructive communication was a strong predictor of relationship satisfaction. As well, Ledermann et al. (2010) discussed the connection between external stress (originating outside of the relationship) and relationship stress (arising within the relationship) and found that these were mediated by positive communication. These findings undergird the importance of understanding dyslexia and its impact on relationships, and of discovering positive ways for such couples to better communicate.

Hendrix (2008) produced a very popular communication tool, which is frequently used in the counselling field, for healing ruptured connection in couples—"the Imago Dialogue" (p. 143). He viewed this tool as an effective way to deepen communication and has found that it transforms relationships. In brief, the Imago Dialogue is a reparation process that involves much more in-depth relational healing than simply conversing, however it is built on a structured way of talking which involves: one partner focusing attention on the actual words the other partner is saying; listening; restating what their partner has said; and repeating this dynamic until they clearly understand, and then switching to have their turn of speaking and so forth. As a couples' therapist I have found the Imago Dialogue to be an invaluable and successful tool. However it poses a problem within dyslexic relationships in that it requires phonologic, auditory, and sequencing abilities, and a good enough working memory and processing speed to be able to restate what the partner has said.

I also found that in this study the couples at times argued about who said what, and often the dyslexic perceived their partner as hearing the wrong thing when, in fact, they had said the "wrong" word, for example wanting a "potato" when they said "tomato". Dialogue is not straight forward for these couples and clarification is needed if they are to lessen negative interactions as partners become caught up in debates of who was right or wrong. I suggest that non-dyslexic partners not get drawn into such arguments but rather just give their partner a potato! Clarification of communication is therefore vital in dyslexic partnerships.

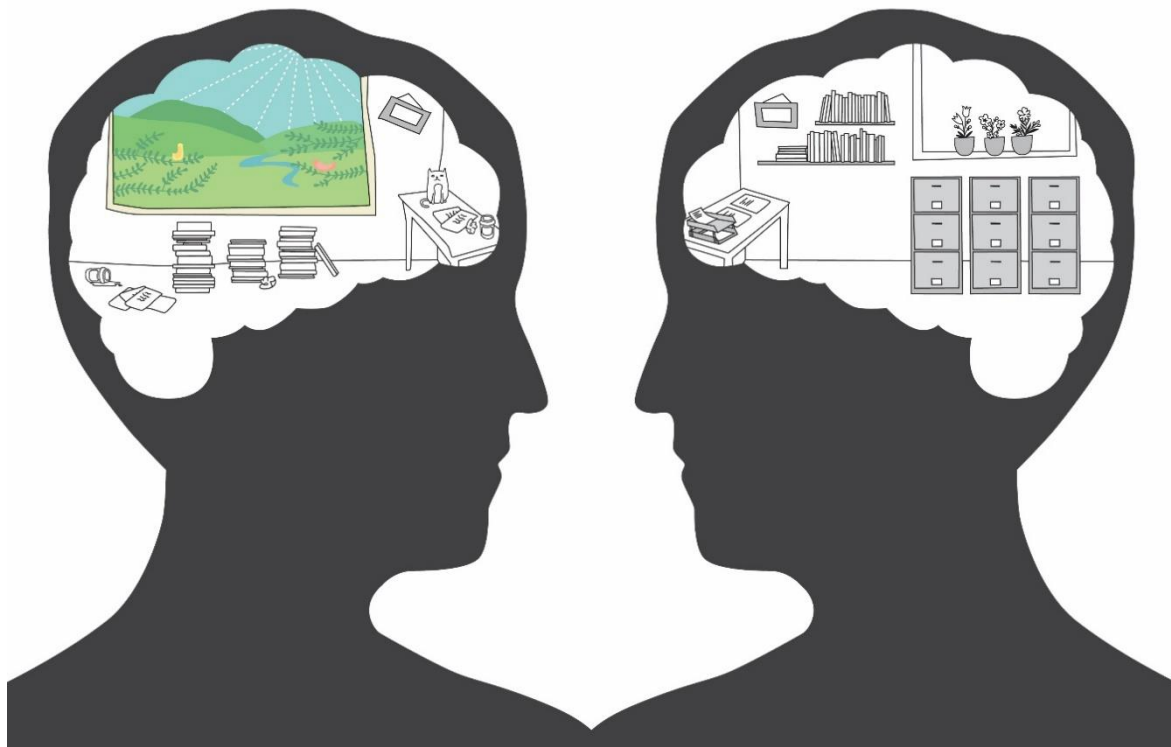
Dyslexia also affects listening and usually the dyslexic is working hard on this even though it may appear they are not. Realising the dyslexic “can’t” listen well is better than assuming they “don’t” listen. These findings point to the need for a communication tool in dyslexic relationships, one that uses fewer words, slows communication down, and utilises the dyslexic’s strong ability to think in pictures, as well as being practical for both non-dyslexic and dyslexic brains.

Findings also suggest that texting is unhelpful for dyslexics due to the same phonological difficulties, and particularly in regard to output which involves word retrieval and spelling. Instead of communicating over text, couples could preferably telephone each other and non-dyslexic partners could facilitate this.

Different Ways of Thinking

Research shows that dyslexics tend to use different parts of their brains to process phonologic information (Waldie et al., 2013) and that most think in pictures using the right hemisphere (King, 2010). The wiring connections within the brain are therefore very different from those of non-dyslexic individuals. Dyslexics think in the bigger picture and tend not to be linear processors whereas non-dyslexics tend to think sequentially and like things ordered (see Figure 2). Many couples in this study commented on how the dyslexic partner thought completely differently from the non-dyslexic. The results revealed that such vastly divergent ways of connecting with the world had a major impact on relationships, particularly in the area of communication but also practical functioning. It wasn’t so much the quantity of communication happening between partners but *how* they communicated. This has clear implications for the awareness of professionals and practitioners.

Figure 2: Connecting with the world differently



Body Language

As studies into the socio-emotional experiences of dyslexia grows, researchers are finding that dyslexia may affect the ability to read nonverbal cues (Kavale & Forness, 1996; Sang, 1988). Several dyslexic partners in the current study said they had difficulty reading body language and one couple mentioned disruption in reading tone of voice. Berresford (2012) perceives that for auditory dyslexics the working memory does not cope with hearing, for visual dyslexics the working memory does not cope with seeing, and that most classic dyslexics are both auditory and visually dyslexic. For individuals who struggle with the visual component of dyslexia, body language and facial expressions may be difficult to comprehend, and for those with auditory dyslexia, vocal characteristics may be challenging. Greenberg and Johnson (1988) stressed that emotional communication between partners is a vital aspect of couple communication. This involves the complex reciprocal transmission of nonverbal cues, such as facial, gestural, and vocal signals between partners which they said governs the majority of what happens within couple interaction. The nonverbal signalling of

one partner and the picking up of that signal by the other partner is, according to Greenberg and Johnson (1988), an important part of relating that is trusted more than content.

Dyslexic partners are therefore at a particular disadvantage regarding this form of communicating as well. Not only can it be challenging to communicate with words but reading their partner non-verbally may be difficult as well. In their study on dual sensory loss (blindness and deafness) Brennan and Bally (2007) found that combined visual and auditory loss significantly affected communication between partners causing major challenges in daily life. Since couple intimacy is linked to overall relationship fulfilment (Yoo et al., 2014) and since the quality of couple communication is one of the strongest predictors of this satisfaction (Holman, 2001) it stands to reason that couples living with dyslexia may be highly vulnerable to relationship breakdown and in need of specific support and a specialised tool to enhance couple interaction.

Emotional Reactivity

Two differing causes of emotional reactivity occurred with regard to communication processes for most of the participants, though these were at times closely linked. The first was when the dyslexic partner became overloaded with too much incoming information to process and then became overwhelmed (which may or may not have led on to the second experience). The second was to do with self-esteem triggers that were linked to childhood (which often related to negative school experiences) and combined with an intensive emotional reaction and then common coping strategies. McNulty (2003) found that self-esteem problems could emerge in early childhood when very young children felt “something’s wrong with me” (p. 371) and that by school age, self-esteem issues were more entrenched due to struggles and failures at school. Emotional insecurity persisted into adulthood and low self-esteem could extend to affect interpersonal relationships and other areas of adult life (McNulty, 2003). Participants in my study reported similar experiences.

In the current study the same pattern of emotional reaction and coping happened with regard to the next theme “dyslexia affects functioning” as well, and so I have grouped the findings on emotional processes into a theme of its own, “dyslexia affects emotions”, where I discuss these findings.

Summary

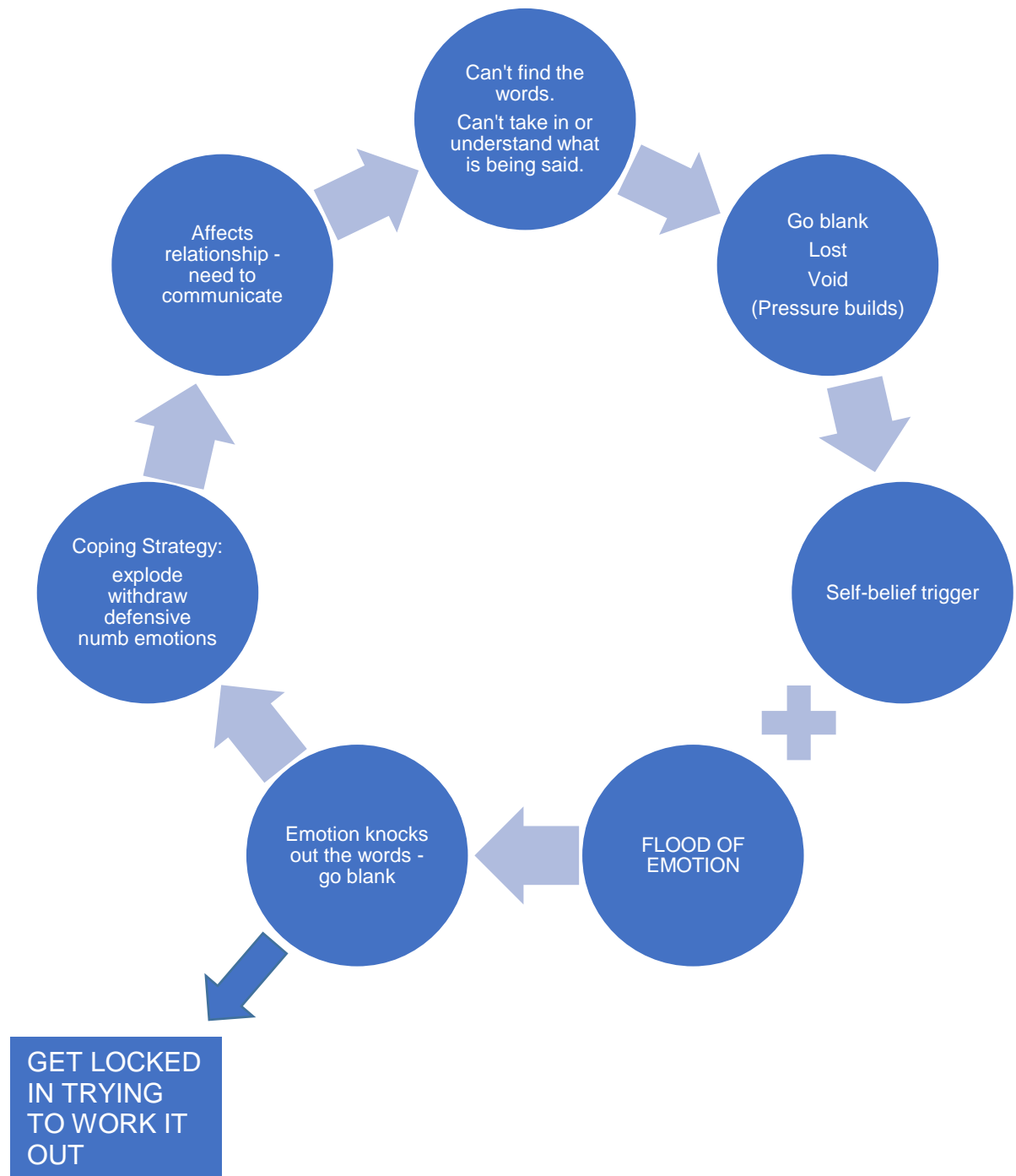
A clear cyclic pattern became evident from the data on communication (See Figure 3). Although this pattern was consistent across many of the descriptions of participant experiences this does not mean it happens all the time, with the same intensity or with all couples living with dyslexia. Dyslexia is complex and has a heterogeneous collection of characteristics that vary in severity between individuals.

In this communication-reaction cycle the dyslexic partner struggles to find the words to articulate what they want to say, or they cannot take in or understand what is being said by another person. They have a tendency to go blank cognitively with a sense of being lost or in a void. The pressure builds as the struggle continues. At this point they are triggered by a negative self-belief which is connected to a “story” they are telling themselves (Brown, 2015) that most often stems from childhood experiences, such as “I’m a failure”. This happens concomitantly with a “flood of emotion” such as fear, shame, or frustration. When feeling this intensely, the dyslexic person cannot process cognitively and they cannot communicate. Sometimes the person may become “locked in” (or intensely focused and preoccupied) on trying to find the words or answers in their mind. If this happens they also become distracted and dis-engaged. To handle the intense feelings they turn to coping strategies with a tendency to either express emotion (usually by exploding) or suppress emotion (usually by numbing or withdrawing). Every dyslexic participant said that in these circumstances they preferred to go for a drive in their car, and needed around half an hour to give them the space to calm down.

Not being able to process communication and the emotional reactions that occurred from these situations impeded positive relational interaction. Non-dyslexic partners often struggled to understand what was happening as the dyslexic could not express what was occurring. The tendency to explode, or, much more commonly to withdraw, left non-dyslexic partners upset and wondering why their partner exited which resulted in relational disruption and disconnection. Of course, at times, the non-dyslexic partner also reacted to historical triggers which led to defensiveness or criticism which also impeded connection (Gottman, 1994) and they too used various coping strategies to deal with their reactions, however this was not consistent across the data. As previously mentioned emotional processes will be considered under the third theme.

What the above findings suggest regarding communication is that a great deal of understanding, patience, and awareness is required by couples living with dyslexia to know what is happening between them and to allow time for dyslexic partners to bring themselves into connection. A tool that supports communication in dyslexic relationships is required. Clearly dyslexic intimate partners are not intentionally setting out to disrupt, be annoying, or cause problems for their partner. It is also important to note that non-dyslexic partners are having to do a lot more work in these relationships in support of their spouse.

Figure 3: Dyslexia affects communication



DYSLEXIA AFFECTS FUNCTIONING

As indicated earlier, the word “functioning” here refers to how couples navigate the organising, ordering, and responsibilities of their environment. All six couples reported some form of functioning issue or issues which appeared to be related to dyslexia that affected their relationships. Dyslexic partners tended not to engage in planning or detailed arrangements (for example future events or travel). Organisational difficulties were commonly reported across the data, such as struggles with housework, washing, tidying, dishes, putting things away, managing papers, managing children and their activities, and so forth. Ordering and sequencing was generally difficult for the dyslexic partners. Several dyslexic participants struggled with time keeping and staying on task and it was reported that they became distracted and lost time and awareness of what they were meant to be doing. This affected their performance around completing tasks.

Mary, however, was the exception in terms of organising her home. She kept a very ordered and tidy home environment. Many of the dyslexic clients that come to my practice have major difficulties with organisation yet I have worked with a few who have been what I call ‘hyper-organised’. They are unable to cope in chaos (which causes distractibility) and so are therefore very determined to keep their lives ordered often to a perfectionistic degree. In listening to her story I found determination was clearly a coping strategy Mary employed to manage life which was probably linked to her temperament and history. Her childhood home was very disorganised and so she had learned to be the “cleaner and organiser”. This determination can be both a risk and a protective factor (Morrison & Cosden, 1997). It was protective in that it helped Mary complete her university degree but was a risk factor (at least until Mary pursued her emotional work) as Mary reported that when she was angry she cleaned the house (or did other things to keep busy) rather than attend to her emotions. At the time of interviewing Mary smoked as a way of handling stress.

Dyslexics often over-compensate for their difficulties (Berresford, 2012). How we identify that in a dyslexic is that it will be *extreme* (i.e., they will be very upset when it is messy). Executive functioning difficulties are still a dyslexic trait for people like Mary or they would not have to over-compensate in the first place. They may be handling tasks well, however this can mask the dyslexia, and in fact they may still be experiencing stress.

Many couples struggled when working on tasks together (such as “do-it-yourself” jobs or other forms of lifestyle maintenance). One main disruption appeared to be in the area of following detail. The non-dyslexic partner preferred working in detail (i.e., doing things sequentially and specifically) and the dyslexic partner preferred the bigger picture (i.e., so long as it looks right overall the finer details do not matter). Dyslexic brains are wired towards thinking in the big picture rather than in sequential detail and, as mentioned above, dyslexic partners struggled to take in and follow detailed instructions provided by non-dyslexic partners due to working memory and phonological difficulties (Mary was one of these participants). They also preferred to be “shown” not “told” what to do probably because processing auditory incoming information can be challenging. “Showing” enabled them to learn practically and therefore complete tasks more effectively. In addition, most dyslexic partners struggled with managing finances, preferring that their spouse took this responsibility.

Both partners experienced high levels of frustration when challenged by these problems. A disorganised home generally impacted negatively on both partners. Except for Mary, there was a strong reliance on non-dyslexic partners to do more of the organising, ordering, and planning, and to carry more of the responsibility in the home. Most non-dyslexic partners also handled the finances. Interestingly, non-dyslexic partners tended to be “high-functioning”. In other words they were highly organised, worked to a high degree of order, and tended to take on responsibility. Lerner (2004) wrote that we all participate in *over-functioning* and *under-functioning* patterns which reinforce each other’s behaviour. Over-functioners tend to take on too much responsibility in relationships leaving under-functioners sitting back. Organisation is challenging for dyslexics and mismanagement can often leave them vulnerable to negative self-esteem triggers. It is understandable therefore that dyslexics may partner with high-functioners or over-functioners who take on the things the dyslexic partner cannot easily do and may be avoiding doing. Further research is required in this area.

Executive Functioning

To understand what was happening with the couples regarding functioning I refer to literature on executive functioning. Cooper-Kahn and Dietzel (2008) defined executive functioning as the administrator of the brain or,

a set of processes that have to do with managing oneself and one's resources in order to achieve a goal. It is an umbrella term for the neurologically-based skills involving mental control and self-regulation. (p. 10)

In other words, executive functioning is like the motherboard of cognitive functions which controls planning, organisation, ordering, working memory, flexibility of response to changing situations, the ability to begin a task or activity, inhibiting behaviour (the flipside of which is impulsivity), and emotional regulation. Many dyslexics have great difficulty in beginning an activity (such as knowing where to begin tidying a messy home, or beginning a piece of writing) or, as noted by some of the participants, how to begin a conversation, which appears to be related to executive functioning problems.

Gioia, Isquith, Kenworthy and Barton (2002) posited that executive functions consist of multiple subdomains of executive strengths and weaknesses that relate to different cognitive deficits (as listed above) and that working memory which is used in problem solving is central to executive functioning. They viewed regulation of emotion and behaviour (which they classified as one domain of executive functioning) as correlated to effective problem-solving (the other domain). Dyslexia is commonly seen as a phonologic impairment that affects reading and writing which, as noted above, involves working memory issues. There is limited research on the subdomains of executive function in dyslexia (Gioia et al., 2002). The most studied subdomain appears to be working memory which has been found to contribute to difficulties in word recognition and reading comprehension (Swanson & Ashbaker, 2000). Gioia et al. (2002) stressed that further research is necessary to determine which aspects of executive functioning relate to which developmental disorder.

Several researchers such as Waldie and Hausmann (2010) have found that dyslexia and executive functioning are connected and associated with the prefrontal cortex. They found that ADHD and dyslexic children share underlying neural deficits in attention and alertness, while Vasic et al. (2008) found that dyslexics have an executive deficit when manipulating verbal material in working memory. The findings of Brosnan et al. (2002) suggested that dyslexics show executive functioning difficulties in the inhibiting of distractors or interference and the sequencing of events. Brosnan et al. (2002) also found a deficit in temporal ordering judgements, which appears to support the temporal processing deficit theory of dyslexia (Habib, 2000).

Baker and Ireland (2007) found evidence for more dyslexic traits in a sample of offenders and that these correlated with executive functioning deficits. What they also found, however, was that dyslexic traits were not strongly linked to impulsivity (the flipside of inhibiting behaviour). Their study highlighted the importance of accounting for executive functioning difficulties when researching dyslexic traits as it broadens the definition of dyslexia to more than simply literacy-related difficulties.

My study suggests that executive functioning difficulties, namely: ordering, sequencing, organisation, time-keeping, distractibility, and beginning a task are correlated with dyslexia. Unlike the study by Baker and Ireland (2007) it suggests that impulsivity may be linked to dyslexia as three of the dyslexic participants reported having issues with distractibility. It also supports findings by Brosnan et al. (2002) who suggested that inhibition plays a significant role in learning particularly with inhibiting the processing of distractors (as conveyed in the temporal processing deficit theory). It is important to note that none of the participants were diagnosed with ADHD, which is most commonly connected with executive functioning deficits. Another interesting finding was that all participants reported experiencing an exaggerated intensity of emotion which they found difficult to regulate. This supports findings by Buchanan and Wolf (1986) whose learning disabled subjects reported difficulties with organisation, distractibility, and emotional lability (though their study was not specific to dyslexia).

High levels of anxiety echo across several studies on dyslexia (Hellendoorn & Ruijsenaars, 2000; Kavale & Forness, 1996; McNulty, 2003) and other studies have shown that heightened emotional reactions are linked with dyslexia (Lenkowsky & Saposnek, 1978; Saunders & Barker, 1972). On the other hand, Nalavany, Carawan and Rennick (2011) found low levels of sadness, stress, and anxiety. Bryan, Burstein and Ergul (2004) suggested that some behavioural problems of learning disabled students may be traceable to problems with emotional regulation, and that affect, which is regulated by the nervous system, may be both causal and/or correlated with learning disabilities. Research into the neurobiological circuitry of emotional processes in dyslexic individuals is required to ascertain how emotional functioning and regulation is occurring. Though my study covers only a very small sample, the findings suggest there is something taking place regarding emotional processing for the dyslexic participants (the focus of the next segment).

There is a clear consensus across the literature that dyslexic individuals require support right throughout the life span (Gerber, 2012; Hellendoorn & Ruijsenaars, 2000; McNulty, 2003; Morrison & Cosden 1997; Sang, 1988). Family support is pivotal from early adulthood right through to late adulthood and is instrumental in helping dyslexic adults cope with the emotional distress associated with dyslexia (Carawan, Nalavany & Jenkins, 2015; Nalavany & Carawan, 2012). It appears that many dyslexic partners rely heavily on their non-dyslexic partner for support with the above executive functions. Gerber (2012) stressed that positive adult adjustment depends on dyslexic individuals being autonomous and self-efficacious and finding a niche in life. Over-functioning for a dyslexic partner may further marginalise them by preventing them from pushing through their difficulties and thereby succeeding. However, partners need to understand that while their dyslexic partner navigates these challenges they may have to carry more of the load. It is important they don't always "do it for them" but rather "do it *with* them" and it may be true that non-dyslexic partners need to "not want what their partner cannot do" (Berresford, 2012).

What is interesting is that some dyslexic partners complained that their non-dyslexic partner was too detailed and arguments ensued as a result of this difference. In fact some dyslexics need a detailed partner to help them with functioning and probably marry them partly because of their organisational abilities. It is important for dyslexic individuals to realise what their difficulties are and where they eventuate from so they can receive the support they need.

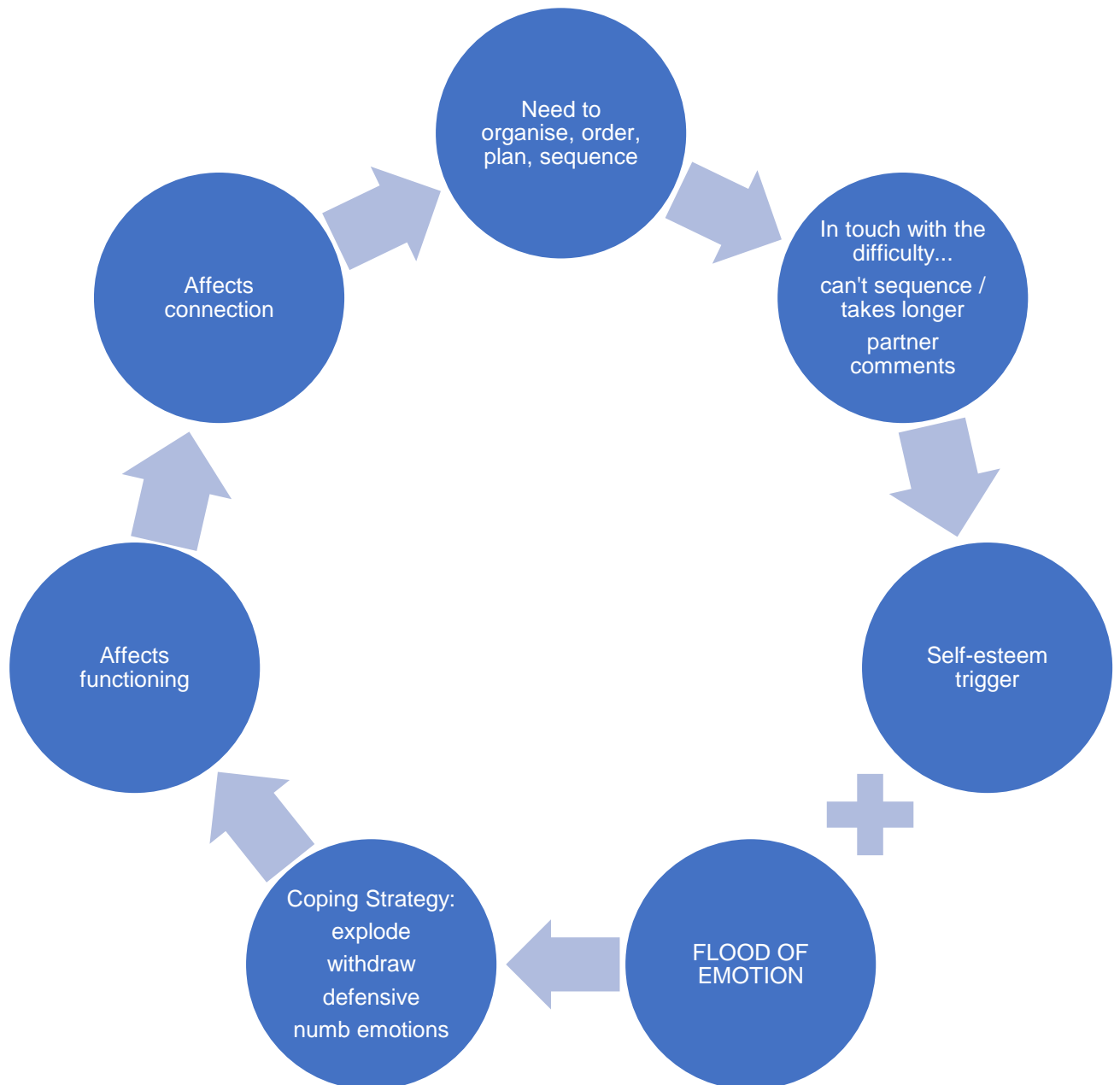
Summary

As found in the theme on communication, struggles with executive functions led to the same emotional triggers and coping strategies which will be discussed under the next theme.

A clear cyclic pattern became evident from the data on functioning (See Figure 4). In this cycle the dyslexic partner struggles with an aspect of functioning: they can't function, or take longer, or make a mistake, or their partner makes a negative comment. At this point they are triggered by a negative self-belief which most often stems from childhood experiences, such as "I'm not good enough." What follows is the same emotional reaction and coping strategy as noted in the communication section. Intense emotions and the ways dyslexic partners

cope with them in turn affect functioning which results in a disruption of connection between intimate partners.

Figure 4: Dyslexia affects functioning



DYSLEXIA AFFECTS EMOTIONS

Most couples named emotions as having the greatest impact when living with dyslexia. Self-esteem issues and historical triggers such as shame (i.e., something is wrong with me) that started in childhood had the strongest effect and these were triggered by the difficulties participants had with communication and functioning. Burden (2008) described self-concept as shaped by the way a person perceives themselves and self-esteem as relating to their feelings about those perceptions. Nalavany, Carawan and Brown (2011) considered self-esteem to be a blend of overall self-worth, social ability, problem-solving skills, self-competence, and intellectual abilities. On the other hand, Brown (2008) saw self-esteem as shaped by the way we *think* about ourselves (and that shame, which is a *feeling*, when triggered can take us back to an experience of smallness). In this research report I refer to self-esteem as having confidence in one's own worth and abilities which directly results from what a person believes about themselves.

The literature suggests that individuals with dyslexia are at risk of having a low self-esteem (Burden, 2008). It is clear from this study that self-esteem issues that are formed from living with dyslexia in childhood can have an ongoing effect in adulthood and a major impact on intimate relationships.

Apart from self-esteem triggers, the participants sometimes had an emotional reaction when they became cognitively overloaded with too much incoming information or detail to process. This could in turn trigger their sense of low self-esteem, or participants simply felt overwhelmed by the overload. When overwhelmed by heightened emotion, most dyslexic participants shut down cognitively and lost the ability to process, instead going blank. Thus they were even less able to access and order words at this point, exacerbating their sense of failure and low self-esteem. Certain coping strategies were enlisted to handle such emotional reactivity, the overwhelmingly common ones being emotional suppression and withdrawal, with the latter providing space within which the person could calm down. Emotions were often described as being intense and quite volatile. Such intensity echoes the study by McNulty (2003) who found public experiences of failure caused intense emotional responses in children and that their emotional insecurity persisted into adulthood.

Goleman (1996) saw emotional intelligence as central to human intelligence and healthy living. He argued that the emotional capacities for self-control and empathy are vital for handling relationships well. He also wrote that the emotional lessons children learn at home and school shape their emotional circuits, making them more inept or adept at handling emotions intelligently. To Goleman (1996) “impulse is the medium of emotion” and those who are at the mercy of impulsivity (or who lack self-control) were morally deficient. Being able to control impulse, he wrote, is the “base of will and character” (p. xii). My study provides evidence that dyslexia can involve difficulty with executive function (which may include impulsivity) and difficulty reading others’ body language, and dyslexic individuals may be very vulnerable to developing a low self-esteem. They would therefore be highly vulnerable to *not* being able to form the essential emotional and moral characteristics that Goleman (1996) suggested are vital for emotional aptitude.

In contrast according to Greenspan (2003) emotional intelligence is not about ruling or controlling emotions but expressing and tolerating them. She sees emotions as intelligent in themselves if they are not dominated but are “free-flowing” (p. 74) which, she wrote, cannot happen in a contain-manage model like Goleman’s. Greenspan (2003) suggested that emotional tolerance and mindfulness skills prevent “dark” emotions from becoming destructive (i.e. into addiction, depression, anxiety, violence, numbing) and the essence of emotional intelligence is not management but transformation.

Since dyslexic individuals may experience emotions intensely and then lose cognitive processing faculties when feeling so intently, it may be that they cannot call their impulses into containment. Learning to feel and process intense emotions as an ongoing practice, rather than numbing them, is therefore, as Greenspan (2003) suggests, more likely to result in safer emotional release (rather than becoming stuck which leads to toxic emotional states) and a deeper life awareness and ability to engage relationally.

Naming and Communicating Feelings

Both Goleman (1996) and Greenspan (2003) stress that knowing how to feel, and the ability to identify one’s feelings accurately in words are important for awareness. Many participants in this study reported that they struggled to know, and find words for, what they were feeling. Feelings are experienced in the body, however being able to name a feeling is necessary in

order to know what it is, understand it, and express it. Since accessing and ordering words are difficult for most dyslexics, being able to name feelings may be difficult as well.

This appears to be similar to the discussion on alexithymia (i.e., lacking the words for emotions) by Goleman (1996) where he pointed out that alexithymics do feel but are unable to put the feeling into words, and Sifneos' proposal that this occurs due to a disconnection between the limbic system and neocortical verbal centres in the brain (as cited in Goleman, 1996, pg. 51). Further research on dyslexia and emotions is vital to identify possible neuro-causal and consequential factors. It seems that teaching dyslexic individuals the words for what they are feeling helps to ameliorate this difficulty as several participants in my study had pursued counselling where they had worked on naming emotions and this had helped them to understand and express their feelings. This supports findings by Hellendoorn and Ruijsenaars (2000) who reported that their participants who had therapeutic treatment learned to better cope with and express their feelings (one of whom had the same self-protective wall that my participant Bob described). They also found that problems with expressing emotions were frequently reported by participants.

Greenberg and Johnson (1988) pointed out that experiencing and communicating currently experienced feelings helps to produce change in couples. Leading couples therapists stress that the quality of intimate relationships depends on genuine I-Thou (Buber, 1958) dialogue, or the process of sharing one's inner thoughts and feelings with another (Greenberg & Johnson, 1988; Hendrix, 2008; Schnarch, 2009). Yoo et al. (2014) found that emotional intimacy was mediated by positive communication (e.g., partners sharing their vulnerabilities) which lead to increased relationship satisfaction. It is clear, therefore, that dyslexic partners are at a disadvantage since effective communication of thoughts and feelings requires language to bring oneself vulnerably into I-Thou dialogue.

Coping

What became evident from the data was that many dyslexic participants (and some partners) found coping with vulnerability difficult. This is, in fact, a common human attribution. In discussing her research on shame and vulnerability Brown (2008) called shame a "silent epidemic" (p. xix) due to human beings' unwillingness to talk openly about shame and how it affects people's lives. The fear of disconnection and being perceived as flawed and

unworthy of belonging keeps people from being vulnerable with one another. Several participants mentioned that an angry outburst was actually a way of coping with (or escaping) inadequacy. It was not the authentic sharing of vulnerability. All the participants preferred to cope with their emotional vulnerability by either numbing (shutting emotions down, humour, putting up a wall, distracting, performing, wearing a mask) or withdrawing (going for a drive). According to Brown (2008) and Greenspan (2003) we live in a culture that tends to fear and devalue emotions, and induce fear of self-expression. As well, we have an aversion to feeling pain, and so come to believe that suppressing or avoiding the hard feelings will make us feel better. The paradox of this is that suppressed feelings come back to haunt us whereas feeling them releases their emotional energy. To listen to our emotional pain requires vulnerability.

Since all this seems attributable to all humans alike, we may ask the question, so what difference does dyslexia make in this instance? I believe there is a difference. Dyslexic partners may find it harder to work out what they are feeling and share it and to self-soothe their seemingly more intensive emotions. Partners need to understand that the dyslexic needs time out to calm themselves, so long as they schedule time to reconnect. When feeling intense emotions the dyslexics in this study lost their ability to be cognizant. They went blank and the problem of finding words became herculean. Experts on couples' processes often stress the importance of partners being able to work towards calming themselves emotionally while remaining in dialogue (Schnarch, 2009) yet dyslexic partners may not be able to continue communicating with their partners when they are emotionally reactive.

As well, vulnerability for dyslexic partners is most often linked to childhood hurts and trauma around their language and functioning struggles and so the very act of relating itself (e.g., not being able to pull a sentence together when upset) can result in deepened shame. In this way dyslexic partners are therefore more highly vulnerable than others when navigating relationships.

Developing positive coping strategies can help dyslexic individuals to lead successful lives (Hellendoorn & Ruijsenaars, 2000; Polloway et al., 1992). Folkman and Lazarus (1988) referred to "coping" as using cognitive and behavioural efforts to deal with internal or external factors that a person appraises as stressful or outside of their resources. They also

suggested coping is a mediator of emotional states, and individuals' ways of coping are associated with the type of support from others they will receive (Dunkel-Schetter, Folkman & Lazarus, 1987). Folkman and Lazarus (1988) found that the reduction of distress through emotion-focused coping strategies such as distancing and escape-avoidance (e.g., smoking) could reduce open communication with a spouse at a time when such communicating may in fact be beneficial. The secondary effect on the relationship was that a spouse may feel rejected and respond negatively. They also found that, though distancing may mediate emotion positively, it does so only for a limited time, and it could increase distress because it can interfere with problem-solving. Greenspan (2003) supported this finding as she saw distraction as only helping temporarily. One problem-focused strategy, "confrontive coping" (an aggressive strategy), was seen as evoking negative responses from the one being confronted. The other problem-focused coping strategy, "planful problem-solving" (involving cognitive problem-solving and taking action) mediated positive support and improved emotional states (Folkman & Lazarus, 1988, p. 311).

Though all the participants used distancing as a main form of coping which appeared to mediate negative emotions, it did affect partners negatively (though their reaction was dependent upon the level of understanding and acceptance they had of the dyslexic's difficulties). Another major factor was that of working memory because, by the time the dyslexic partner was ready to return, they may have forgotten the details of what they were upset about and were therefore not as willing or able to engage in dialogue again with their partner and thereby resolve the conflict. Clearly dyslexia causes couples to be at a significant disadvantage when managing relational distress.

From this I suggest that dyslexic individuals need support with emotional processing which needs to include: teaching words for the various emotions, awareness around what they are feeling in their body which can help guide them to know what emotion they are feeling and put a word to it, learning mindful ways of being with feelings, learning ways to calm emotion other than distancing, and if withdrawal is necessary to calm down, a way to record what is happening at the time so that when they are able to return they can enter back into resolution dialogue. Since dyslexic individuals may have difficulty with aspects of cognitive processing, particularly planning and sequencing, developing the more positive coping strategy of planful problem-solving and putting this into practice may not be easy to achieve, leaving dyslexic partners at risk of other, less beneficial forms of coping.

Non-dyslexic partners need to understand and accept the difficulties their partner may have with emotions, allow their partner time to find words and express themselves, encourage their partner's vulnerability and lean into their own, and realise that their partner may need to exit to calm down but once they can return it is important to resume dialogue in order to resolve conflicts. Working together to problem-solve and taking action *together* may improve coping.

Trauma

There appear to be very few studies on trauma relating to dyslexia. McNulty (2003) found his participants described the misunderstandings from school experiences as feeling "traumatic", though he wrote that this did not constitute a clinical diagnosis for trauma due to it not involving threats of death or physical harm (American Psychiatric Association, 2013). The findings by McNulty (2003) relate to what Orenstein (2000) described as trauma as coming from having a learning disability.

As a practitioner I have observed that trauma for persons with dyslexia appears to involve repeated arrant misunderstandings (which are often public) of the individual's struggles and the adversities that result from them, which brings into question the worth of the self, such as intelligence, emotional state, educational ability, work ethic, social ability, and parenting ability (echoed by McNulty, 2003). This most often leads to deep shame and an ongoing fear of failure that leads to avoidance and flight or fight responses. Sometimes the experiences become so overwhelming that an individual enters a hypo-activated state (or freeze response) resulting in the layering of trauma within the limbic brain and sensorimotor system in the body. This may relate to the shutting down or going blank when experiencing intense emotion as described by my participants. While these experiences may not involve the criteria for Posttraumatic Stress Disorder (PTSD) as McNulty suggested, they can involve fear, helplessness, horror, terror, humiliation, and/or shaming as trauma symptoms (Lightstone, 2013) that cause clinically significant distress or impairment in social, occupational or other areas of functioning (noted as other-specified or unspecified trauma disorder in the DSM-5).

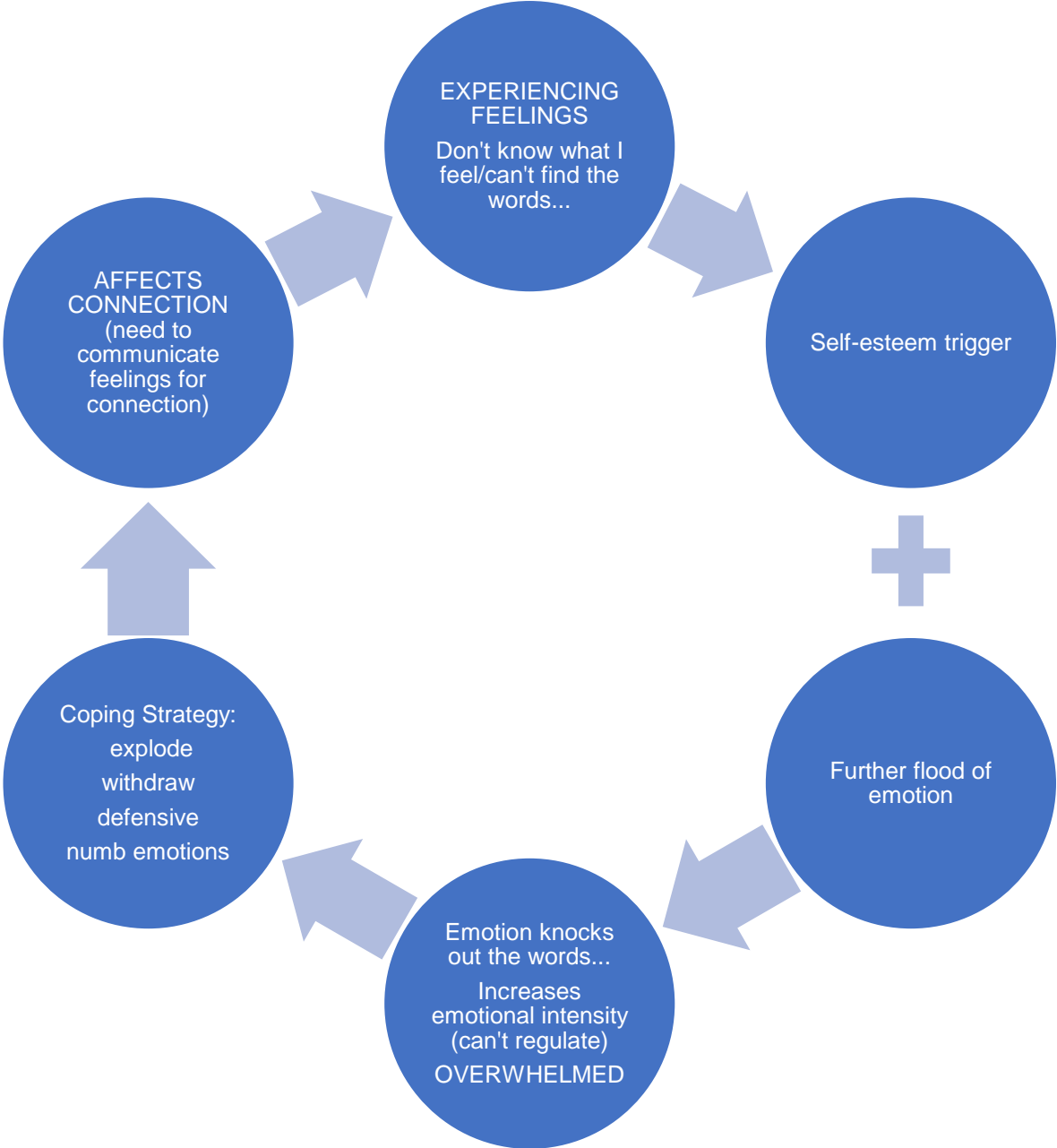
Briere (2015) suggested that the risk of PTSD from one major trauma is zero but that the accumulation of multiple traumas (such as in Complex Trauma) may lead to PTSD along with outcomes of anxiety and depression. Dyslexic individuals are therefore at risk for trauma

disorders due to repeated traumatic experiences (such as shaming). Research into dyslexia and how it relates to trauma and associated feeling states is vitally important for this field.

Summary

A clear cyclic pattern became evident from the data on the emotions (See Figure 5). In this cycle experiencing feelings and/or not knowing what the feeling is and/or not being able to name these feelings can trigger self-esteem issues. This combines with an intensified flood of emotion. When feeling intense emotion the dyslexic individual cannot cognitively process or communicate which can lead to increased emotional intensity. They then cope by employing the emotion-focused strategies of either exploding, numbing emotions, or withdrawing (mostly commonly by driving away). This in turn disrupts connection between partners.

Figure 5: Dyslexia affects emotions



DYSLEXIA AFFECTS CONNECTION

I have discussed the ways that dyslexia affects communication, functioning, and emotional processing in couples where one partner has dyslexia. From these main themes emerged a fourth, dyslexia affects connection (See Figure 6).

Brown (2015) wrote,

The more difficult it is for us to articulate our experiences of loss, longing, and feeling lost to the people around us, the more disconnected and alone we feel. (p. 148)

In the current study, disruptions in communication resulted in high levels of frustration in both parties and self-esteem triggers in the dyslexic spouse (and at times the non-dyslexic spouse), which led to disconnection. Dyslexic individuals may find it difficult to articulate their experiences to their partner and, as Brown observed, this can result in feelings of disconnection. Messiness, disorganisation and disorder caused disruption between partners and the constancy of this, the effect on family around planning and events, and the impact on the non-dyslexic partner to carry more responsibility led to high levels of frustration in both parties and resulted in disconnection between the couple. As already identified, difficulties with emotional expression and processing led to intensified emotional reactions in the dyslexic partner (and sometimes the non-dyslexic partner), as well as self-esteem triggers and this led to the emotion-focused coping strategies of distancing and suppressing that caused disconnection between partners. These manoeuvres were ways of controlling vulnerability rather than expressing it which, as Brown (2012) alluded to, provided self-protection but led to relational disconnection.

Hendrix (2008) maintains that above all else in life humans seek connection—with parts of ourselves that were repressed as a result of experiencing disconnection from parents or other hurts in childhood; with others; and with the cosmos. To heal a ruptured connection between partners requires the restoration of awareness of connection with each other which, Hendrix (2008) wrote, is the source of healing. He suggested that when a couple learns to connect on a very deep level, childhood pain can lose its sting.

In their research into the mediating role of attachment behaviours in relationships, Knapp et al. (2015) found that secure attachment behaviours (i.e., accessibility, engagement, and responding) mediated the relationship by decreasing the incidence of poor communication, thereby helping to overcome the effects of adverse influences attributable to family background. This supports the view by Greenberg and Johnson (1988) that attachment is an essential aspect of adulthood that forms the “core of the emotional bond” in intimate relationships (p. 19).

Indeed, many of the couples in my study said that they experienced a deep bond that kept them together regardless of the difficulties experienced with communication, functioning, and the emotions. It appears essential, therefore, that couples living with dyslexia form a secure attachment with each other which will undergird them when they experience relational difficulties and will help to heal the effects of historical pain.

Sex and Gender

There is not enough scope within this study to comment fully on sex and gender. Some male participants commented that, being more tactile, sex was for them a way of communicating that didn't require words, and was both a release of energy and a solace. It is possible therefore that sex could become a vehicle for connecting and managing intense emotions rather than intimate relating through sharing vulnerability.

It was evident from the participants' descriptions of their experiences that there were some differences between genders in several areas. Vulnerability was more commonly avoided by the males, which appeared to be due to the influence of social norms and gender stereotypes, i.e., that men should not show weakness and should be problem solvers. Many participants' said “that's a male thing” or “a man thing”. One of the female participants suffered under these social norms because she found it difficult to organise her home when “women should have everything together in the home.” Though several men mentioned that it was women who were ruled by emotion and they themselves only had emotions like hunger and needing the toilet, both males and females experienced intensive emotions which they both tended to suppress in order to cope. This echoes the declaration by Greenspan (2003) that *both* men and women are impoverished around attending to emotional vulnerability and

that this is most often due to the effect of social norms. Further research is required on gender and dyslexia, in relation to sexuality.

Support

There is a strong consensus in the literature that dyslexic adults require continued support right through the life span (McNulty, 2003; Nalavany & Carawan, 2012; Sang 1988) including into late adulthood (Carawan et al., 2015). Support in the school years has been found to be related to success in adulthood (Hellendorn & Ruijsenaars, 2000), and is needed for ongoing encouragement, to alleviate stress, to provide complementary skills for functioning in adulthood (Gerber, 2012), and to help positively conciliate emotional experiences (Nalavany & Carawan, 2011). Morrison and Cosden (1997) found that practical and emotional support served as a protective role for adults with learning disabilities that reduced risk and led to successful adaptation to adult demands.

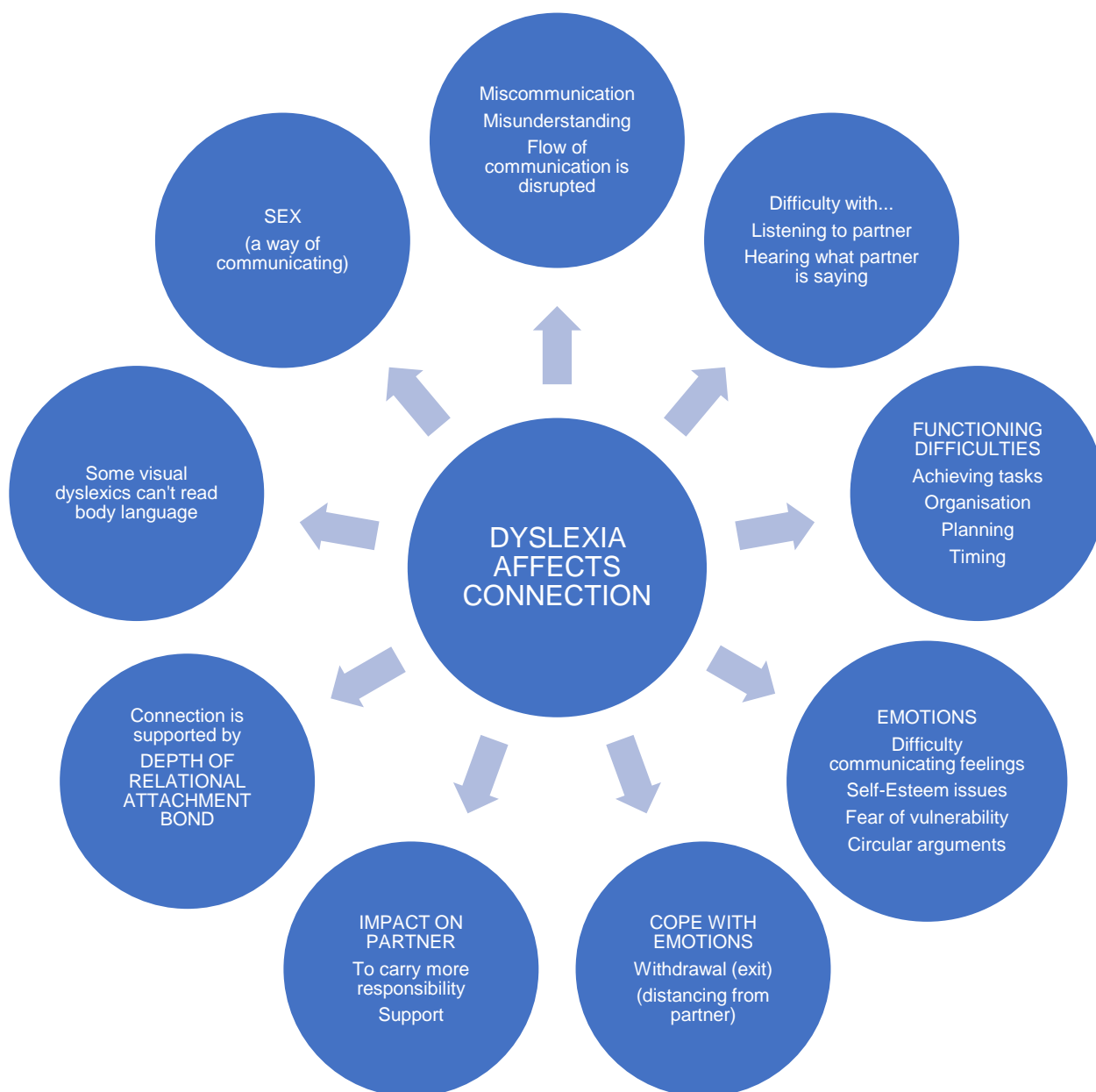
It was clear in this study that the dyslexic participants required various types of consistent support from their partners. It is also suggested that support by counsellors and psychotherapists may help adults to navigate the various domains of adult life, including emotional processing. This echoes Nalavany et al. (2011) who stressed that the need for support services in this arena (which includes counselling, education, and support groups) is paramount. Gerber (2012) summed it up well: “adults with learning disabilities need to understand they cannot do it alone” (p. 44).

Impact on Non-Dyslexic Partner

As found in the literature on hearing and dual sensory loss, *both* partners in the current study experienced the effects of living with dyslexia (Brennan & Bally, 2007; Hallberg & Barrenas, 1993; Hetu et al., 1993). Brennan and Bally (2007) found that the non-disabled partner was particularly vulnerable to being negatively emotionally impacted since they may feel the strain as caregivers of their spouse. My study reveals that the non-dyslexic partners were negatively affected emotionally, they carried more responsibility for functioning, they were often required to help with language and administration, and they needed to exercise a lot of understanding and acceptance in order to build tolerance.

Partners are not immune to the effects of dyslexia. They also feel the difficulties and stress and it seems clear that they could benefit from specific support themselves, from wider family members and from professional support services.

Figure 6: Dyslexia affects connection



WHAT HELPS?

The participants provided descriptions of what helped their relationships work positively. The points below are a summary of those that were commonly identified by more than one couple: from those mentioned across *all* couples to points made by two couples. Points emerging from this discussion have also been included (see Figure 7).

Some participants stressed that counsellors need to understand how to work with dyslexia in order to be effective practitioners. Counselling can help individuals and couples with dyslexia by: helping to learn positive communication skills; helping stem destructive communication and defensiveness; working through historical self-esteem issues; learning to feel, name and process emotions; help with executive functioning strategies; and to build safety and practice around sharing vulnerability.

Understanding, awareness, and acceptance are vital when living with dyslexia. Partners need to understand that the dyslexic may be struggling and not intentionally being difficult. Diagnosis was vital to building understanding, awareness and acceptance of both the condition and the difficulties.

Ongoing support in many areas across various adult domains and right throughout adulthood may be needed from non-dyslexic partners. Non-dyslexic partners may also need support themselves. High-functioning partners need to avoid over-functioning for their spouse, especially female partners, as women are socialised to hold everything together for families (Brown, 2012), and research that shows that women tend to be more responsive than men to providing partner support (Bodenmann et al., 2007).

Clarification of communication is vital. Non-dyslexic partners need to be aware that the dyslexic partner may say the wrong word or think they have communicated when they have not. Both partners need to ask for clarification when they are confused or unsure. Partners need not suggest words for the dyslexic. Using fewer words or limiting the amount said at one time helps. Texting is not helpful, and neither is interrupting. Non-dyslexic partners need to understand that the dyslexic partner may need to say what comes into their head before it is forgotten. It is vital couples slow down when communicating and allow time.

Strategies and tools for communication help. I recommend a pictorial tool for effective communication is used whenever communication becomes difficult. I outline my tool, “Drawing Talk”, in the conclusion.

Building a strong and secure attachment bond between partners is vital.

Working to strengths and compensating for each other’s “weaknesses” helps couples. Team work is vital. It helps if couples work co-operatively and are prepared to work on their relationship. Doing things together helps many couples to feel more connected.

Commitment to the relationship, spending more time together, talking more, prioritising the relationship over functioning, determination, trust, and individuals taking ownership of their own issues helps. Dyslexic partners need to take responsibility for the challenges arising from their dyslexia rather than expecting others to do this for them.

Finally, having common ideals in life, “being on the same page,” managing finances so there is enough money, persevering, less work stress, and socialising with other dyslexics were all identified by some participants as helpful.

Figure 7: What helps?



CHAPTER SEVEN

Conclusion

This was a small-scale, qualitative, phenomenological study designed to investigate the effects that dyslexia may have on communication processes and the experiences of relational connection between partners in intimate relationships where only one partner has dyslexia. The results of the study provide evidence that dyslexia affects much more than simply reading and writing. Dyslexia seems to have a considerable impact across several fundamental domains of adult relating. It appears to be directly responsible for some major difficulties with communication, every day functioning, and emotional issues that result in disruptions in connection between intimate partners.

This enquiry supports the phonological deficit theory of dyslexia. However there is more going on than simply language-related challenges. The study also reveals that difficulties with executive functions may be linked with dyslexia and it is possible that heightened emotional intensity and difficulties with emotional regulation may be related to dyslexia as well. From this study it appears that the involvement of the prefrontal cortex (in executive functions) in dyslexia may be broader than some neuroscientists suggest. Since affect is regulated by the nervous system and requires processing of sensory information it is possible that some of these emotional experiences are consequences of an underlying neuro-biological issue that may be part of the dyslexic syndrome. The study may therefore indicate that a deeper neural situation is occurring, and so potentially supports the temporal processing deficit theory of dyslexia and possibly the dyschronia theory by Llinas (1993) as well.

STRENGTHS AND LIMITATIONS OF THE STUDY

Strengths

One major strength of this investigation was that all of the dyslexic participants were fully assessed by an educational psychologist using the WAIS-IV measurement. This testing to confirm the presence of dyslexia in one of the two partners in each couple makes this study more robust in that the findings relate directly to dyslexia and not to other learning difficulties.

Rigorous methods were used in this study. The literature review was systematic and this method was employed because no literature was found that directly focused on this topic. The search was exhaustive in order to be sure that as many relevant studies as possible were sourced. The methodological process of phenomenological reduction was followed as closely as possible by listing the participants' accounts of their experiences repeatedly as they described them until themes were discovered that were consistent across the couple data. Various ways of organising the results were trialled until the themes and subthemes were consolidated and tested against the transcripts, and reviewed by a third party.

Participants were recruited from various locations around New Zealand rather than one specific area of the population.

A significant aspect of this study is that it gives voice to individuals with dyslexia. The analysis of their stories was based on their reality in this world. The semi-structured, open-ended interviews allowed participants' stories to unfold and they were able to pursue their perspectives as they emerged.

A copy of the findings and discussion was given to an expert psychologist in the learning disabilities field for critique and comment. Feedback suggested the results were accurate concerning dyslexia as a condition and her experience with her dyslexic clients' lived reality.

Limitations

The participants in this study constituted a small sample and therefore care must be taken not to generalise these findings to all couples living with dyslexia. Furthermore, only two dyslexic women participated in this study. In addition one was presenting differently from all of the other dyslexic participants due to compensating strategies. As a result, there are insufficient data to investigate the experiences of dyslexic female partners as fully as hoped for. In hindsight it would have been better to pursue equal male/female quotas.

A further limitation was that the non-dyslexic participants were not formally assessed with the WAIS-IV as *not* having dyslexia. They self-reported as not being dyslexic.

From this study it has emerged that dyslexic individuals may have difficulty communicating due to accessing the right words and saying things they do not mean. It is possible that this may have influenced, and limited, their reporting of their experiences. However their descriptions of their experiences were clarified and/or confirmed by their non-dyslexic partners (acting in some ways like co-researchers).

In addition a question arises about the extent to which the couples' experiences of tensions and difficulties were due to relational dilemmas, such as differences in temperament, the effects of their histories, couple dynamics, and/or the effects of social norms.

Finally, this is sensitive research that looks at intimate experiences between partners. It is possible that the participants were constrained in their sharing of personal encounters in the interviews because of the public accessibility of this study.

IMPLICATIONS FOR PRACTICE

The participants in this study generally reported that their emotions had the greatest impact on them as couples. For the dyslexic partners this was mainly to do with a compromised self-esteem from living with dyslexia in childhood and ongoing hurts into adulthood. This supports evidence-based studies in the field of learning disabilities that stress the importance of early identification and intervention which can help to ameliorate negative outcomes in adulthood.

Educators

Dyslexia runs in families, and so the effects of the condition may be felt in pre-school years not just when entering the education system. How early we can identify dyslexia in children is in question and many teachers appear to hold the view that dyslexia can only be confirmed around mid-primary age, although parents may identify their children much earlier. There is a great need for teacher-parent communication in which teachers listen to parental insights concerning their children.

There is currently inadequate training in learning disabilities for teachers in New Zealand in either undergraduate or postgraduate courses. There needs to be an overhaul of teacher education programmes so that teachers are better trained and resourced in working with students with learning disabilities and able to identify the core characteristics in their classrooms as early as possible. Though awareness is increasing, more professional development courses, with the correct information concerning what dyslexia *actually* is and adequate resourcing on *how* to teach these children is vital.

Adult education practitioners appear to have a basic understanding of dyslexia in New Zealand however a more in-depth understanding is required. Dyslexia not only affects reading and writing. Adults can be at a specific disadvantage across multiple domains. Adult educators can provide support to help dyslexic adults to achieve in their studies and careers and thereby find their niche in life, which leads to successful adaptation (Gerber, 2012).

Every educator needs to understand that communication, executive functioning and emotional processing may be compromised in dyslexic individuals and that support in these areas may be necessary. It is also clear from this study that diagnosis increases understanding and acceptance and is a protective factor towards adult adjustment.

The effect of dyslexia on the emotions is particularly important. Our culture continues to exhibit ambivalence towards emotional expression, particularly of emotional pain. We are taught to control or medicate it and that if we work hard enough we can somehow obliterate emotional suffering. Numbing emotions has become an epidemic most often due to the unacceptability of vulnerability. “What will others think?” and “I’m not good enough” are experienced every day in many dyslexics’ inner worlds, and if these happen to leak out behaviourally they are most often met with judgment and criticism. Ways need to be found to do more work with the emotions in school. This could occur by talking more about children’s emotional lives and normalising vulnerability rather than suppressing it.

Many dyslexic children need space when they are emotionally overwhelmed. Being able to exit from the busy classroom, or to sit in a quiet darkened place to manage overload and overwhelm is vital. Mindfulness practices could be used every day during classroom time so that the full experiencing of emotions as they occur is encouraged rather than being acted out towards others, or becoming stuck in the body.

Human Services Practitioners

It is clear that support for dyslexic individuals is required right throughout the lifespan. Support by family is conveyed as central to dyslexics succeeding in adulthood. Couples and families therefore require help to understand the complexities of dyslexia (and other learning difficulties), to minimise stressors, to address specific challenges, and to build compensatory actions. Therefore professionals such as social workers, counsellors, psychologists, and psychotherapists etc. require adequate training so they can work with clients who present with learning difficulties. It is also essential that workplace professionals and community leaders and workers understand the complexities of learning difficulties. For example, it can be very difficult for a dyslexic person to fill out a form, yet forms are required widely in society and these are most often not dyslexia friendly. Advocacy by practitioners may be required.

Human services professionals need to understand several core issues when working with, or helping, dyslexic individuals, couples and families:

Communication is often affected and so professionals need to slow down and use fewer words in fewer successions, include fewer details, and provide more time for the dyslexic person to respond. Clarification is necessary so that the understanding of what is being communicated is clear. Use of diagrams on a whiteboard, as an aid to explaining concepts, is powerful. Counsellors need not expect their dyslexic clients to write too many things down, or that they will process well between sessions. If note taking is required, advocacy by the therapist is important. Couple practitioners need to understand these specific challenges and recognise that specific dialogue techniques in couple therapy are not always facile.

Psychoeducation and practice around executive functioning strategies and techniques are vital, for individuals, couples and families. Practicing these strategies until they are embedded or “in a rut” is most effective. Practitioners must be prepared to send reminders for sessions as time keeping may be challenging for clients. Therapists’ own boundaries are important so that dyslexic individuals are encouraged to take responsibility for their own difficulties while being supported.

When working with the emotions practitioners need to teach words for the various emotions, build awareness around what clients are feeling in their body which can help to guide them to know what emotion they are feeling, teach mindfulness, and teach ways to feel and calm emotions. Encouraging playful problem-solving rather than emotion-focused coping strategies is important. Practicing from a solely person-centred modality, which focuses on accessing and naming feeling states, may be unhelpful for dyslexic clients. A mix of person-centred, psychoeducational, and psychodynamic approaches (the latter which addresses historical childhood issues) is recommended. Also, many dyslexic clients will have experienced trauma or severe trauma. Practitioners need to have adequate training in trauma in order to work with presenting trauma symptoms.

Multi-sensory tools are most effective when working with dyslexic individuals, and in couples, and families. Visual tools (such as whiteboard, paper, drawing, drawing talk); auditory tools (such as recording information, talk therapy); and tactile tools (such as sand, stress balls, action methods) are key to positive therapeutic outcomes and can be used depending on the client's processing preferences. These tools require externalisation of data which is important for dyslexic individuals. Rather than solely trying to process and sequence *within* the mind, information that is outside of the person can be better engaged with, processed, and taken in which facilitates learning and change.

It is important that practitioners recognise that non-dyslexic partners also live with, and are affected by, dyslexia. They also need specific support as they are often carrying more of the responsibility in families.

Finally, couples' therapy practice that works to build a close attachment bond between partners appears to be most advantageous. This bond acts as a core support and is a protective factor when facing the challenges that living with dyslexia inevitably brings.

Couples Living with Dyslexia

In addition to, and expanding on, the points made under the "What Helps?" section in the Discussion, the following suggestions are given for couples where there is one dyslexic partner.

Couples living with dyslexia need to recognise that communication may be impeded and that understanding how dyslexia may be affecting their relationship is necessary for the wellbeing of their partnership. Acceptance of the dyslexic partner's difficulties by the non-dyslexic partner is needed and this may help lessen disappointment and resentment around the things their dyslexic partner cannot do, or cannot do as well. As noted above, the dyslexic partner may be working hard at listening and doing the best they can to take in and process information, details, and what is being communicated. These couples would do well to slow down and take more time when communicating and use fewer words. Interrupting and suggesting words for the dyslexic partner appears to be unhelpful. Drawing Talk (explained below) may aid clearer communication between partners.

Non-dyslexic partners need to realise that their partner may struggle with organising, ordering, planning, sequencing, time-keeping, and starting an activity or communication. Such problems may be connected with dyslexia and the dyslexic partner is not necessarily intending to be messy or disorganised. What appears to help is living in a more sparse environment where there is less to keep tidy. Whilst I believe dyslexics are responsible for their own challenges with dyslexia and the difficulties that ensue, partners need to understand that such challenges can be profound, leaving dyslexic partners vulnerable to emotional disturbance, especially if they fail in reaching their goal. Auditory explanations for tasks may not be processed well and non-dyslexic partners need to slow down when sharing instructions. Positive outcomes are more likely if they "show" their partner what is required. For some challenges, such as handling the finances, where there is a clear "can't", it may be much less stressful for non-dyslexic partners to take responsibility for that task.

Dyslexic partners would do well to practice strategies for dealing with any executive functioning difficulties. They may find it most helpful to focus on the function they are wanting to improve and habitually practice this repeatedly so that it becomes more fixed within practice and the memory. I call this practicing until it is "in a rut". Doing this may mean the dyslexic individual therefore does not have to cognitively work as hard to achieve the behaviour desired. Though this book focuses on children, see Cooper-Kahn and Dietzel (2008) for excellent tips and strategies for dealing with executive functioning.

Support for improving negative self-esteem in both partners, should it exist, is encouraged. Couples need to learn playful problem-solving strategies rather than emotion-focused ones. Dyslexic partners need to learn ways to feel, tolerate, and regulate their emotions and if emotions are too overwhelming, couples need to allow time and space for the dyslexic partner to calm down and then return in order to work at resolving the conflict. Drawing Talk may help dyslexic partners to better express their emotions in the form of pictures rather than having to find words when they are flooded emotionally.

DRAWING TALK

An effective tool for couples (and families) is required to help improve communication, aid in emotional expression, and build connection. Drawing Talk was created as a method to facilitate these processes. Though it is useful for most relationships, it is particularly helpful for those where dyslexia is present as it accesses the pictorial ability of the right hemisphere to communicate instead of relying as heavily on words. Drawing Talk slows the communication process down which affords dyslexic individuals the time to better process and articulate what they are wanting to say. It also slows the non-dyslexic partner down allowing space in which to better understand their dyslexic spouse. See Appendix B for an explanation of this method.

RECOMMENDATIONS FOR FURTHER RESEARCH

There are several suggestions for future research that emerge from this study. An important next step would be to investigate what is occurring with dyslexia and the emotions. A mixed-method methodological approach would be of benefit to the field. The quantitative component would require a neuroscientific exploration using fMRI which could provide insight into what areas of the brain are involved in emotional processing in dyslexia and whether there are any differences with a control group. The qualitative component would explore the lived emotional experiences of the same dyslexic individuals.

It is vital to the field to investigate traumatised versus non-traumatised dyslexic individuals using fMRI to see what neural processes are implicated in processing traumatic memories

and subsequent emotional responses. Qualitative enquiry would also be important to gain understanding of dyslexic individuals' lived experiences of trauma.

Further neuroscientific research is necessary to ascertain the aspects of executive functioning that relate to dyslexia as compared with other specific learning difficulties.

Further research on dyslexia and gender and how this relates to sexuality is required.

An exploration of the experiences of couples where both have dyslexia is pertinent, to see how couples navigate intimate relationships in comparison with couples where only one partner has dyslexia.

Studying couples who live with dyslexia but who have separated or divorced would be important so see what caused irreconcilable difficulties between partners and what, if any, aspects of dyslexia are attributed.

Future research is also needed to examine the effectiveness of counselling and psychotherapy for couples who live with dyslexia. Such research could develop and enhance the currently limited knowledge of particularly effective interventions and processes.

Finally, populations other than Pākehā live with dyslexia. Research should be conducted with different cultural population groups (such as indigenous cultures) to ascertain how dyslexia affects couples within those cultures.

IN CLOSING

Though post-modernity has made a remarkable impact on modernist beliefs and practices, our culture is still dominated by modernity's dream of mastering and controlling life through reason, positivist science and technology. We continue to be influenced by the medical model which pathologises difficulties and differences as deficits and dysfunctions and seeks to fix, cure and control them. One of the tragedies of modernism is that in order to control and ensure compliance within a system, uncertainty, unpredictability, and non-uniformity (or *differentness*) must be eliminated. Whatever is different is judged, criticised, side-lined or

negated. Though social constructionism is pushing against this and many of our institutions are changing, divergent ways of being and doing things are still often seen as *abnormal* and those who practice such things continue to be marginalised. The artistic, emotional and spiritual are still often dismissed as secondary to the rational.

If we are not mainstream we are not seen as normal. In our culture special accommodations are made for people with physical disabilities while for youth with cognitive “disabilities” educational accommodations are slowly improving. The most disabling aspect of these “accommodations” however, is that individuals continue to be separated and segregated from “the norm” rather than the environment or the institution’s practices changed to “normalise” them. Learning “disability” is often viewed as a dysfunction or flaw in nature that requires eliminating or fixing with interventions rather than as the possibility of an exciting evolutionary gift that is bringing valuable growth and change to our human legacy. While we reside in this current cultural climate the words “disability,” “dysfunction,” and “disorder” do, however, help to enlist the necessary support, interventions, and advocacy required for individuals that without them, currently, they may not receive.

Humans are hardwired for connection and we suffer without close relatedness with others. Buber’s I-Thou philosophy denotes the importance of “otherness” as the essence of I-Thou relationship in that two different individuals are both separate from and connected to each other at the same time. The hyphen serves as both the connector and the distance between them. Losing or lessening our “I” for another, or being subsumed into an “other” by being the same as them goes against relationship. Difference, by virtue of being oneself fully in-relation with another distinct someone else who is fully themselves is the central factor for connection and the means of the most fulfilling intimate relationships. Difference invites us to work at relating. This requires vulnerability, respect for otherness, understanding, acceptance, and communion. It is the antithesis of domination, control, hierarchies, segregation and marginalisation. Difference, instead of being the enemy of a system, is therefore its gift and in this way dyslexic individuals are bringing profound positive shifts to our world.

The emerging concept of neurodiversity invites us to view dyslexia differently. As Silberman (2015) wrote about autism, “the cure for the most disabling aspects of autism will never be found in a pill, but in supportive communities” (p. 17), the same goes for dyslexia. We would

do well to regard these conditions as variations of mind and strengths that contribute to the evolution of our world and as forces that are bringing about social change and better relationality. Dyslexia in intimate relationships can cause disunion and disconnection, especially where there is little understanding. Much of this is due to cultural norms and expectations. However dyslexia invites us to embrace difference. This grows our ability to engage, respect, share vulnerably, and encounter others as equals and thereby builds a more caring world.

One of the most influential “communities” is the intimate relationship. This can be a place of connectivity where dyslexia can call partners towards the acceptance of difference. Most couples in this study embraced each other’s “otherness” and the strength of their relational bond supported them despite the challenges dyslexia presented. As well, the process of participating in this research, and the confirmation of the diagnosis of dyslexia, was for many dyslexic participants freeing. As Mary said, “getting diagnosed at 38 has been like being let out of prison. I’d love a t-shirt with ‘dyslexic and proud’ [on it] and actually spell dyslexic wrong! I’ve spent years avoiding it where now I can just be ‘oh, don’t worry I’m dyslexic! Be proud of it!’”

For these couples dyslexia is inviting I-Thou relationship and the differences between partners are the very means by which the work of relating can be practiced. Just as dyslexia, by way of cognitive difference, is inviting change in our world, so too are couples who navigate these seas of relational difference well. Like the oceans that meet at Cape Agulhas, these relationships, too, can be alive and rich.

REFERENCES

- American Psychiatric Association (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Arlington, VA: APA.
- Baker, S. F., & Ireland, J. L. (2007). The link between dyslexic traits, executive functioning, impulsivity and social self-esteem among an offender and non-offender sample. *International Journal of Law and Psychiatry*, 30, 492-503.
- Berresford, L. (2012). *Complexities of dyslexia* [lecture notes]. Auckland, New Zealand: SPELD Professional Development Workshop.
- Bodenmann, G., Ledermann, T., & Bradbury, T. N. (2007). Stress, sex, and satisfaction in marriage. *Personal Relationships*, 14, 551-569.
- Boder, E. (1973). Developmental dyslexia: A diagnostic approach based on three atypical reading-spelling patterns. *Dev Med Child Neurol*, 15, 663-687.
- Brennan, M., & Bally, S. J. (2007). Psychosocial adaptations to dual sensory loss in middle and late adulthood. *Trends in Amplification*, 11(4), 281-300.
- Briere, J. (2015). *The pain paradox: Engagement, acceptance and processing in a new paradigm for trauma therapy* [Lecture notes]. Auckland, New Zealand: Doctors for Sexual Abuse Care.
- Brosnan, M., Demetre, J., Hamill, S., Robson, K., Shepherd, H., & Cody, G. (2002). Executive functioning in adults and children with developmental dyslexia. *Neuropsychologia*, 40, 2144-2155.
- Brown. B. (2008). *I thought it was just me (but it isn't): Telling the truth about perfectionism, inadequacy and power*. New York, NY: Gotham Books.
- Brown, B. (2012). *Daring greatly: How the courage to be vulnerable transforms the way we live, love, parent, and lead*. New York, NY: Gotham Books.

- Brown, B. (2015). *Rising strong*. London, England: Vermilion.
- Bryan, T., Burstein, K., & Ergul, C. (2004). The social-emotional side of learning disabilities: A science-based presentation of the state of the art. *Learning Disability Quarterly*, 27, 45-51.
- Buber, M. (1958). *I and Thou*. Edinburgh, Scotland: T & T Clark.
- Buchanan, M., & Wolf, J. S. (1986). A comprehensive study of learning disabled adults. *Journal of Learning Disabilities*, 19(1), 34-38.
- Burden, R. (2008). Is dyslexia necessarily associated with negative feelings of self-worth? A review and implications for future research. *Dyslexia*, 14, 188-196.
- Carawan, L. W., Nalavany, B. A., & Jenkins, C. (2015). Emotional experience with dyslexia and self-esteem: The protective role of perceived family support in late adulthood. *Aging & Mental Health*, 1-11.
- Cooper-Kahn, J., & Dietzel, L. (2008). *Late, lost, and unprepared: A parents' guide to helping children with executive functioning*. Bethesda, MD: Woodbine House.
- De Martino, S., Espesser, R., Rey, V., & Habib, M. (2001). The 'temporal processing deficit' hypothesis in dyslexia: New experimental evidence. *Tennet XI*, 104-108.
- Dudley-Marling, C. (2004). The social construction of learning disabilities. *Journal of Learning Disabilities*, 37(6), 482-489.
- Dunkel-Schetter, C., Folkman, S., & Lazarus, R. S. (1987). Correlates of social support receipt. *Journal of Personality and Social Psychology*, 53(1), 71-80.
- Dyslexia Foundation of New Zealand. (2006). Retrieved from <http://www.dyslexiafoundation.org.nz/info.html>

- Folkman, S., & Lazarus, R. S. (1988). The relationship between coping and emotion: Implications for theory and research. *Soc. Sci. Med*, 26(3), 309-317.
- Gerber, P.J. (2012). The impact of learning disabilities on adulthood: A review of the evidence-based literature for research and practice in adult education. *Journal of Learning Disabilities*, 45(1), 31-46.
- Gerber, P. J., & Reiff, H. B. (1991). *Speaking for themselves: Ethnographic interviews of adults with learning disabilities*. Ann Arbor, MI: University of Michigan Press.
- Gerber, P. J., Schnieders, C. A., Paradise, L. V., Reiff, H. B., Ginsberg, R. J., & Popp, P. A. (1990). Persisting problems of adults with learning disabilities: Self-reported comparisons from their school-age and adult years. *Journal of Learning Disabilities*, 23(9), 570-573.
- Gioia, G., Isquith, P. K., Kenworthy, L., & Barton, R. M. (2002). Profiles of everyday executive function in acquired and developmental disorders. *Child Neuropsychology*, 8(2), 121-137.
- Goldberg, R. J., Higgins, E. L., Raskind, M. H., & Herman, K. L. (2003). Predictors of success in individuals with learning disabilities: A qualitative analysis of a 20-year longitudinal study. *Learning Disabilities Research & Practice*, 18, 222-236.
- Goleman, D. (1996). *Emotional intelligence: Why it can matter more than IQ*. London, England: Bloomsbury Publishing.
- Gottman, J. M. (1994). *What predicts divorce? The relationship between marital processes and marital outcomes*. Hillsdale, NJ: Laurence Erlbaum Associates.
- Gottman, J. M., & Levenson, R. W. (1992). Marital processes predictive of later dissolution: Behaviour, Physiology, and Health. *Journal of Personality and Social Psychology*, 63(2), 221-233.

- Greenberg, L. S., & Johnson, S. M. (1988). *Emotionally focused therapy for couples*. New York, NY: The Guildford Press.
- Greenspan, M. (2003). *Healing through the dark emotions: The wisdom of grief, fear and despair*. Boston, MA: Shambhala Publications.
- Groenewald, T. (2004). A phenomenological research design illustrated. *International Journal of Qualitative Methods*, 3(1), 1-26.
- Habib, M. (2000). The neurological basis of developmental dyslexia: An overview and working hypothesis. *Brain*, 123, 2373-2399.
- Hallberg, L. R. M., & Barrenas, M. (1993). Living with a male with noise-induced hearing loss: Experiences from the perspective of spouses. *British Journal of Audiology*, 27, 255-261.
- Hammond, L. (1996). *When bright kids fail. How to help children overcome specific learning difficulties*. Sydney, Australia: Simon & Schuster.
- Hellendoorn, J., & Ruijsenaars, W. (2000). Personal experiences and adjustment of Dutch adults with dyslexia. *Remedial and Special Education*, 21(4), 227-239.
- Hendrix, H. (2008). *Getting the love you want: A guide for couples*. New York, NY: St. Martins Press.
- Hesse-Biber, S. H., & Leavy, P. (2011). *The practice of qualitative research* (2nd ed.). Thousand Oaks, CA: Sage.
- Hetu, R., Jones, L., & Getty, L. (1993). The impact of acquired hearing impairment on intimate relationships: Implications for rehabilitation. *Audiology*, 32, 363-381.
- Holman, T. B. (Ed.). (2001). *Premarital prediction of marital quality or breakup: Research, theory, and practice*. New York, NY: Kluwer Academic/Plenum.

Inteligencia123. (2014). Retrieved from

<http://inteligencia.uno/partes-del-cerebro-y-sus-funcione/>

Kavale, K. A., & Forness, S. R. (1996). Social skill deficits and learning disabilities: A meta-analysis. *Journal of Learning Disabilities*, 29(3), 226-237.

King, L. (2010). *'Dyslexia dismantled'*. Auckland, New Zealand: Author.

King, L. (2016). *Dyslexia – In a nutshell*. Retrieved from
<http://dyslexiadismantled.com/article-in-a-nutshell>

Knapp, D. J., Sandberg, J. G., Novak, J. & Larson, J. H. (2015). The mediating role of attachment behaviours on the relationship between family-of-origin and couple communication: Implications for couples therapy. *Journal of Couple & Relationship Therapy*, 14, 17-38.

Ledermann, T., Bodenmann, G., Rudaz, M., & Bradbury, T. N. (2010). Stress, communication, and marital quality in couples. *Family Relations*, 59(2), 195-206.

Lenkowsky, L. K., & Saposnek, D. T. (1978). Family consequences of parental dyslexia. *Journal of Learning Disabilities*, 11(1), 59-65.

Lerner, H. (2004). *The dance of anger: A guide to changing the pattern of intimate relationships*. London, England: Element.

Lightstone, J. (2013). *Understanding and working with complex trauma tutorial* [Lecture notes]. Auckland, New Zealand: Auckland PSI Institute.

Llinas, R. (1993). Is dyslexia a dyschronia? *Annals New York Academy of Sciences*, 683, 48-56.

MacKay, N. (2006). *Removing dyslexia as a barrier to achievement* (2nd ed.). Wakefield, England: SEN Marketing.

- McLeod, J. (2003). *Doing counselling research* (2nd ed.). London, England: Sage.
- McLoughlin, D., Leather, C., & Stringer, P. (2002). *The adult dyslexic: Interventions and outcomes*. London, England: Whurr.
- McNulty, M. A. (2003). Dyslexia and the life course. *Journal of Learning Disabilities*, 36(4), 363-381.
- McWilliams, J. (2012). Finding my penis in the counselling room: From disempowerment to self-determination and agency. *New Zealand Journal of Counselling*, 32(2), 1-11.
- Morrison, G. M., & Cosden, M. A. (1997). Risk, resilience, and adjustment of individuals with learning disabilities. *Learning Disability Quarterly*, 20(1), 43-60.
- Morton, M. (2006). Disabling research? In C. Mutch (Ed.), *Challenging the notion of "other": Reframing research in the Aotearoa New Zealand context* (pp. 29-44). Wellington, New Zealand: NZCER Press.
- Moustakas, C. (1994). *Phenomenological research methods*. Thousand Oaks, CA: Sage.
- Nalavany, B. A., & Carawan, L. W. (2012). Perceived family support and self-esteem: The mediational role of emotional experience in adults with dyslexia. *Dyslexia*, 18, 58-74.
- Nalavany, B. A., Carawan, L. W., & Brown, L. J. (2011). Considering the role of traditional and specialist schools: do school experiences impact the emotional well-being and self-esteem of adults with dyslexia? *British Journal of Special Education*, 38(4), 191-200.
- Nalavany, B. A., Carawan, L. W., & Rennick, R. A. (2011). Psychosocial experiences associated with confirmed and self-identified dyslexia: A participant-driven concept map of adult perspectives. *Journal of Learning Disabilities*, 44(1), 63-79.
- Nelson, J. M., & Harwood, H. (2010). Learning disabilities and anxiety: A meta-analysis. *Journal of Learning Disabilities*, 44(1), 3-17.

- Orenstein, M. (2000). *Smart, but stuck: What every therapist needs to know about learning disabilities and imprisoned intelligence*. New York, NY: Haworth.
- Papalia, D. E., Olds, S. W., & Feldman, R. D. (2001). *Human development* (8th ed.). New York, NY: McGraw-Hill.
- Peck, B. B., & Stackhouse, T. W. (1973). Reading problems and family dynamics. *Journal of Learning Disabilities*, 6(7), 43-48.
- Pennington, B. F., van Orden, G. C., Smith, S. D., Green, P. A., & Haith, M. M. (1990). Phonological processing skills and deficits in adult dyslexics. *Society for Research in Child Development*, 61, 1753-1778.
- Polloway, E. A., Schewel, R., & Patton, J. R. (1992). Learning disabilities in adulthood: Personal perspectives. *Journal of Learning Disabilities*, 25(8), 520-522.
- Rourke, B. P., & Fuerst, D. E. (1996). Psychological dimensions of learning disability subtypes. *Assessment*, 3(3), 277-290.
- Sang, B. E. (1988). On being female and dyslexic. *Women & Therapy*, 7(4), 15-34.
- Saunders, W. A., & Barker, M. G. (1972). Dyslexia as cause of psychiatric disorder in adults. *The British Medical Journal*, 4(5843), 759-761.
- Schnarch, D. (1997). *Passionate marriage: Love, sex, and intimacy in emotionally committed relationships*. New York, NY: Owl Books.
- Schnarch, D. (2009). *Intimacy and desire*. New York, NY: Beaufort Books.
- Shaywitz, S. E. (1998). Current concepts: Dyslexia. *The New England Journal of Medicine*, 338(5), 307-312.
- Shaywitz, S. E. (2003). *Overcoming dyslexia*. New York, NY: Vintage Books.

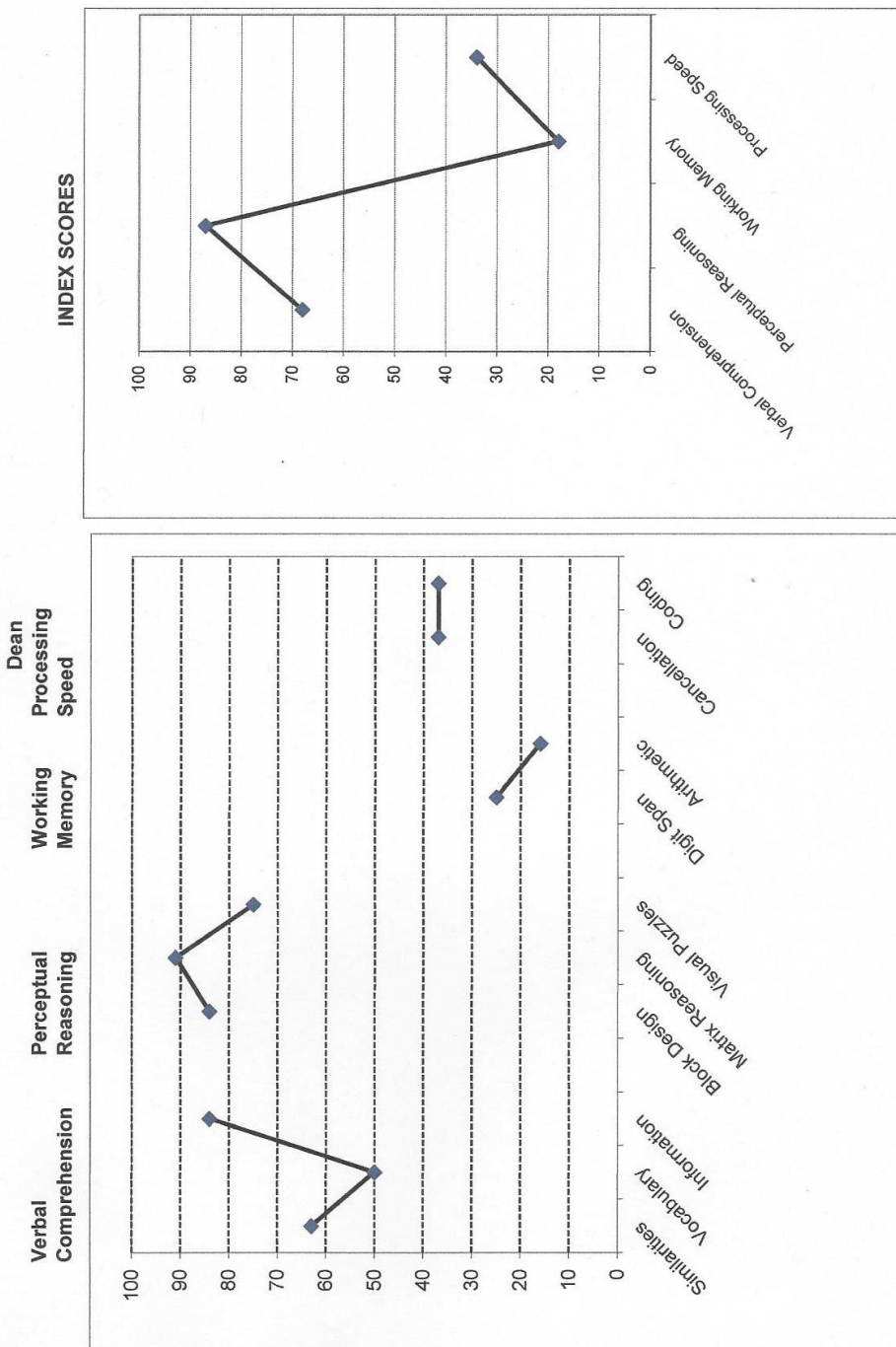
- Shaywitz, B. A., Shaywitz, S. E., Blachman, B. A., Pugh, K. R., Fulbright, R. K., Skudlarski, P., Mencl, W. E., Constable, R. T., Holahan, J. M., Marchione, K. E., Fletcher, J. M., Lyon, G. R., & Gore, J. C. (2004). Development of left occipitotemporal systems for skilled reading in children after a phonologically-based intervention. *BIOL Psychiatry*, 55, 926-933.
- Silberman, S. (2015). *Neurotribes: The legacy of autism and how to think smarter about people who think differently*. NSW, Australia: Allen & Unwin.
- Spreen, O. (1989). The relationship between learning disability, emotional disorders, and neuropsychology: Some results and observations. *Journal of Clinical and Experimental Neuropsychology*, 11, 117-140.
- Swanson, H. L., & Ashbaker, M. H. (2000). Working memory, short-term memory, speech rate, word recognition and reading comprehension in learning disabled readers: Does the executive system have a role? *Intelligence*, 28, 1-30.
- Temple, E., Poldrack, R. A., Protopapas, A., Nagarajan, S., Salz, T., Tallal, P., Merzenich, M. M., & Gabrieli, J. D. E. (2000). Disruption of the neural response to rapid acoustic stimuli in dyslexia: Evidence from functional MRI. *Proc. Natl. Acad. Sci.* 97(25), 13907-13912.
- Torgesen, J. K., Wagner, R. K., & Rashotte, C. A. (1994). Longitudinal studies of phonological processing and reading. *Journal of Learning Disabilities*, 27, 276-286.
- Valdois, S., Gerard, C., Vanault, P., Dugas M. (1995). Peripheral developmental dyslexia: a visual attentional account? *Cogn Neuropsychol*, 12, 31-67.
- Vasic, N., Lohr, C., Steinbrink, C., Martin, C., & Wolf, R. C. (2007). Neural correlates of working memory performance in adolescents and young adults with dyslexia. *Neuropsychologia*, 46, 640-648.
- Vogel, S. A., & Forness, S. R. (1992). Social functioning in adults with learning disabilities. *Psychology and Behavioural Sciences Collection*, 21(3), 418-431.

- Waldie, K. E., & Hausmann, M. (2010). Right fronto-parietal dysfunction in children with ADHD and developmental dyslexia as determined by line bisection judgments. *Neuropsychologia*, 48, 3650-3656.
- Waldie, K. E., Haigh, C. E., Badzakova-Trajkov, G., Buckley, J., & Kirk, I. J. (2013). Reading the wrong way with the right hemisphere. *Brain Science* 3, 1060-1075.
- Wechsler, D. (2008). *Wechsler adult intelligence scale* (4th ed.). San Antonio, TX: NCS Pearson.
- Werner, E. E. (1993). Risk and resilience in individuals with learning disabilities: Lessons learned from the Kauai longitudinal study. *Learning Disabilities Research and Practice*, 8, 28-34.
- Wikipedia. (2016). *Cape Agulhas*. Retrieved from https://en.wikipedia.org/wiki/Cape_Agulhas
- Yoo, H., Bartle-Haring, S., Day, R. D., & Gangamma, R. (2014). Couple communication, emotional and sexual intimacy, and relationship satisfaction. *Journal of Sex & Marital Therapy*, 40(4), 275-293.

APPENDIX A

WAIS-IV Graph – Dean

WAIS IV PERCENTILE SCORES



APPENDIX B

Drawing Talk

Drawing Talk is a method that facilitates communication and emotional expression between people. Though it is useful for most relationships, it is particularly helpful for those who live with dyslexia as it accesses the pictorial ability of the right hemisphere to communicate instead of relying as heavily on words. Drawing Talk slows the communication process down which affords dyslexic individuals the time to better process and articulate what they are wanting to say. It also slows the non-dyslexic parent, friend, or partner down allowing space in which to better understand the dyslexic individual they are talking with.

Drawing Talk is about talking via pictures. It allows verbal expression at the same time as drawing and so allows for better externalising of what is happening within an individual. It promotes understanding and connection where two divergent cognitive worlds collide. It exposes dynamics, helps with listening, records conversations, slows the process down, and enables better understanding and connection between people.

Dyslexic individuals can draw pictures on the page to express what they are wanting to say *while they are talking*. The page becomes the focus of attention rather than the person who is talking which helps with vulnerability and self-esteem issues. The page also becomes a memoir of the conversation as a natural recorder of the conversation which is important as with dyslexia details are often forgotten. Also, dyslexics often have an idea come into their mind and unless they express it immediately the “train of thought” may pass and they cannot recall what they were thinking. With Drawing Talk they can use the page to record the idea before losing it.

Drawing Talk involves sitting with a spouse (or friend, child, or parent) and drawing what is thought, felt, needed, and wanted. It can include the writing of words, or be simply pictorial. The general “rules” in Drawing Talk mean the person who is holding the pen speaks while others listen. Once finished they swap and the person who is next to speak first responds to the information that was drawn by the previous person and then they share their own process, and so forth. Emotions can be shared through drawings which helps dyslexic individuals when they are overwhelmed and consequently cannot find the words to speak. Drawings build upon drawings until a mutual understanding occurs.

My experience is that most individuals can draw what they are thinking and feeling effectively, though there will be a few who cannot process this way. This method is best taught via workshops.

APPENDIX C

Participant Information Sheet

School of Counselling, Human Services and Social Work
Faculty of Education
University of Auckland
Private Bag 92601
Symonds Street
Auckland 1150

PARTICIPANT INFORMATION SHEET

Project Title: **Dyslexia and intimate relationships: Disconnection, disunion or a call to embrace difference?**

Researcher: Annajane Kirsten McWilliams (Jane)



Hi! My name is Jane McWilliams.

I am a student at the University of Auckland, in the School of Counselling, Human Services and Social Work. I am conducting a research project as part of completing a Master of Counselling degree.

I have worked as a counsellor in my own practice for 14 years. Currently I am specialising in working with people who have dyslexia and other learning difficulties. I mostly work with teenagers and adults.



My research project is about dyslexia and intimate relationships. I am studying partners who have been married for at least one year, or who have lived together for at least one year, to see if dyslexia affects how they communicate, or how they relate to one another. For this study I will be talking to couples where one person has dyslexia and the other partner does not have dyslexia. For validity, couples must be European NZ/Pakeha and heterosexual.

***You are invited to take part in
this research***



I have observed that many people think that dyslexia is simply a problem with reading and writing. However recent research has shown that dyslexia affects many more functions in life. Researchers have found that some people with dyslexia struggle with communication, with organising themselves, with focusing on things, and some struggle emotionally, and socially, and with relationships. Researchers have also found that people with dyslexia have amazing strengths and gifts. Einstein was dyslexic, and so is Richard Branson of Virgin Airlines.

There has been quite a lot of research done on dyslexia and education, and dyslexia and reading processes in the brain. There has not been much research done on adults, or the emotional experiences of people with dyslexia, and nothing has been done about whether dyslexia affects intimate relationships.

Lots of research has been done about people with dyslexia, but there are not many studies that give people with dyslexia a chance to say what it is like for them to have dyslexia.



I'm inviting you to speak about your experiences in your relationship.

I'm also inviting your partner to talk about their experiences of the relationship.

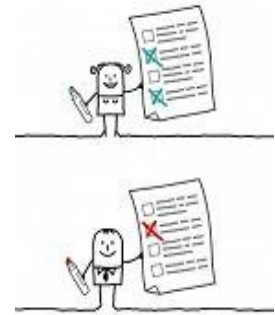
And I'd like you to talk with me together as a couple.

Project Procedures:

- ✓ Taking part in this research will mean you and your partner will both have an interview separately with me. This will take one hour each.
- ✓ It will also involve having an interview together as a couple with me. This will take an hour and a half.
- ✓ These interviews will be confidential, and they will be audio recorded.
- ✓ You will be given a written copy of your individual recording to edit if you wish. You will be given a week to do this. Recordings from couple's interviews may not be edited however as altering one person's data could affect, or cancel out the other person's data.
- ✓ You will also be asked to have a follow up interview if any data needs clarifying. This will take half an hour. We will also meet when the research is completed, to discuss the findings and close our time together.
- ✓ The interviews will be transcribed by me, or a professional transcriber who will sign an agreement to say she will keep everything confidential.

If you would like to participate in this research you need to have had a formal assessment done that outlines you have dyslexia (either as a child, or as an adult).

You may also participate if you believe you have dyslexia (perhaps because your child has been formally assessed and you can see the same characteristics in yourself). A question sheet will be provided for you to self-check this, and the presence of dyslexia will need to be confirmed by an assessor.

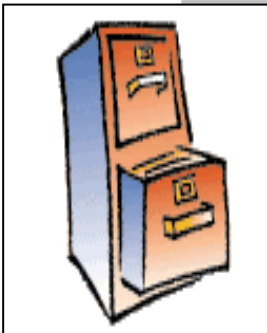


You will also be asked to fill out a confidential temperament questionnaire as part of the research. This will outline your unique temperament traits and help me to understand how you and your partner may relate.

These are processed on a secure on-line site, under a false name, and will be removed from the site as soon as the report has been printed.

UTMOST CARE WILL BE TAKEN TO ENSURE CONFIDENTIALITY

- You will be able to choose a different name for this project so that personal details are not able to be identified.
- Your information will only be seen by me, and my research supervisor.
- While the recordings and transcripts are in my possession they will be stored in my office in a locked filing cabinet.
- The consent forms and other formal details will be stored securely in a different place to the research data for six years.
- Data stored on my computer will be password protected.
- When the transcripts are complete the recordings will be destroyed.
- When the research is complete all data will be stored securely in my office for a period of six years. If I need to use the data after this date I will contact you for permission. If not, they will be destroyed.
- This study will be used to complete my Research Portfolio as part of my Master of Counselling degree. It may also be used for a journal article, which I hope will be published.



Your confidentiality for the written research report:

- ✓ *I will work according to the principles of the University of Auckland regarding research practices.*
- ✓ *Any personal information will be disguised or omitted from the report.*
- ✓ *You will be given a copy of my findings via written report, or if you prefer an audio recording, or have it explained in person.*
- ✓ *I may use the findings from the research, and the temperament questionnaires, in journal articles, conference presentations, or newsletters.*



If anything arises during interviewing that means that a participant's life, or health, or the life or health of any other person, is at serious risk, I am ethically bound to breach confidentiality and report this to a third party so that the person(s) can receive assistance.

It is possible that you may have strong feelings that arise during the interviews. This is normal when difficult or sensitive issues are being shared.

If you feel overwhelmed during our interviews we will stop and calm things down for you. I can help you to settle if feelings have been stirred for you.

If feelings are triggered and you feel you, and/or your partner may need it, I have arranged for counsellors who understand dyslexia, and who are trained in individual and couples counselling, to be available for you.

If you require counselling I will pay the costs for the first session for you. After this, should you wish to continue with counselling, costs will be payable by you at the counsellor's usual rate.

Participation in this research is voluntary. If you agree to take part you will be asked to sign a consent form agreeing to the details outlined on this information form.



You have the right to withdraw from the project at any time. You have the right to withdraw your individual interview data up to two weeks after your interviews. It will not be possible however to withdraw data from the couple's interview as removing one person's data will affect or cancel out those of the other person.

Thank you for the time you have taken to consider being a participant in this project. If you choose to participate please:

- ✓ ***sign the enclosed consent form.***
- ✓ ***contact me by email or phone to arrange a time for our interviews.***
- ✓ ***post back the signed consent form, or bring it to the interview.***

If you would like to know more about the research before taking part, or if you would like to meet me in person prior to making a commitment, or to go over this form, please do not hesitate to contact me.

I look forward to working with you!

Jane



My details are:

Jane McWilliams

Email: amcw425@auckland.ac.nz

Phone: 021 0711105

My Supervisor is:

Dr Margaret Nelson Agee

School of Counselling, Human Services and Social Work

Faculty of Education

The University of Auckland

Private Bag 92601, Symonds Street,
Auckland, 1150

Phone: 373-7599 ext. 87852

Email: m.agee@auckland.ac.nz

The Head of School is:

Christa Fouché

School of Counselling, Human Services and Social Work

Faculty of Education

The University of Auckland

Private Bag 92601, Symonds Street,
Auckland, 1150

Phone: 623-8899 ext. 48648

Email: c.fouche@auckland.ac.nz

For any queries regarding ethical concerns you may contact:

The Chair,

The University of Auckland Human Participants Ethics Committee

The University of Auckland Research Office

Private Bag 92019

Auckland, 1142

Phone: 373-7599 ext. 87830 / 83761

Email: humanethics@auckland.ac.nz

APPENDIX D

Consent Form (Participant)

School of Counselling, Human Services and Social Work
Faculty of Education
University of Auckland
Private Bag 92601
Symonds Street
Auckland 1150

CONSENT FORM **(Participant)**

THIS FORM WILL BE HELD FOR A PERIOD OF SIX YEARS

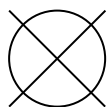
Project Title: Dyslexia and intimate relationships: Disconnection, disunion or a call to embrace difference?

Researcher: Jane McWilliams

- ✓ I have read the Participant Information Sheet.
- ✓ I have understood the nature of the research and why I have been selected.
- ✓ I have had the opportunity to ask questions and have had them answered to my satisfaction.



I agree to take part in this research.



I understand that I am free to withdraw my participation at any time and to withdraw any data from individual interviews that are traceable to me up until two weeks after my interview. I understand it is not possible to withdraw data from the couple's interview.



I agree to be audio recorded and understand that my audio files will not be returned to me. I understand that I will be given a week to edit my individual recording should I wish to do this. I understand that my audio recordings will be destroyed once they have been transcribed and analysed.



I understand that my confidentiality will be maintained, and that every attempt will be made to ensure my anonymity, but that this cannot be fully guaranteed. I will choose, or be given, a false name so that my name will not be used in the research report, or any future writing.



I understand that a third party, who has signed a confidentiality agreement, may transcribe some of the recordings.



I understand that data will be kept for six years after which, if it is required for further research, the researcher will seek my permission, or it will be destroyed by shredding.



I understand that the results of this research may be used in the researcher's Research Portfolio towards a Master of Counselling degree, and in publications and presentations.



I understand that in interviews I will be discussing sensitive topics which may cause upset feelings. I understand that counsellors are available for me, and/or my partner, to talk with should I/we need it.



I understand that the researcher is ethically bound to breach confidentiality should there be any risk to the life, or health, of any individual.



I **do not** wish to receive a summary of the findings (circle).

I **do** wish to receive a summary of the findings (circle).

I would prefer this to be sent to me via:

Email to _____,

or Post to _____

_____.

Name: _____

Signature: _____ Date: _____

APPENDIX E

Demographic Information Form

School of Counselling, Human Services and Social Work
Faculty of Education
University of Auckland
Private Bag 92601
Symonds Street
Auckland 1150

DEMOGRAPHIC INFORMATION FORM
(Participants)

Project Title: Dyslexia and intimate relationships: Disconnection, disunion, or
a call to embrace difference?

Researcher: Jane McWilliams

Surname:.....

First names:.....

Pseudonym (made up name) you would like to use:.....

Email:.....

Address:.....

.....

Phone:.....(day).....(night).....(mob)

Age:.....

Ethnicity:.....

Gender: male / female

Have you had an assessment for dyslexia done before? yes / no

If so, is the report from this assessment attached? yes / no

APPROVED BY THE UNIVERSITY OF AUCKLAND HUMAN PARTICIPANTS ETHICS COMMITTEE ON 25
FEBRUARY 2014 FOR (3) YEARS. REFERENCE NUMBER 010778.

APPENDIX F

Interview Questions

KEY INTERVIEW QUESTIONS

(participants with dyslexia)

I am interested in finding out whether dyslexia affects communication and relational connection between partners in an intimate relationship, and if so, in what ways these are affected.

1. What is it like for you to have dyslexia?
2. In using the word “communication” in these next questions I mean how partners share their thoughts, feelings, needs, and desires with each other.

What are your experiences of communication with your partner?

3. Is there anything you personally struggle with when communicating? If so, can you tell me about that?
4. In using the word “connection” in these next questions I mean each partner’s experience of the relationship as being close, safe, in-union, and providing a sense of well-being.

What are your personal experiences of this in your relationship?

5. What do you think gets in the way of you being able to connect with your partner, if anything?
6. Do you think dyslexia affects you as a partner in this relationship? If so, how?
7. Do you think dyslexia affects your partner? If so, how?
8. What do you think would improve your relationship in these areas?

APPROVED BY THE UNIVERSITY OF AUCKLAND HUMAN PARTICIPANTS ETHICS COMMITTEE ON 25 FEBRUARY 2014 FOR (3) YEARS. REFERENCE NUMBER 010778.

KEY INTERVIEW QUESTIONS

(“non-dyslexic” participants)

I am interested in finding out whether dyslexia affects communication and relational connection between partners in an intimate relationship, and if so, in what ways these are affected.

1. What is it like for you to be a partner of someone who has dyslexia?
2. In using the word “communication” in these next questions I mean how partners share their thoughts, feelings, needs, and desires with each other.

What are your experiences of communication with your partner?

3. Is there anything you personally struggle with when communicating? If so, can you tell me about that?
4. In using the word “connection” in these next questions I mean each partner’s experience of the relationship as being close, safe, in-union, and providing a sense of well-being.

What are your personal experiences of this in your relationship?

5. What do you think gets in the way of you being able to connect with your partner, if anything?
6. Do you think dyslexia affects you as a partner in this relationship? If so, how?
7. Do you think dyslexia affects your partner? If so, how?
8. What do you think would improve your relationship in these areas?

KEY INTERVIEW QUESTIONS

(Couples)

I am interested in finding out whether dyslexia affects communication and relational connection between partners in an intimate relationship, and if so, in what ways these are affected.

1. Can you tell me a little about your relationship in general?
2. In using the word “communication” in these next questions I mean how partners share their thoughts, feelings, needs, and desires with each other.

How effective do you think communication is between you?
3. In what ways do you communicate well?
4. What things do you struggle with when communicating?
5. In using the word “connection” in these next questions I mean each partner’s experience of the relationship as being close, safe, in-union, and providing a sense of well-being.

What are your experiences of connection in your relationship?
6. What things, if any, get in the way of connecting?
7. Do you think dyslexia affects your relationship in any way? If so, how?
8. What do you think would improve your relationship in these areas?

APPENDIX G

Questions for non-dyslexic partners

QUESTIONS TO CLARIFY ABSENCE OF DYSLEXIA

(Non-dyslexic partner)

1. Do you have problems with spelling, writing, reading, or maths?
YES / NO Extra comments?.....
2. Do you know spelling and maths one day but have forgotten it the next?
YES / NO Extra comments?.....
3. Do you talk about your ideas well but can't write them down?
YES / NO Extra comments?.....
4. Do you say sounds in words in the wrong order: e.g., aminale (animal), hostile (hospital)?
YES / NO Extra comments?.....
5. Are you untidy, disorganised, and often late?
YES / NO Extra comments?.....
6. Do you have difficulty copying work?
YES / NO Extra comments?.....
7. Do you have untidy writing that is hard to read?
YES / NO Extra comments?.....
8. Do you have difficulty remembering names of things in order: e.g., letters of the alphabet, days of the week?
YES / NO Extra comments?.....
9. Do you have difficulty telling time?
YES / NO Extra comments?.....

10. Do you have difficulty learning times tables?
YES / NO Extra comments?.....
11. Do you have difficulty with punctuation, grammar, and maths symbols?
YES / NO Extra comments?.....
12. Do you have difficulty concentrating and are easily distracted?
YES / NO Extra comments?.....
13. Do you have trouble in telling left from right, up from down, front from back?
YES / NO Extra comments?.....
14. Do you think you have average or above average intelligence?
YES / NO Extra comments?.....
15. Do you find it difficult to listen, especially when there is other noise in the same area?
YES / NO Extra comments?.....
16. Do you find you don't cope with sudden changes of activity?
YES / NO Extra comments?.....
17. Do you find you are not good at taking down a message?
YES / NO Extra comments?.....
18. Do you find you are not good at following instructions or rules?
YES / NO Extra comments?.....
19. Do you dislike reading aloud?
YES / NO Extra comments?.....
20. Do you over-react in some situations?
YES / NO Extra comments?.....

21. Do you do well in some things, but unexpectedly poorly in others?
YES / NO Extra comments?.....

List taken from SPELD NZ

APPENDIX H

Transcriber Confidentiality Agreement

School of Counselling, Human Services and Social Work
Faculty of Education
University of Auckland
Private Bag 92601
Symonds Street
Auckland 1150

TRANSCRIBER CONFIDENTIALITY AGREEMENT

Project Title: Dyslexia and Intimate Relationships: Disconnection,
disunion, or a call to embrace difference?

Researcher: Jane McWilliams

Transcriber: Trina Jones, Purple Giraffe, 021 987-949
www.purplegiraffe.co.nz
trina@purplegiraffe.co.nz

I agree to transcribe the audio recordings for the above research project. I understand that the information contained within them is confidential and must not be disclosed to, or discussed with, anyone other than the researcher and her supervisor.

Name:

Signature:

Date:

APPROVED BY THE UNIVERSITY OF AUCKLAND HUMAN PARTICIPANTS ETHICS COMMITTEE ON 25
FEBRUARY 2014 FOR (3) YEARS. REFERENCE NUMBER 010778.

School of Counselling, Human Services and Social Work
Faculty of Education
University of Auckland
Private Bag 92601
Symonds Street
Auckland 1150

TRANSCRIBER CONFIDENTIALITY AGREEMENT

Project Title: Dyslexia and Intimate Relationships: Disconnection,
disunion, or a call to embrace difference?

Researcher: Jane McWilliams

Transcriber: Ruby McClellan, 021 2656729
Ruby-lou@live.com

I agree to transcribe the audio recordings for the above research project. I understand that the information contained within them is confidential and must not be disclosed to, or discussed with, anyone other than the researcher and her supervisor.

Name:

Signature:

Date:

APPROVED BY THE UNIVERSITY OF AUCKLAND HUMAN PARTICIPANTS ETHICS COMMITTEE ON 25
FEBRUARY 2014 FOR (3) YEARS. REFERENCE NUMBER 010778.

APPENDIX I

Assessor Confidentiality Agreement

School of Counselling, Human Services and Social Work
Faculty of Education
University of Auckland
Private Bag 92601
Symonds Street
Auckland 1150

ASSESSOR CONFIDENTIALITY AGREEMENT

Project Title: Dyslexia and Intimate Relationships: Disconnection,
disunion, or a call to embrace difference?

Researcher: Jane McWilliams

Educational Psychologist:

Phone:

I agree to conduct the cognitive assessments using the WAIS-IV, for those participants who may have dyslexia, for the above research project. I understand that the information contained within them is confidential and must not be disclosed to, or discussed with, anyone other than the researcher and her supervisor, and my own supervisor.

Name:

Signature:

Date:

APPROVED BY THE UNIVERSITY OF AUCKLAND HUMAN PARTICIPANTS ETHICS COMMITTEE ON 25
FEBRUARY 2014 FOR (3) YEARS. REFERENCE NUMBER 010778.

APPENDIX J

Advertisement



Hi, my name is Jane McWilliams.

I am a student at the University of Auckland and I'm conducting a research project on dyslexia as part of my Master of Counselling degree.

I have worked as a counsellor for 14 years and I am currently specialising in working with people who have dyslexia.

My research project is about dyslexia and intimate relationships. I am studying partners who have been married, or living together, for at least one year, to see if dyslexia affects how they communicate and relate to one another.

I need couples where one of the partners only has been formally assessed, or self-confirms they have dyslexia, to be part of this research.

Couples must be European NZ/Pakeha and heterosexual.

**DO YOU, OR YOUR
PARTNER, HAVE
DYSLEXIA?**

**WOULD YOU LIKE TO BE
PART OF THIS RESEARCH?**

If you have been formally assessed as having dyslexia (either as a child, or as an adult), or if you believe you have dyslexia (because your child has been assessed as having dyslexia and you can see the same characteristics in yourself), you could be part of this research.

Any participants who believe they have dyslexia but have not had this formally assessed will need to have this confirmed.

Taking part in this research will mean you and your partner will have an interview together with me. This will take one and a half hours. It will also involve each of you having an interview separately with me. This will take an hour each.

All of the research will be treated confidentially.



If you and your partner would like to be part of this project please give me a call or send me an email. Feel free to take one of my cards.....

Jane McWilliams

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Mob: 021 0711105

Email: amcw425@aucklanduni.ac.nz



APPENDIX K

Temperament Questionnaire

ARNO PROFILE SYSTEM

<p>For each statement below, decide which of the following answers best applies to you. Place the number of the answer in the box at the left of the statement. Please be as honest as you can.</p> <p>1. never 2. rarely 3. occasionally 4. sometimes 5. often 6. usually</p> <p><input type="checkbox"/> 1. I try to be with people. <input type="checkbox"/> 9. I try to include other people in my plans.</p> <p><input type="checkbox"/> 2. I let other people decide what to do. <input type="checkbox"/> 10. I let other people control my actions.</p> <p><input type="checkbox"/> 3. I join social groups. <input type="checkbox"/> 11. I try to have people around me.</p> <p><input type="checkbox"/> 4. I try to have close relationships with people. <input type="checkbox"/> 12. I try to get close and personal with people.</p> <p><input type="checkbox"/> 5. I tend to join social organizations when I have an opportunity. <input type="checkbox"/> 13. When people are doing things together I tend to join them.</p> <p><input type="checkbox"/> 6. I let other people strongly influence my actions. <input type="checkbox"/> 14. I am easily led by people.</p> <p><input type="checkbox"/> 7. I try to be included in informal social activities. <input type="checkbox"/> 15. I try to avoid being alone.</p> <p><input type="checkbox"/> 8. I try to have close, personal relationships with people. <input type="checkbox"/> 16. I try to participate in group activities.</p>	<p>For each of the next group of statements, choose one of the following answers:</p> <p>1. nobody 2. one or two people 3. a few people 4. some people 5. many people 6. most people</p> <p><input type="checkbox"/> 28. I like people to invite me to things. <input type="checkbox"/> 35. I like people to act cool and distant toward me.</p> <p><input type="checkbox"/> 29. I like people to act close and personal with me. <input type="checkbox"/> 36. I try to have other people do things the way I want them done.</p> <p><input type="checkbox"/> 30. I try to influence strongly other people's actions. <input type="checkbox"/> 37. I like people to ask me to participate in their discussions.</p> <p><input type="checkbox"/> 31. I like people to invite me to join in their activities <input type="checkbox"/> 38. I like people to act friendly toward me.</p> <p><input type="checkbox"/> 32. I like people to act close toward me. <input type="checkbox"/> 39. I like people to invite me to participate in their activities.</p> <p><input type="checkbox"/> 33. I try to take charge of things when I am with people. <input type="checkbox"/> 40. I like people to act distant toward me.</p> <p><input type="checkbox"/> 34. I like people to include me in their activities.</p>
<p>For each of the next group of statements, choose one of the following answers:</p> <p>1. never 2. rarely 3. occasionally 4. sometimes 5. often 6. usually</p> <p><input type="checkbox"/> 41. I try to be the dominant person when I am with people. <input type="checkbox"/> 48. I like people to include me in their activities.</p> <p><input type="checkbox"/> 42. I like people to invite me to things. <input type="checkbox"/> 49. I like people to act close and personal with me.</p> <p><input type="checkbox"/> 43. I like people to act close toward me. <input type="checkbox"/> 50. I try to take charge of things when I'm with people.</p> <p><input type="checkbox"/> 44. I try to have other people do things I want done. <input type="checkbox"/> 51. I like people to invite me to participate in their activities.</p> <p><input type="checkbox"/> 45. I like people to invite me to join their activities. <input type="checkbox"/> 52. I like people to act distant toward me.</p> <p><input type="checkbox"/> 46. I like people to act cool and distant toward me. <input type="checkbox"/> 53. I try to have other people do things the way I want them done.</p> <p><input type="checkbox"/> 47. I try to influence strongly other people's actions. <input type="checkbox"/> 54. I take charge of things when I'm with people</p>	<p>For each of the next group of statements, choose one of the following answers:</p> <p>1. nobody 2. one or two people 3. a few people 4. some people 5. many people 6. most people</p> <p><input type="checkbox"/> 17. I try to be friendly to people. <input type="checkbox"/> 23. I try to get close and personal with people.</p> <p><input type="checkbox"/> 18. I let other people decide what to do. <input type="checkbox"/> 24. I let other people control my actions.</p> <p><input type="checkbox"/> 19. My personal relations with people are cool and distant. <input type="checkbox"/> 25. I act cool and distant with people.</p> <p><input type="checkbox"/> 20. I let other people take charge of things. <input type="checkbox"/> 26. I am easily led by people.</p> <p><input type="checkbox"/> 21. I try to have close relationships with people. <input type="checkbox"/> 27. I try to have close, personal relationships with people.</p> <p><input type="checkbox"/> 22. I let other people strongly influence my actions.</p>

Temperament Profiling

APPROVED BY THE UNIVERSITY OF AUCKLAND HUMAN PARTICIPANTS ETHICS COMMITTEE ON 25 FEBRUARY 2014 FOR (3) YEARS. REFERENCE NUMBER 010778.

APPENDIX L

Support Letter



Lynn Berresford

Registered Psychologist

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www.indigo.org.nz

20 October 2013

University of Auckland Human Participants Ethics Committee
The University of Auckland Research Office
Private Bag 92019
Auckland, 1142

Re: MASTERS RESEARCH BEING UNDERTAKEN BY JANE MCWILLIAMS
“Dyslexia and intimate relationships: Disconnection, disunion or a call to embrace difference?”

I have known Jane for many years and worked with her as a colleague, and more recently as a Supervisor for her counselling practice and her work within the dyslexia community.

I respect her intelligence and enthusiasm for her studies and work enormously.

Some of the participants in this project will require cognitive and educational assessments to be conducted which may confirm the presence of dyslexia. This will be done by one of our educational psychologists at the Indigo Assessment and Counselling Centre at no cost to the participants themselves. Jane will be covering the costs for these assessments and we will be offering her a greatly reduced rate for processing these. All the assessment reports will be checked for accuracy personally by me.

The assessments will be carried out using the WAIS-IV (Wechsler Adult Intelligence Scale) and a Dyslexia Inventory/Educational Battery of Tests.

I am happy to display the advertisements for recruitment of participants at the Indigo Assessment and Counselling Centre.

I practice according to the principles of the Code of Ethics of the New Zealand Association of Counsellors (NZAC). All information shared with me throughout the duration of this project will be kept confidential, and any written information concerning participants will be kept in a locked cabinet in my office. A confidentiality agreement will be signed by the educational psychologist who completes the assessments.

As Jane's Supervisor, and a specialist in specific learning difficulties and dyslexia, I am happy to meet with her, and her Principal Investigator, Dr Margaret Agee, when needed throughout the duration of this project.

I am very excited that Jane has chosen to undertake this research on this very important aspect of Dyslexia.

Yours sincerely,



Lynn Berresford