TRANSLATING EVIDENCE INTO PRACTICE: STRATEGIES TO SUPPORT DYSLEXIC CHILDREN IN PRIMARY SCHOOL CLASSROOMS

Dyslexia is considered one of the most prominent educational needs across English medium, Irish medium and Gaeltacht schools in Ireland with teachers and school staff engaging in professional learning to upskill their teaching and learning approaches. The current article presents findings from a final year undergraduate research study on educators' perspectives on what strategies best support dyslexic children in primary schools in Ireland. Data were gathered via semi structured interviews, and a thematic data analysis approach was utilized. The findings note the importance of early intervention and the use of technology as key strategies to support the teaching and learning of dyslexic children. Another theme that emerged is the impact of lower self esteem on learning. These three findings echo previous studies, and the current research offers another Irish perspective to adds to the current literature.

Key words: dyslexia; dyslexic children; dyslexia in primary schools; supporting dyslexic children in primary schools; Ireland.

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For the purpose of the current article, the terminology used in this paper will be 'dyslexic child/ren' (National Disability Authority, NDA, 2022).

INTRODUCTION

Supporting dyslexic children in primary school classrooms is a matter of international (Ross, 2021; Skočić et al., 2022) and national concern (Monahan et al., 2025; Molyneaux and O'Brien, 2023) with a wide range of investigation into good practice approaches to support teaching and learning (Hadrami et al., 2022; Kelly and Phillips, 2022; Lorusso et al., 2021). Motivations driving this approach include commitment to inclusive education and a basic right of every child to have an accessible and full education (United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), 2006). Inclusive classrooms are at the heart of all education (Colum, 2023; Colum and Mac Ruairc, 2023; Colum and Cullen, 2025) for both academic and social development (Colum and McIntyre, 2019) and the current article presents findings from a final year undergraduate research study on educators' perspectives on what strategies best support dyslexic children in primary schools. In Ireland, research finds that teachers (Ó Cadhla, 2023) and classroom assistants (Monahan et al., 2025) are still learning about dyslexia and still need more supports when supporting dyslexic children in their classrooms, and in light of that, the current study adds to the growing body of research on dyslexia in the English medium (O'Sullivan, 2025), Irish medium and Gaeltacht contexts (Barnes, 2025; Craven and Bourke, 2025) in Ireland.

LITERATURE REVIEW

Dyslexia is estimated to be prevalent in approximately 10 per cent of the general population (British Dyslexia Association, 2025), and in Ireland, dyslexia is present in approximately 1 in 10 people occurring on a spectrum ranging from mild to severe (Dyslexia Ireland, 2025a). It is considered a genetic neurological condition with a strong inference that a dyslexic parent or parents has a 40-60% chance of their child being dyslexic (Hudson, High and Otaiba, 2011). While each child is appreciated for their uniqueness and ideologically seen within the "prism of difference" (Murphy, 2023), there is a common understanding that dyslexia is manifested through persistent difficulties with reading, spelling, phonological processing, working memory, orthographic skills, and processing speed, existing on a continuum with differing levels of severity (Carroll et al., 2025).

Historically, dyslexia was regarded as a special educational need (SEN), and more precisely, terms such as specific learning disabilities (SLD / SpLD), specific learning difficulties, learning disabilities, specific reading difficulties, reading disorder have been used when discussing dyslexia (Dyslexia Ireland, 2025a). Currently, in Ireland, there four special reading schools which are full-time primary schools for children with significant dyslexia, provided by the Department of Education and Youth (Dyslexia Ireland, 2025b). In these schools, there is a 9:1 pupil-teacher ratio, the children follow the primary school curriculum, with an emphasis on literacy attainment. The children are exempt from Gaeilge and usually attend for one to two years during primary level education and then return to their original school (Dyslexia Ireland, 2025b). There are also some reading classes designated for students with specific reading difficulties attached to primary schools, but mostly, dyslexic children are taught in mainstream schools. In terms of Irish medium schools in Ireland, dyslexia is considered to be the most common SEN in both primary (Nic Aindriú et al., 2020) and post-primary (Nic Aindriú, in press) settings.

Research suggests that teachers, both pre and post service, report some lack of confidence when teaching children with SEN (Hick et al, 2019; O'Reilly and Colum, 2021) and this is also the case when working with dyslexic children (Ó Cadhla, 2023). Common strategies include the need for collaboration across disciplines, for example in recent research espousing an occupational therapy and education collaboration (Collins and Colum, 2024). Other literature identify a plethora of supports for teachers, common among them is the importance of early intervention (Saleem and Ismail, 2025) and the use of technology (Almgren Back et al., 2024; Perelmutter et al., 2017; Wood et al., 2018; Paudel and Acharya, 2024; Yaacob et al., 2024) two approaches that were very strongly advocated for in the current research. The concern of the impact of dyslexia on a child's self-esteem is also common in the literature (Wilmot et al., 2023; Leitao et al., 2017; Novita, 2016) and again, is a finding of the current study.

METHODOLOGY

A convenience sample of six participants were selected for the research study but for the focus of this article, data will be used from three of the participants who are in the position of special education teachers in mainstream schools. The reason for this is that we focused in on three themes that were strongly referred to by three of the participants and felt that these themes would be of interest to the reader. For the research study, inclusion criteria meant that teachers needed to be in a Special education Teacher (SET) role as outlined by the Department of Education and Skills, (DES), 2017 and the Department of Education and Youth (DEY), 2024 guidelines, and for the purpose of this research, that they had experience of a minimum of five years working with children who identified as dyslexic. Exclusion criteria comprised teachers and /or SETs with no or little (under 5 years) experience working in the area. All participants received information sheets and consent forms and were given the opportunity to withdraw at any stage without harm to themselves. Ethical approval was sought, granted and in line with ethical procedures and GDPR guidelines from the third level institute associated with the research. Participants were allocated pseudonyms (see table 1) and all data was encrypted and stored on a password protected laptop.

Table one: Pseudonyms used for confidentiality and anonymity

Participant Pseudonym	Role	Years of experience working with dyslexic children
Jennifer	SET	9
Alice	SET	7
Olivia	SET	11

Data were gathered using semi-structured interviews, deemed suitable due to flexibility and opportunity to delve deeper into insights offered from the participants (Bell, 1999, 2005; Cohen, Manion and Morison, 2018). At the behest of the participants, interviews were carried out in their schools, outside of school hours. A high-quality Dictaphone was used to record the data, and it was transcribed verbatim by the principal investigator (PI). Data were analysed using the Braun and Clarke thematic analysis framework (Braun and Clarke, 2006), data were read and re-read to become familiar with its contents, initial codes were identified and then refined and named before producing the final report.

Limitations such as a small sample size and lack of the voice of the child (Kiely et al 2024) are acknowledged thus findings are not generalisable, but they give some insight into the views of a small cohort of educators to add to the current literature available on supporting dyslexic children in primary schools. It is also pertinent to note that data from the original sample of six is not used for this paper as we are reporting findings from three participants

whose data relate to a specific aspect of the study and specifically for this paper. We also acknowledge that this is undergraduate research that does not offer new perceptions, moreover, offers three themes that mirror national and international opinion and practice. As the PI has previous experience with working with dyslexic children, there is acknowledgment of potential bias, but this is alleviated by (1) acknowledgement and (2) ensuring no personal opinions are offered or impact any data collection or writing up processes.

FINDINGS

The findings are presented under the following themes: (1) The importance of early intervention for dyslexic children; (2) Self-esteem and Dyslexia and (3) Use of technology as a strategy to support the teaching and learning of dyslexic children

1. The importance of early intervention for dyslexic children

All participants (n=3) agreed that early intervention was / is crucial for teaching and learning opportunities for dyslexic children. The genesis of Jennifer's decision to become a teacher for the infant classes was based on her understanding of interventions at any early age for children who had literacy difficulties with a potential diagnosis of dyslexia. She felt that having early identification was "huge" and makes "a huge difference" on how the child will learn. Her hypothesis is that being able to provide targeted support at a young age, mainly "between the ages 0-7" makes learning a more accessible process for children who may be dyslexic. Jennifer believes in getting "the resources in early" and to "do as much as you can as early as you can" will benefit the child and most importantly foster a love of learning. She also places emphasis on working with parents from the outset and sees her role as one that makes sure there is "involvement, encouragement and support" for the family at all times. By collaborating with the wider family unit, Jennifer has identified that this approach ultimately "leads to success and competence" for the child, the family, and the teacher. These sentiments were echoed by Alice who also placed an emphasis on doing "as much as you can as early as you can". Both Jennifer and Alice noted early intervention as having a full literacy approach where the children experience literacy "from every angle" (Jennifer). Alice explained how she likes to support learning through a creative approach of singing and dancing as well as the "traditional" approaches of "looking at it and tracing it" when beginning any literacy programme. Alice was resolute in doing "everything you can to try to get it in. I think you just have a window and try and do as much as you can". These sentiments were based strongly on the supposition that fostering a love of literacy and language at any early age meant that children were more disposed to engaging in learning and did not see literacy or learning as something that is "threatening" (Olivia). Alice contended that "[Early] intervention is very very important for the child's self-esteem, in particular, that you know that they are not struggling which can lead to huge frustration for them".

2. Self-esteem and Dyslexia

There was consensus among all the participants (n=3) that there can be a negative psychosocial impact on children who have a diagnosis of dyslexia. Alice felt that dyslexia affected the children's confidence and self-esteem due to the feeling of 'the other' and not being able to keep up with peers. This results in "periods of distress for them" (Alice). Jennifer and Olivia agreed, with Olivia adding that it can be a "challenge" in terms of the "additional label" that the "neurodiverse conditions" because children's "motivation is lowered because they sense or feel "I am different" which they may struggle to understand and cope with". Olivia drew on her own experience as being dyslexic and "how uncomfortable" she felt at times in school. She is committed to giving "praise, encouragement and motivation to empower these young children to be the best that they can be" , and which she feels results "in enhancing their self-esteem which leads to a vast improvement on a gradual basis in their reading ability, reading targets and just socialisation amongst their peers". When asked about the drivers to promote self-esteem, all participants (n=3) noted the benefits of a differentiated approach to support individual needs. Jennifer highlighted the importance of working from the strengths and interest of the child as well as overlearning and repetition of core concepts.

3. Use of technology as a strategy to support the teaching and learning of dyslexic children

During the interview process it became apparent that technology is a very useful tool in the learning environment when supporting dyslexic children and/or children with literacy difficulties. All participants (n=3) identified a range of tools and how these were advantageous for teaching and learning. Olivia drew on the benefit of touchscreens for the children as it can be a sensory experience but also because of the intuitive touch interface, it is easy to use for all children who may have other needs. She also emphasised that technology provides an alternative way to learn so it is motivational but ultimately the child "although learning in a different way, with the use of assistive technology, is learning the same material and going at the same pace as their peers". All participants (n=3) referred to technology as a tool for inclusion. Jennifer commented that technology can be used to the child's advantage in the classroom because it subtly enforces inclusivity as all children are included in lessons. She also noted that some of the modern

technology used in her class "enables the production of information in a dyslexia-friendly manner with clear language and accessible text in design which improves accessibility and readability". All participants (n=3) pointed out that technology is a "game changer" and a "differentiated approach to learning". Olivia advocated strongly for technology as a way forward especially when tailoring it to the needs of the child stating that "any child who scores below the second percentile could apply for assistive technology".

Alice drew on the importance of phonics instruction and noted how this can be supported via technology such as apps on the iPad or laptop. She explained that "you can get phonics programs for them that allow them to type their answers" opposed to having to speak aloud in front of peers. She encouraged the use of tools such as "text to speech" and considered technology as "a welcome addition and I hope to see more of it in the future". Alice and Olivia extolled technology as an additional support for learning "because there is a differentiated approach to teaching when technology is in use" (Olivia). Jennifer concurred, feeling that using technology means that "everyone is on the same wavelength". She also drew on the current landscape where "we are at a stage where we have to be digitally literate" so "it is imperative" that children have an opportunity to "enhance their hand-eye coordination through using the iPad". Jennifer felt that "collaboration, creativity and critical thinking is supported" through technology and furthermore "children are empowered to become active in their own learning, grow in confidence and to take ownership of their own learning".

While there was consensus that use of technology is very effective and beneficial, Alice warned that in order to be sustainable, the software needs to be adaptable to suit diverse classrooms and there needs to be a better understanding of how to incorporate technology into teaching practices and into the school environment. She gave the example of the "Dragon programme", a tool that is effective in her school but explained that in order to use it "you need a quiet space like the SEN room because it does pick up a good bit of background noise". While the Dragon software facilitates faster production of written text, minimises spelling errors, and enhances vocabulary usage, it is conditional on having a dedicated space for optimal usage and results.

DISCUSSION

The current study identified three core strategies when working with dyslexic children, emulating what is found in the literature. It is clear that early intervention is well researched as a strategy for supporting dyslexic children (Saleem and Ismail, 2025) and is key for the child's success, in line with current thinking (National Centre on Improving Literacy, 2019, Ozernov- Palchik & Gaab, 2019) and can be a tool to prevent future reading difficulties (Bos et al., 2001; Coyne, Kame'enui, & Simmons, 2001). Research indicates that early intervention supports educational and emotional development (Dyslexia Association of Ireland, 2020;2021). The Dyslexia Association of Ireland (2021; 2020) stresses the importance of early intervention by stating "Strong research shows intervention is significantly more effective if done at five, six or seven, rather than later at nine, ten and 12." However, previous literature warns us that it is impossible to predict who is going to respond well to instruction (IDA, 2016). It is noteworthy that Jennifer's emphasis on the importance of collaboration is seen to benefit the child, the family and support the educator in their teaching and learning approaches, a concept that is highlighted in the literature (Collins and Colum, 2024) and mitigates against feelings of incompetence in teachers (Hick et al, 2019).

Consistent with previous research (Wilmot et al., 2023; Leitao et al., 2017; Novita, 2016) the current study identifies how dyslexia impacts a child's self-esteem with feelings of distress and being uncomfortable within the school environment. It is noteworthy that some recent literature posits that mindfulness training has a positive effect on the self-esteem of dyslexic children improving areas in social, family and the overall self-esteem of the child (Zareii and Yarigarravesh, 2024).

The study also highlighted how technology is an important tool to support dyslexic children, mirroring research that identify technology as vital for struggling readers (Keelor et al,. 2020; Meyer & Bouck 2014; Hodapp & Rachow, 2010; Izzo et al., 2009). Other literature acknowledged different forms of technology comprising audiobooks, text-to-speech (TTS), speech-to-text (STT), and computer software packages as having a positive impact on the learning of dyslexic children, specifically the command of reading skills (Yaacob et al., 2024). Paudel and Acharya (2024), support this view suggesting that more innovative technologies such as mobile apps, augmentative realities, virtual reality, haptic, and tangible user interfaces are evolving to address the needs of dyslexic learners. Furthermore, there is a suggestion that assistive technology enriches the overall academic and emotional needs of dyslexic children (Almgren Back et al., 2024; Perelmutter et al., 2017; Wood et al., 2018). Almgren Back (2024) found that in particular, if tailored to suits the needs of the child, listening to texts is optimal for learning and has a propensity to enhance comprehension and independent reading skills.

CONCLUSION

This paper adds to the growing body of literature on supporting dyslexic children in primary schools in Ireland. The key findings are commensurate with existing literature in the area, and it is evident that educators are upskilling in their knowledge and practices of dyslexia to better to support the children in their classrooms.

Further study should incorporate the voice of the child (Kiely et al, 2024; Kiely et al., 2022; Mc Cann and Colum, 2022) to capture the needs of dyslexic children and their preferred teaching and learning approaches. It would also be interesting to expand on the current research with a larger cohort and compare findings across the studies.

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