

**Experiences of Parents with Children Who Have Been Diagnosed with
Dyslexia in Secondary Schools of Msunduzi Municipality, Pietermaritzburg**

**Nosipho Phumzile Mkhwanazi
216075822**

Supervisor: Dr Phindile L. Mayaba

Thesis submitted in partial fulfilment of the requirements for the degree of Master of Social Science (Educational Psychology) in the School of Applied Human Sciences, University of KwaZulu-Natal, and Pietermaritzburg, South Africa.

© 2018

DECLARATION

Thesis submitted in partial fulfilment of the requirements for the degree of Master of Social Science (Educational Psychology) in the School of Applied Human Sciences, University of KwaZulu-Natal, Pietermaritzburg, South Africa.

I, *Nosipho Phumzile Mkhwanazi*, declare that:

1. The research reported in this thesis, except where otherwise indicated, is my original research.
2. This thesis has not been submitted for any degree or examination at any other university.
3. This thesis does not contain other persons' data, pictures, graphs or other information, unless specifically acknowledged as being sourced from other persons.
4. This thesis does not contain other persons' writing, unless specifically acknowledged as being sourced from other researchers. Where other written sources have been quoted, then:
 - a. their words have been re-written but the general information attributed to them has been referenced;
 - b. where their exact words have been used, then their writing has been placed inside quotation marks, and referenced.
5. This thesis does not contain text, graphics or tables copied and pasted from the Internet, unless specifically acknowledged, and the source being detailed in the thesis and in the reference section.

Nosipho Phumzile Mkhwanazi

Supervisor: Dr Phindile L. Mayaba

ACKNOWLEDGEMENTS

My foremost acknowledgement goes to the highest God for granting me the ability to dream, persevere and achieve my goals. Indeed, I am a witness that indeed “He is able to do exceedingly abundantly above all that we ask or think, according to the power that works in us (Ephesians 3:20).

My sincere appreciation goes to the following people:

My supervisor (mentor and role model), Dr Phindile Mayaba: I would like to express my gratitude for the useful comments, remarks and engagement throughout the learning process of this thesis.

My mother, Sizakele Magagula-Zulu, thank you for your unconditional love, support and constantly believing in me against all odds. I am grateful to have been fortunate to share priceless moments of this life with you. If it wasn't for you, reaching this academic level would have been impossible. Ngiyabonga Ndabezitha.

My sweet little Prince, Ntando Ndwandwe, I truly appreciate you for being my best friend and everyday inspiration. Thank you for understanding and enduring my divided attention during my extended hours of study.

My two special grandmothers (Mrs K. Mkhwanazi and G. Magagula): If it was not for your love, support and valuable teachings that you anchored during my childhood, I doubt that I could have been the hard working person that I am.

The participants of the study: I am grateful for your willingness to share your precious time and experiences during the period of the study.

DEDICATION

I dedicate this work to the princess – MaGcwabaza. May your soul rest in eternal peace, till we meet again.

ABSTRACT

Reading is one of the essential and fundamental academic skills that every learner needs to acquire in order to successfully accomplish subsequent academic tasks. The achievement of academic tasks such as reading often requires the collective effort of all parties involved, including learners, teachers, parents and other community members concerned. The significance of parental involvement in children's academic development has been emphasized by the worldwide and national policies of the education system. Thus it is imperative to explore parents' experiences of parenting children with reading impairment.

This study is about exploring experiences of parents with children who have been diagnosed with dyslexia in the secondary schools of uMsunduzi municipality, Pietermaritzburg. This is a qualitative study which adopted an explorative qualitative research design with interpretivist paradigm. Epstein's theory of multiple spheres was used as the theoretical framework of this study. In-depth semi-structured interviews were used as a data collection technique and thematic analysis employed as a data analysis method. The targeted population was the parents of secondary school learners who have been diagnosed with dyslexia. The sample size consisted of five parents whose children were diagnosed with dyslexia.

The study found that parents do not have a clear understanding of dyslexia and its underlying causes. The study established that parents often experience emotional and financial difficulties, parenting challenges, and they lack support from significant others. With regards to the parents' interaction with schools, it was found that there is insufficient communication between teachers and parents of learners with dyslexia. Hence parents find themselves uninformed and excluded from the education system. The study also found that the studied community is believed to lack resources that are required to assist learners with dyslexia and their parents.

On the basis of the findings of the current study, it was recommended that the Department of Education (DoE) needs to take essential measures in enforcing policies that are pertinent to parental involvement in the education system. DoE was also recommended to also provide relevant personnel and essential resources in order to assist learners with dyslexia and the parents concerned.

Keywords: Children, Dyslexia, Experiences, Parents

TABLE OF CONTENTS

Declaration	i
Acknowledgements	ii
Dedication	iii
Abstract.....	iv

CHAPTER 1- Introduction and Overview of the Study

1.1 Overview	1
1.2 Background and context of the research project.....	1
1.3 The problem statement	2
1.4 Aim of the study.....;	3
1.5 Significance of the study	3
1.6 Research objectives.....	4
1.7 Research question	4
1.8 Research methodology.....	4
1.9 Definition of Terms	5
1.10 Structure of the thesis	6
1.11 Conclusion	7

CHAPTER 2 – Literature Review

2.1. Introduction	8
2.2 Theoretical framework	8
2.3 A Background on reading.....	10
2.4 A Definition of dyslexia	10
2.4.1 Characteristics of dyslexia	11
2.4.2 Aetiology of dyslexia	12
2.5 Experiences of parents whose children have been diagnosed with dyslexia.....	13
2.5.1 Parents’ understanding of dyslexia.....	14
2.5.2 Parents’ emotional experiences	14
2.5.3 Parents’ personal experiences in helping their children with homework.....	16
2.5.4 Parents’ experiences regarding their financial circumstances.....	17
2.5.5 Parents’ experience of support from school and significant others.....	19

2.6. Parents’ experiences on parent-school interaction	22
2.6.1 Policy guiding parent- school interaction.....	23
2.6.2 Parents’ experiences on school - parent interaction	24
2.7 Parents’ experiences on interacting with community members and using available resources in helping children with reading impairment	27
2.7.1 Policy on concessions for learners with dyslexia	28
2.7.2 Inclusive education and specific learning disorder with impairment in reading	30
2.7.3 Role of helping professionals in working with learners and parents with dyslexia	32
2.7.4 Role of educational psychologist in diagnosing and managing SLD	32
2.7.5 Parent’s reactions to a formal diagnosis of dyslexia	35
2.7.6 Parent’s experience of support from community members	36
2.8 Conclusion	37

CHAPTER 3 – Methodology Chapter

3.1 Introduction.....	38
3.2 Research Paradigm.....	38
3.3 Research design	39
3.4 Study site	40
3.5 Target population	40
3.6 Sampling strategies	40
3.7 Sample	41
3.8 Sample size	42
3.9 Data collection technique	42
3.10 Data analysis.....	43
3.11 Trustworthiness: data quality control	45
3.12 Ethical considerations.....	46
3.13 Conclusion	48

CHAPTER 4 – Data Presentation

4.1 Introduction	49
4.2 Parents’ understanding of dyslexia and how they experienced parenting children with dyslexia	49
4.2.1 Parents’ understanding of dyslexia and its underlying causes.....	49
4.2.2 Parents’ emotional experiences when parenting children with dyslexia.....	50

4.2.3 Parents’ experiences of behavioural problems of children with dyslexia.....	51
4.2.4 Parents’ personal experiences in helping children with homework.....	52
4.2.5 Parents’ experiences regarding financial circumstances	53
4.2.6 Parents’ experience of support from significant others.....	54
4.3 Parents’ experiences regarding their interaction with schools.....	55
4.3.1 Parents’ experiences of ongoing school -parent interaction	55
4.3.2 Parents’ experiences on the lack of ongoing school-parent interaction.....	56
4.3.3 Teachers’ supportive role in assisting learners and parents with dyslexia	57
4.4 Parents’ experience regarding the use of available resources to assist children with dyslexia.....	59
4.4.1 Parents’ experiences on the availability and use of resources.....	59
4.4.2 Parents’ experiences about consulting helping professionals.....	60
4.4.3 Inclusive education and SLD, with impairment in reading.....	61
4.4.4 Parents’ knowledge of available concessions for learners with dyslexia	63
4.4.5 Assessment and placement if learners with dyslexia	64
4.5 Conclusion.....	64

CHAPTER 5 – Discussion

5.1 Introduction	65
5.2 Parent’s understanding of dyslexia and how they experienced parenting children with dyslexia	65
5.2.1 Parent’s understanding of dyslexia and its underlying causes.....	65
5.2.2 Parent’s emotional experiences when parenting children with dyslexia.....	66
5.2.3 Parent’s experiences of behavioural problems of children with dyslexia.....	68
5.2.4 Parent’s personal experiences in helping children with homework.....	68
5.2.5 Parent’s experiences regarding financial circumstances	70
5.2.6 Parent’s experience of support from significant others.....	71
5.3 Parent’s experiences regarding their interaction with schools.....	72
5.3.1 Parent’s experiences of ongoing school – parent interaction	72
5.3.2 Teacher’s supportive role in assisting parents and learners with dyslexia.....	74
5.4 Parent’s experience regarding the use of available resources to assist children.....	76
5.4.1 Parent’s experiences on the availability and use of resources to help learners.....	76
5.4.2 Parent’s experiences about consulting helping professionals.....	77
5.4.3 Knowledge of concessions and Inclusive education for learners with dyslexia	78

5.4.4 Assessment and placement if learners with dyslexia	80
5.6 Conclusion	81

CHAPTER 6 – Conclusion and Recommendations

6.1 Introduction	82
6.2 Conclusions regarding the research problem.....	82
6.3 Conclusion regarding the research problem	84
6.4 Implications for theory.....	84
6.5 Implications for policy and practise	86
6.6 Limitations and implications for Future research	87
6.7 Recommendations	88
6.8 Concluding remarks	89
6.9 References.....	90

List of Tables

Table 1: Concessions for SLD, with reading impairment.....	29
Table 2: Demographics of the study sample	42
Table 3: Current academic enrolment of participants’ children with dyslexia.....	61

List of Figures

Figure 1 Epstein’s model of overlapping spheres	9
Figure 2 The research design of the current study	40

CHAPTER ONE: INTRODUCTION

1.1 Overview

This first chapter presents the background of the study on the experiences of parents of children who have been diagnosed with dyslexia in secondary schools of Msunduzi municipality. This is followed by a presentation of the problem statement, research objectives and questions, the aim of the study, and the significance of the study. The chapter then presents a summary of the research design underpinning the study, definitions of the main terms and the summary of the chapters in this dissertation.

1.2 Background and Context of the Research Problem

Ever since the 1990s, dyslexia, which is characterized by reading difficulties and spelling problems, has gained increasing attention worldwide (British Dyslexia Association, 2012). Such upsurge in cognizance could be due to the high number of learners with dyslexia and the persistent negative effect brought by dyslexia among school going children and their families. In the South African context, according to the results of the Annual National Assessment (ANA) of 2011, nearly 53% of the learners in Grade 3 and 70% of the learners in Grade 6 were unsuccessful in obtaining a satisfactory level of reading (Department of Education, 2011). However, the results of ANA of 2014 showed an improvement compared to the previous two years. According to the Department of Basic Education (2014.), “during the 2014 ANA, 66% of learners in Grade 3 and 77% of learners in Grade 6 achieved 50% or above for home language. Nevertheless, the Grade 9 results did not show the same level of increase. Only 48% of Grade 9 learners achieved 50% or above for the 2014 ANA” (p.10). Such underperformance by grade 9 learners was mainly due to the following challenges:

- a) Many learners in both Home Language and First Additional Language struggled to respond to questions that required the use of their own words. Therefore, summarising a text using their own words became extremely difficult.
- b) Learners were unable to interpret a sentence or give an opinion when required.
- c) Learners lacked the required editing skills when writing letters (DoE, 2014, p.10).

The above mentioned problems are related to the indispensable reading skills and reading competency that is necessary to achieve the learning outcomes and cope with the demands of high school. The possible causal factors of these problems are inclusive of sensory-motor

difficulties, language-related problems, neuropsychological impairments, and socio-emotional deficits, coupled with teaching and learner support that is below standard (Dreyer, 2015).

Learners with dyslexia or those experiencing reading difficulties often have varying degrees of academic and behavioural difficulties, and social, emotional, as well as psychological barriers (Scott, 2004). Such challenges do not only impact learners but also affect their parents who have to deal with them on a daily basis. Moreover, previous studies have remarkably ascertained that parental involvement in schools is very essential for the success of their children. In support of maximum parental participation in South African schools, the Education White Paper 6 (DoE, 2001) on inclusive education, as well as the screening, identification, assessment and support (SIAS) strategy (DoE, 2014), require parents to be joint decision makers and active role players in the education of their children. Hence, it is important to explore parents' experiences in order to develop effective educational support plans and strategies for assisting learners with dyslexia. Studies prove that keenness in studying the lived experiences of parents of children who have reading impairments only became high in the latter half of the 20th century (Johnston & Mash, 2001). However, fewer studies have been done regarding this issue in the South African context. Thus, no known study has been done in Pietermaritzburg. This study is, therefore, aimed at closing such a gap and exploring the experiences of parents whose children have been diagnosed with dyslexia and how they cope with it.

1.3 The Problem Statement

Specific learning disorder with impairment in reading (commonly referred to as dyslexia) is the most common disorder that is affecting school going children (Du Plessis, 2012). Dyslexia is an international problem that is affecting children and adults from all walks of life. Seals (2010) reported that the number of children in the U.S. designated as having a specific learning disability as of 2008 is 6.6 million. Hence parents of 39% of all public school children experience the phenomenon of parenting a child who presents the special challenges associated with having the specific learning disorder (SLD) designation. In the South African context, according to the results of the ANA of 2011, about 53% of learners in grade 3 and 70% of learners in grade 6 failed to achieve a partially achieved level of reading (as mentioned above). Due to their reading difficulties, these learners experience erratic degrees of learning and behavioural problems which is also associated with psychological and emotional challenges (Scott, 2004). Considering the underlying theoretical framework of overlapping spheres of influence, it is clear that the psychological and emotional difficulties experienced by these

learners also greatly impact the lives of the parents and the entire family. Thus it is essential to pay attention to parents' experiences of parenting children with reading impairment.

Dreyer (2015) attest that a considerable number of studies have been done on poor reading levels in schools and the probable underlying causes thereof, however, very few of the studies have focused on the experiences of parents whose children have been identified as having a reading impairment. Professionals in education and proponent professions may be knowledgeable and proficient on how to help children with dyslexia in a school setting and beyond, but few of them have parented a child identified as having dyslexia. So parents of children with dyslexia are the only ones who possess first-hand information in terms of parenting children with a reading impairment. Therefore, it is necessary to explore, describe, and document the experiences of parents who have parented a child with the designation of SLD in order to understand the needs of these children within the context of their overall environment, not just through their academic environment.

1.4 Aim of the Study

According to Wagner, Kawulich and Garner (2012), the main purpose of the research project is often communicated in terms of aims and objectives. It is further elucidated that aims are the researcher's intentions or aspirations about what he or she hopes to accomplish upon completion of the project (Wagner et al., 2012). The aim of this study is to explore and discuss experiences of parents whose children have been diagnosed with specific learning disorder, with impairment in reading. It aims to understand how parents have experienced parenting a child with dyslexia, interacting with schools and communities in their attempt to help their children who have been diagnosed with dyslexia.

1.5 Significance of the Study

A significant number of studies have been conducted on reading problems at an international and a national level (Dahle & Knivsberg, 2013; Du Plessis, 2011). However, little research has been conducted on experiences of parents who are parenting children who are experiencing reading impairment (Dreyer, 2015). The narrow existing studies on parents' experiences on a wide range of learning disorders has been conducted predominantly using quantitative research methods (Dewey, Crawford & Kaplan as cited in Du Plessis, 2011; McIntyre & Hennessy, 2012; Rashid, Morris & Sevcik, 2005; Smith-Bonahue, Larmore, Harman & Castillo, 2009). This is a big concern because poor reading has been identified as a prominent challenge that affects learners' academic performance in South Africa (DoE, 2014). Thus, the purpose of the

current study was to close the gap and add to the current body of knowledge and bring new literature about the experiences of parents with children who have a reading impairment or have been diagnosed with dyslexia. More especially because such a study has not been conducted in the area of Pietermaritzburg.

1.6 Research Objectives

The study had the following research objectives:

- a) To explore parents' understanding of dyslexia and how they have experienced parenting children with dyslexia
- b) To explore parents' experiences regarding their interaction with the schools in assisting their children with dyslexia
- c) To explore parents' experiences regarding the use of resources in their community to assist children with dyslexia

1.7 Research Questions

The study was guided by the following research questions:

- a) How do parents understand dyslexia and how they have experienced parenting children diagnosed with dyslexia?
- b) What are parents' experiences regarding their interaction with the school in assisting their children diagnosed with dyslexia?
- c) What are parents' experiences regarding the use of resources in their community to assist children with dyslexia?

1.8 Research Methodology

In this study, the researcher used the interpretivist paradigm because it suited the objectives of the study. Flick (2009) posited that interpretive paradigm is mainly about the way in which people construct and understand their subjective reality and how they confer meaning to such reality. The research methods used within an interpretivist paradigm describe and construe people's emotions and experiences using a qualitative rather than quantitative approach (Terre Blanche, Durrheim & Painter, 2006; Wagner et al., 2012). The basic assumption of interpretivist paradigm is that human beings' subjective experiences are real and that people can make sense of other's experiences by engaging with them and listening to that which is communicated, and that qualitative research techniques are well-matched to this methodology (Flick, 2009; Terre Blanche et al., 2006; Wagner et al., 2012).

In this study, the researcher used an exploratory research design to determine the phenomenon studied. The researcher wanted to determine parents' experiences in terms of parenting and interacting with schools and communities in order to help their children with dyslexia, therefore, the explorative design was used. The researcher used qualitative research methodology because it is good at exploring the nuance of the research problem. Qualitative research is typically used to dig deeper into the views of participants regarding a specific notion (Creswell, 2013). The target population for this research was parents of children who have been diagnosed with dyslexia. The sample size of this study consisted of five parents of children with a reading impairment. Purposive sampling was used to select participants to answer the main research questions. Data was collected using semi-structured interviews and analysed using thematic analysis. The research methodology and methods that were used in the study will be discussed in detail in Chapter Three.

1.9 Definition of Terms

1.9.1 Reading

According to Alderson (as cited in Grabe & Stoller, 2013), "reading is a number of interactive processes between the reader and the text, in which readers use their knowledge to build, to create, and to construct meaning" (p. 9). It is a process of decoding symbols and the ability to derive meaning from the written material. Gates (as cited in Urquhart & Weir, 2014) defined reading as "a complex organization of patterns of higher mental processes that can and should embrace all types of thinking, evaluating, judging, imagining, reasoning, and problem-solving" (p. 3).

1.9.2 Specific Learning Disorder/Dyslexia

"The word dyslexia is of Greek origin, meaning the condition of having an impairment (dys) using words (lexicon)" (Berninger & Richards as cited in Delany, 2017, p. 97). According to Shaywitz and Shaywitz (2005) "dyslexia is a specific learning disability that is neurobiological in origin, it is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities" (p.16). For the purposes of this study, Dyslexia will be used the most to refer to the specific learning disorder with impairment in reading.

1.9.3 Experiences

According to the Oxford Advanced Learner's Dictionary (2010), experience refers to "the knowledge and skills that you have gained through doing something for a period of time and the process of gaining this" (p. 513). The implication is that through parenting a child with learning difficulties, the parent has obtained acquaintance and skills that the researcher is interested in. In the context of this study, parents' experiences refer to cognitive, emotional and physical results of their parenting roles.

1.9.4 Parents

According to Seals (2010), a parent is: "(a) a natural, adoptive, or foster parent of a child (unless a foster parent is prohibited by State law from serving as a parent); (b) a guardian (but not the State if the child is a ward of the state); (c) an individual acting in the place of a natural or adoptive parent (including a grandparent, stepparent, or another relative) with whom the child lives, or an individual who is legally responsible for the child's welfare." (p.17).

1.9.5 Children

For the purpose of this study, children refer to school going learners parented by their parents. This concept thus refers to somebody's son or daughter and does not refer to age.

1.10 Structure of the Thesis

This thesis is organised into the following six chapters:

Chapter One presented the background to the study, the problem statement, the significance and contribution of the study, and the aim and purpose of the study. This was followed by the research questions, as well as the objectives that underpinned the study, and then the relevant terms were defined.

Chapter Two presents brief background information on reading and dyslexia, followed by a detailed discussion of current literature pertaining to experiences of parents whose children have been diagnosed with dyslexia. Parents' experiences are divided into three subsections, which are personal experiences with parenting, experiences on parent-school interaction as well as manipulation of available community resources and services to help children diagnosed with dyslexia.

Chapter Three presents a discussion of the research methodology and design used to conduct the study. This chapter presents the study site, target population, accessible population, sampling method, as well as sample size. Then data collection instruments and the data analysis method are discussed, followed by the explanation of the measures employed to ensure data quality control. The ethical considerations addressed are also discussed here.

Chapter Four presents the findings generated in this study. This chapter presents the collected data in terms of the three themes that emerged. These themes include personal experiences in parenting children with dyslexia, experiences with regards to their interaction with schools, as well as experiences in the employment of community resources and services in their attempt to help their children.

Chapter Five presents a discussion and analysis of the findings of the study. The aim of this chapter is to establish the answers to the research questions underpinning the study, and also suggest recommendations that can be used to address issues and shortfalls that were found by the study with regards to parents of children identified as having dyslexia.

Chapter Six presents the key findings of this study. The conclusion and recommendations are also discussed in this chapter, followed by an outline of future areas of research informed by the findings of this study.

1.11 Conclusion

This chapter provided the overview of the study in terms of the background and significance of the study, the research aims and objectives, problem statement, as well as the summary of the research methodology. The next chapter will discuss the conceptualisation of the study and deliberate on the literature review pertaining to experiences of parents whose children have been diagnosed with SLD with impairment in reading.

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

The previous chapter presented the introduction and background of the study. This chapter begins with a discussion of Epstein's model of overlapping spheres as a framework for this study. The chapter then presents a review of the currently available literature using the explanatory approach to discuss the background of the concept under study. Background information is presented on reading and dyslexia. This chapter further provides descriptive information on the current writings pertaining to the experiences of parents with children who have been diagnosed with specific learning disorder with impairment in reading. Parents' experiences are divided into three themes which include personal experiences, experiences regarding their interaction with schools, as well as experiences regarding utilization of the available community facilities to help children with dyslexia.

2.2 Theoretical Framework

The theory underlying this study is Epstein's model of overlapping spheres which originated from Bronfenbrenner's ecological theory of human development. The basic assumption of Epstein's model is that families, schools and communities have a crucial role in facilitating the education of learners (Epstein, 2002). Epstein's model of overlapping spheres of influence explains the necessity of a working relationship between family, school and community for children's academic development. This theory provides the underpinning expectations on the responsibility of parents, teachers and the larger community in ensuring successful learning and support for learners with special needs, in this case, those with reading impairment.

Epstein's model of overlapping spheres of influence acknowledged that children do not develop in isolation but do so inside and outside of the borders of their family, school, and their community at large (Du Plessis, 2011; Epstein, 2002). Such assumptions are applicable in children who have been identified as having impairment in reading, most of them find themselves separated to attend remedial classes and other stereotyped groups inside their schools and grouped in a context that their non-challenged schoolmates do not experience. Dreyer (2015) argued that although Epstein's theory was not precisely developed on the basis of learning difficulties, most researchers contend that it has a substantial theoretical and conceptual significance for the study of and responding to the needs of parents of children diagnosed with impairment in reading. The diagram below clearly illustrates the assumption of Epstein's theory of multiple spheres.

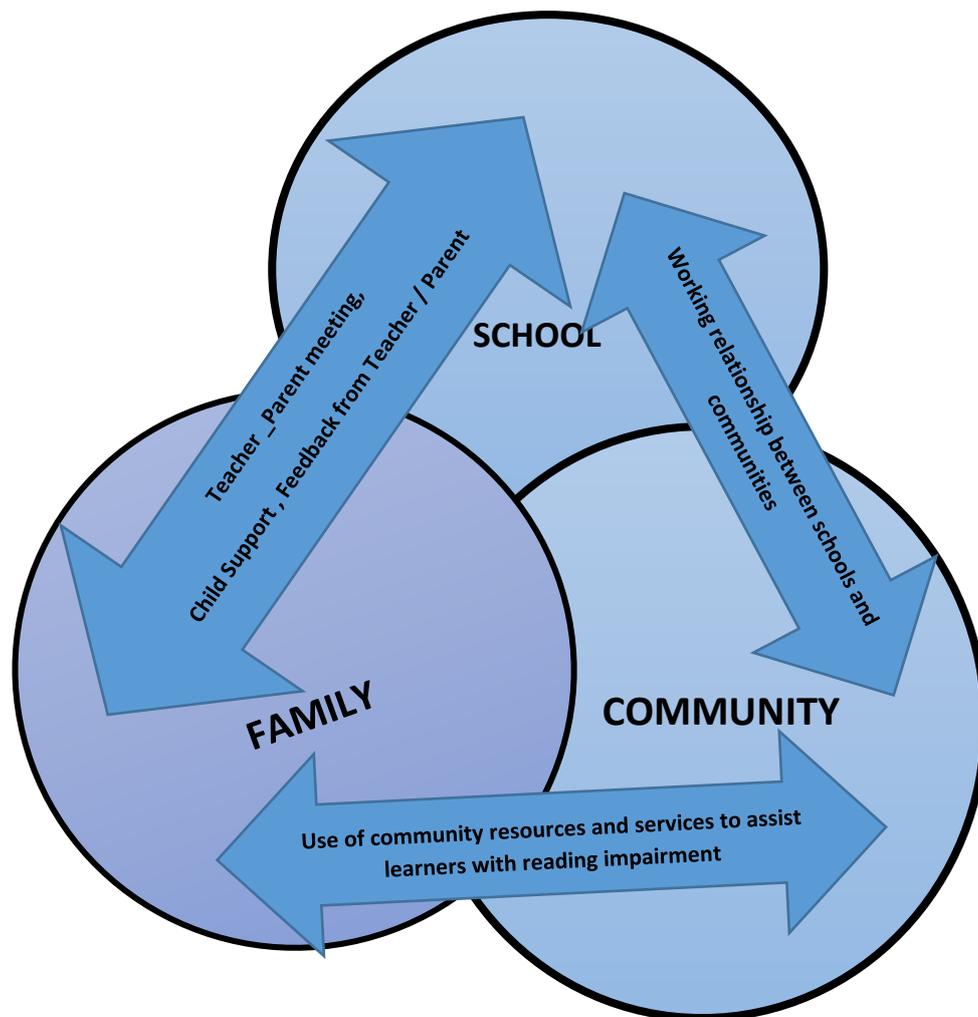


Figure: 1 Epstein's model of overlapping Spheres
(Source: Epstein, 2002)

According to Russell (as cited in Du Plessis, 2011), Epstein's model of overlapping spheres of influence is a suitable framework for investigating the issues that pertain to education for children with learning disorders or learning barriers.

"It may, therefore, be useful to use such theory when studying the personal experiences of parents with children identified as having reading difficulties when engaging with their schools, teachers, and other service providers such as remedial teachers and educational psychologists" (Du Plessis, 2011, p.17).

Russell (as cited in Du Plessis, 2011) ascertained that cultural ethics and morals often impact people's beliefs, as well as anticipations. Therefore, studying the individual's beliefs and anticipations may assist in better understanding their personal experiences gained through parenting children with dyslexia. This theory is, therefore, suitable for studying parents' experiences in terms of parenting and interacting with schools and communities to help their children with dyslexia.

2.3 A Background on Reading

The most recognized model for the achievement of the ability to read is the phonologic model. According to Walczyk and Griffith (2007), phonologic awareness is the sensitivity to the sound structure of oral speech and phonemic awareness is the understanding that speech can be broken into individual sounds that signal differences in meaning, whereas phonics is the understanding that broken parts of the speech can be represented by printed forms (Fletcher as cited by American Academy of Paediatrics, 2011). Phonologic awareness is the basis for scaffolding written language onto oral language. Phonemes are the speech sounds that makes us able to differentiate one word from another. Reading comprises decoding, fluency, and comprehension. It also requires adequate memory and sustained attention.

In addition to phonemic awareness, decoding is considered as the foundation for reading where the individual demonstrates the ability to sound out words (Walczyk, & Griffith, 2007). Firstly, the reader must be able to decode the word correctly before reading it fluently. “Fluency is the ability to read connected text with expression rapidly, smoothly, effortlessly, and automatically with less conscious attention to decoding” (American Academy of Paediatrics, 2011, p.4). Thus underdeveloped decoding is the fundamental characteristic of poor reading and lack of fluency. Most people with reading impairment have a neurobiological deficit in the processing of the sound structure of language, called a phonemic deficit, which impairs decoding and prevents word identification (American Academy of Paediatrics, 2011). Specific learning disorder with impairment in reading is alternatively called dyslexia (APA, 2013)

2.4 Definition of Dyslexia

The term “dyslexia” is derived from Greek and means “difficulty with reading words” (American Academy of Paediatrics, 2011, p.3). McCandless and Noble (2003) and the International Dyslexia Association (2017) defined dyslexia as a reading difficulty that is described as a challenge where the reader experiences reading disability due to neurological factors. Dyslexia, therefore, may be thought of as a complex behavioural outcome of multiple risk factors, both genetic and environmental (Hulme & Snowing as cited by Delany, 2017). This is reflected in the Diagnostic and Statistical Manual (DSM-5) (APA, 2013), which places dyslexia within the broad category of “neurodevelopmental disorders” as a descriptive subset of reading within “specific learning disorders”. This acknowledges that dyslexia is difficult to identify as a discrete diagnostic category (Snowling, 2013). According to APA (2013), “dyslexia is an alternative term used to refer to a pattern of learning difficulties characterized by problems with accurate or fluent word recognition, poor decoding, and poor spelling

abilities” (p.108). Learners with dyslexia have reading levels that are far lower than expected in relation to other cognitive abilities and regardless of showing adequate intelligence (Birsh, 2005 & International Dyslexia Association 2017).

For the purpose of this study, it is important to know and understand the academic or acceptable definition of dyslexia so that we may determine the parent’s knowledge and understanding of dyslexia. Hence defining dyslexia will assist in terms of answering one of the research questions which is about exploring the parents’ understanding of dyslexia.

2.4.1 Characteristics of Dyslexia

The most shared misunderstanding is that dyslexia is a problem of a letter or word reversals and mirror writing (Delany, 2017). Although learners who have dyslexia are often inclined to reversing letters and mirror writing, such characteristics are not included in the definition of dyslexia (International dyslexia association, 2017). Dyslexia is rightfully characterized by a variety of difficulties which includes problems with spelling, phonological awareness, (manipulating sounds), as well as rapid visual-verbal responding (Birsh, 2005; Dahle & Knivsberg, 2013 & American Academy of Paediatrics, 2011). Accompanying characteristics could include problems in reading comprehension and reduced reading experience that can hinder the growth of vocabulary and background knowledge (International dyslexia association, 2017).

According to APA (2013), in order to diagnose dyslexia/specific learning disorder (SLD) with impairment in reading, the individual must have experienced “difficulties learning and using academic skills, as indicated by the presence of at least one of the following symptoms that have persisted for at least 6 months, despite the provision of interventions that target those difficulties:

- [Inaccurate or slow and effortful word reading (e.g., reads single words aloud incorrectly or slowly and hesitantly, frequently guesses words, has difficulty sounding out words).
- Difficulty understanding the meaning of what is read (e.g., may read text accurately but not understand the sequence, relationships, inferences, or deeper meanings of what is read).
- Difficulties with spelling (e.g., may add, omit, or substitute vowels or consonants).

- Difficulties with written expression (e.g., makes multiple grammatical or punctuation errors within sentences; employs poor paragraph organization; written expression of ideas lacks clarity).
- Difficulties mastering number sense, number facts, or calculation (e.g., has poor understanding of numbers, their magnitude, and relationships; counts on fingers to add single-digit numbers instead of recalling the math fact as peers do; gets lost in the midst of arithmetic computation and may switch procedures).
- Difficulties with mathematical reasoning (e.g., has severe difficulty applying mathematical concepts, facts, or procedures to solve quantitative problems]” (p.104).

The above mentioned dyslexia-related difficulties are mainly due to a deficit in the phonologic component of language that makes it difficult to use the alphabetic code to decode the written word (Delany, 2017). Deficit in phonemic awareness can be a result of neurobiological, genetic or less stimulating environmental circumstances. These causes will be briefly discussed below.

2.4.2 Aetiology of Dyslexia

According American Academy of Paediatrics (2011) dyslexia is mainly believed to be due to deficits in neurobiological functioning. This means that the problem is located physiologically in the brain. Research on both functional and brain-imagery found that there is a difference between the development and functioning of the brain of the person with dyslexia when compared to non-affected individuals. Furthermore, American Academy of Paediatrics (2011) revealed that “neuroanatomical changes, micro architectural distortion, and magnetic resonance images (MRI) findings in language-related areas have been observed in the brains of patients with dyslexia, including the absence of the normal asymmetry in the language areas of the brain and similar volume in the left and right planum temporale; normally, the left planum temporale is larger” (p.14). These studies suggest that people with dyslexia have demonstrated a deficit in the left hemisphere posterior reading systems and have shown a compensatory use of the inferior frontal gyri of both hemispheres and the right occipito-temporal word-form area. In addition to bio neurological deficits, recent genetic-linkage studies have identified many areas at which dyslexia-related genes are encoded (International dyslexia association, 2017).

The relationship between genes and behaviour is thought to be mediated by the expression of endophenotypes, which are inheritable processes shared by family members and related to risk

rather than directly to the disorder (Gottesman & Gould as cited by Bonifacci, Montuschi, Lamiv & Snowling, 2013). As far as dyslexia is concerned, phonological awareness is thought to be one of the main risk factors for endophenotypes of reading problems (Snowling, 2013, Shaywitz & Shaywitz, 2005). “Four candidate genes have been implicated in neural migration, axonal growth, and brain development” (Galaburda, LoTurco, Ramus, Fitch & Rosen, 2006. p.1215). These brain changes seem to cause phonologic and auditory processing abnormalities.

Genetic predisposition to dyslexia is further confirmed by the findings of the study conducted on adoptive and nonadoptive children (Wadsworth as cited in Bonifacci et al. 2013) which showed that the correlation between parents and childrens’ reading performance was significant for biological families but not significant for adoptive families. Other than neurobiological and genetic causal factors, it is essential to study the problems of dyslexia in relation to other systemic factors such as families, schools and communities of the affected individuals. Studying these external factors will enable the researcher to answer the main research question of parent’s experiences in terms of parenting a child with dyslexia. Hence the reviewed literature will enable the researcher to make sense of parent’s experiences as presented during data collection. The next session is a discussion of the reviewed literature with regards to experiences of parents whose children have been diagnosed with dyslexia.

2.5 Experiences of Parents of children with Dyslexia

According to Epstein (2002), the model of overlapping spheres acknowledges that children do not develop in isolation but do so inside and outside of the borders of their family, their school, their community, and their society at large. This is mainly applicable to children who are diagnosed with dyslexia. Bonifacci et al. (2014) mention that most children with dyslexia often find themselves relegated to subsequent mini-settings within their schools; nested within the environments that their non-disabled peers navigate as a matter of routine course. Bronfenbrenner (as cited in Epstein, 2002) mentioned that understanding human relations is means of obtaining information that may bring families, communities, and schools collective to foster fruitful individuals during the course of their lives. Thus the challenge of reading impairment can be understood by studying the interaction between the individual child, concerned parents, schools, as well as community at large. The following sections will discuss personal experiences of parents whose children were identified as having SLD with impairment in reading. Although the contexts of parents’ experiences are discussed separately, it is important to note that such experiences are interconnected and are never experienced in isolation.

2.5.1 Parents' Understanding of Dyslexia

Parents' understanding and definition of dyslexia differ from one parent to the other. They range from being a temporary rite of passage that can be corrected to being described as a chemical imbalance within the child. Parents indicated that they thought SLD was genetic or an exhibition of laziness and inattention to school work (Seals, 2010).

2.5.2 Parent's Emotional Experiences

Previous studies show that parents and guardians experience a range of negative feelings associated with stress and guilt when their children are diagnosed with learning disorders, more especially reading impairment (Seals, 2010; Du Plessis, 2011; Dreyer, 2015). Literature reports that parenting a child with dyslexia can be described as a traumatic experience (Delany, 2017). The study conducted by Bull (2003) found that amongst 12 participants of parents of learners with dyslexia, nine of them reported that they felt stressed, "awful" or "just terrible". In agreement to those findings, Dreyer (2015) also articulates that parents reported feeling very worried and anxiously seeking 'quick fixes'. Emotions of "frustration, shock, fear, uncertainty, resistance, confusion, sadness, anger and feeling out of control were reported commonly" (Bonifacci et al., 2014, p.14). These parents also stated helplessness, as well as disappointment as they wanted to assist but lacked knowledge on how to support their children. Snowling (as cited by Bonifacci et al., 2014) studied the impact of learning difficulties on the family and found that approximately 74% of parents reported that their child's difficulties had a mild to severe impact on family life and that mothers of children with dyslexia had higher levels of stress and depression. In agreement to that, Karande, Kumbhare, Kulkarni and Shah (2009) reported mild anxiety levels including a list of worries in mothers of children who were undertaking a diagnostic evaluation for specific learning disorders.

A South African study done at Stellenbosch by Du Plessis (2012) established that parents of children with learning difficulties often experience common emotions of frustration, confusion, anger, guilt, as well as helplessness as their children presented with reading impairment. Parents often believe that their children's ability to learn and develop mainly depends on them, therefore, learning difficulties such as reading impairment could evoke feelings of guilt, anger and frustration as they may believe that they have contributed or failed to prevent such an unfortunate circumstance (Du Plessis, 2012; Dreyer, 2015). Parents' fruitless efforts of forcing children to read may be the source of frustration and helplessness, seeing that their effort is not eradicating the reading impairment.

The study by Heaton (as cited in Earey, 2013) found that the daily chores and activities such as being organised and ready to go to school are generally burdensome and occasionally irritates parents. Therefore, it may be very discouraging for parents to learn that their everyday effort may not bear anticipated fruits of academic success. Riddick (2010) and Delany (2017) also highlighted that parents of learners with dyslexia reported having a sense of uncertainty with regard to the future of their children due to their increased learning difficulties. Parents find themselves concerned and worried about their children's future with regards to academic achievement, future jobs, standard of living and other circumstances that would be influenced by their reading impairment. This is where the significance of interaction between schools, parents and communities come in as parent's fears and uncertainty can be addressed by the relevant structures who can advise parents about remedies and options available for learners with dyslexia.

According to Woolfson and Grant (2006), parents tend to be angrily protective and defensive of their children as they want to protect them from the stigma of being classified as less intelligent. It is reported that some parents become very difficult and violent to their children as they believe that such parenting styles could make children try harder in reading. Other parents tend to be in denial, fiercely defensive and sometimes embarrassed about their children's academic performance (Karande et al., 2009). Some of the parents studied showed a sense of apprehension with their children, and most of them expressed inadequacies in their personal capacity to effective parenting (Du Plessis, 2012; Dahle & Knivsberg, 2013; Woolfson & Grant, 2006). Similarly, the study by (Bonifacci et al., 2014) found that parents of children with dyslexia show higher parental distress, which seems to be primarily determined by the perception of having a 'difficult child' and by experiencing difficulties in the parent-child interaction pattern. This implies that effective parenting styles and a better understanding of the disorder may help parents to cope well with parenting children with dyslexia. It has also been noted that mothers are the significantly affected group of parents.

Karande et al., (2009) and Snowling, Muter and Carroll (as cited in Delany, 2017) reported that mothers, in particular, were mainly found to present with increased stress levels and depression as they reported major effects on the family and increased difficulties in everyday life. The utmost evident maternal concerns pertain to both emotional and practical difficulties, as their child's ongoing poor performance at school relates to the child losing self-esteem, getting frustrated, withdrawing from social activities and developing aggressive behaviour (American

Academy of Paediatrics, 2011; Bonafacci et al., 2014; Delany, 2017 and Earey, 2013). Parents are hugely affected by their children's frustrations, low self-esteem and other emotional and behavioural problems. They often become anxious and concerned about the future of their children as they witness academic failure and deteriorating psychosocial wellness. Mothers become emotionally and physically drained as they are reported to be the ones who are immensely involved in their children's remedial education (Earey, 2013).

The findings of the study by Bull (2003) ascertained that some parents were actually stressed because their children with dyslexia were also diagnosed with comorbid disorders such as attention deficiency and hyperactivity disorder (ADHD) or oppositional defiant disorder. According to the American Academy of Paediatrics (2011) nearly 15% of learners with reading impairment also have ADHD, whereas approximately 35% of students with disorders of attention also presented with reading disability. These comorbid disorders meant additional challenges to children and their parents. Hence parents often experience feelings of guilt, anger and confusion as they do not know how to manage the learning disability that is associated with behavioural problems. Other parents often feel shameful about the diagnosis and make efforts to prevent significant others or family members from learning about their child's condition (Michail, 2010). Therefore, exploring parent's experiences help in understanding changes and implications brought by the diagnosis of a learning disorder in a child and their family context. Hence the next section will discuss parents 'experiences in terms of helping their children with homework.

2.5.3 Parents' Personal Experiences in Helping Children with Homework

Studies show that parents of children with dyslexia were also found to have reading difficulties upon assessment and this interfered with their ability to assist their children with academic tasks such as homework and reading. Torppa, Eklund, van Bergen and Lyytinen (2011) found that the parents of affected children were poorer in reading and spelling accuracy, rapid word recognition, text reading fluency and vocabulary. This shows that some of these parents were also having learning difficulties from the time they attended school, so they were unable to assist because they also had reading and learning difficulties. Correspondingly, Bergen (as cited by Bonifacci et al.,2012) indicated that among children at family risk of dyslexia, the parents of those who develop dyslexia were also assessed and found to have lower scores in letter recognition, word reading fluency, as well as digits rapid automatized naming (RAN) compared to parents of children who did not develop dyslexia. These findings are suggestive of the possibility that parental reading skills are related to children's reading performance.

Delany (2017) reported that a parent's personal difficulty with reading could be the contributing factor of stress as it hugely impacts their ability and confidence to assist children with homework. Thus it is possible that stress and anxiety experienced by parents were also related to their inability to help their children due to their longstanding learning barriers.

The study by Dreyer (2015) further studied the role of parents in terms of building their children's self-concept and esteem while helping them with homework. According to Earey (2013), parents are believed to be able to enhance a positive self-concept in their children or further make them feel inferior and less confident to complete academic tasks. Research by Dreyer (2015) has shown that parents can enhance their children's self-esteem by being cooperative, patient, appreciative, praising good effort, awarding them for success and encouraging them to compete with themselves, not peers. According to Du Plessis (2015) and Dreyer (2015), parental involvement in completing academic tasks does not only improve children's scholastic performance but also enriches their perception of personal capability and self-management. Enhancement of these personal attributes has a positive impact on children's academic achievements.

Similarly, parents could do more damage than good in their attempts to help their children with school work. While parents may provide help, in most cases they are reported to become impatient and angry (Bonifacci et al., 2014). According to Preston (as cited in Du Plessis, 2015) parents described feelings of worry, anguish, frustration, anger, disgust, embarrassment, as well as desperation when trying to help their children with academic tasks. When parents become impatient and frustrated, their efforts in assisting children is likely to result in the establishment of a negative self-concept, low self-esteem, and more resistance to do academic tasks and at times it could lead to behavioural problems (Dreyer, 2015). Findings of these studies suggest that parental involvement in completing academic tasks could either exacerbate or ameliorate their children's reading difficulties, therefore, it is of utmost importance to know parent's experiences so they can be capacitated with knowledge and skills on how to assist their children without making them feel incompetent.

2.5.4 Parents' Experiences Regarding Financial Circumstances

Parent's financial circumstances largely impact the child's holistic functioning, especially if they have been identified as having learning barriers. Bronfenbrenner (as cited in Epstein, 2002) used the word "nesting" when explaining his theory of the ecology of human development, which influenced Epstein's' (2002) theoretical framework that underlies this

study. He used the analogy of Russian dolls, where he described the smaller dolls as encapsulated within the larger dolls until the final doll, the child emerges nested within the others. He thought of nesting as layers building outward with the developing human at the centre. Parent's socioeconomic status is considered as one of the layers that largely influences the academic development of the child. Similarly, parent's education and employment status impact their ability to successfully contribute to their children's educational development and achievement.

Rearing a child with a specific learning disorder is not only emotionally draining but it is also financially costly as parents are required to consult a variety of professionals for assessment and interventions. The study by Dreyer (2015) found that parents experienced financial implications when their children were presenting with reading problems, mainly because they were referred to see a number of professionals outside the school, such as psychologist, optometrist, paediatrician, speech therapist and so forth. This put further strain on the parents as they spend a lot of money consulting these professionals for help. Poon-McBrayer and McBrayer (2014) added that due to the demands of parenting a child with a specific learning disorder, some parents decide to leave their employment in order to pay sole attention and dedicate their time to their child. Unfortunately quitting their jobs is not always possible for parents with a low socioeconomic status as they need money for survival and to support their children. It gets worse for unemployed parents who have unstable sources of income as they cannot afford the services that are needed to help their children (Boniffaci et al. 2014). These findings imply that parents' financial circumstance influences how parents assist their children who have been diagnosed with dyslexia.

Parents' educational status, background information and socioeconomic status have been also found to be contributory factors that influence their coping ability if their children are diagnosed with dyslexia. The study by Michail (2010) established that well educated, financially stable and socially secure parents are likely to understand dyslexia-related problems and consequently cope well with their child's diagnosis. These types of parents usually afford to consult professionals for diagnosis and suitable interventions. Furthermore, parents with a history of dyslexia or other learning disorders are likely to empathize with their children if they have been diagnosed with dyslexia or are experiencing learning difficulties (Du Plessis, 2015). This implies that their background will determine the extent to which they understand and support their children if they have been diagnosed with dyslexia. In response to the research question on parents' experiences on parenting children with reading impairment, it is reported

that parents' reaction and coping ability is highly influenced by their socioeconomic status, as well as their educational background and highest qualifications.

2.5.5 Parents' Experience of Support from the School and Significant others

According to Hassal, Rose and McDonald (2005) "social support is defined as the availability of meaningful and enduring relationships that can provide nurturance and security" (p.45). Social support may be inclusive of resources provided by significant others who are outside the family such as informational, instrumental, psychological, and material resources (Keller & Honig as cited in Du Plessis, 2011). Although social support is seemingly a relational devotedness, it works as a buffer in lessening undesirable reactions to challenging experience such as parenting a child with dyslexia. Marmot and Wilkinson (2006) attest that social support is often the ameliorating factor in most difficult circumstances, and is principally useful in enhancing one's coping ability when faced with situations such as parenting a child with dyslexia. Schools and family members have the essential responsibility of providing maximum positive reinforcement to parents of children with dyslexia. Parents with stable social support tend to cope better because they can often consult significant others if they need social support and advice on dealing with reading-impaired children.

Woolfson and Grant (2006) supported Baker (2003) in suggesting that parents play a crucial role in the developing their children's reading ability (literacy), hence what is done, said and believed by parents regarding their children, make a remarkable transformation. Parents' attitude and treatment towards their children would either contribute positively or negatively on their child's language development. Children can either be encouraged or discouraged by their parents' faith in them. In the absence of knowledge and support, parents may give up on their children's aptitude to succeed academically. In a study conducted by Baker (2003), one of the participants was quoted stating that "I can admit I was at my wit's end. I was so worried about her it was unbelievable. I had nobody to talk to as my family thought I was exaggerating about how bad she was. I just needed to get some support, you know like social support, just to talk to someone" (p.99). The statement of this parent implies that formal and informal social support is very crucial in assisting parents in rearing a child with reading impairment.

The study conducted by Heaton (as cited in Earey, 2013) found that parents do not know how to support their children with reading impairment and they feel that their needs are often forgotten. Parents also seek a better understanding of what their children are experiencing so they can be able to support them as required (Delany, 2017 and Machail, 2010). However,

insufficient knowledge and support exert additional pressure and frustration, which leads to feelings of helplessness, as parents are unable to effectively help their children to be able to read. The study by Boniffacci (2014) found that supportive and caring parents, with sufficient social support, were more effective in assisting children with dyslexia and other learning disorders. It is generally assumed that children with learning difficulties are the only ones that need support, ignoring the crucial role players who are parents. Thus this study is aimed at finding out how parents feel and experience parenting children with dyslexia.

According to Howie-Davies and McKenzie (2007), parents of children with dyslexia have been receiving minimal knowledge and support from schools and professionals compared to those parents of children diagnosed with neurodevelopmental disorders such as Attention deficit/hyperactive disorder (ADHD), Down's syndrome or Autism spectrum disorders. Dyson (as cited in Seals, 2010) inferred that perhaps professionals do not consider learning disorders to be equally important as other disorders, stating that "perhaps the most socially significant feature of a learning disability is its invisible and seemingly benign nature" (p. 49). These findings shows that parents of learners with reading impairment are continuously ignored or perceived as requiring minimal support. Hence they feel unsupported and this impacts on how they deal with their children who are presenting with reading difficulties.

Scott (2004) and Karande and Kuril (2011) states that parent's chronic stress and inadequate parenting styles may trigger behavioural problems in children. Moreover, the study by Lenz and Deshler (as cited in Seals, 2010) found that many adolescents diagnosed as having learning disorders often develop secondary characteristics that are due to inexorable academic failure throughout their primary years of schooling. Children's fruitless efforts and failure in their academic work may create anger and unjust negative perception of self and others. These disappointments and exasperations are often carried on to secondary schools where they may be labelled as slow, disorganised, lazy and even dumb. Such an experience will have an awful impact on the learner's psychosocial development. Parents may not know how to deal with such difficulty and it will exert more pressure and stress on them.

Due to the lack of knowledge and support, and as the result of frustration and hopelessness, parents may end up using inadequate teaching and parenting styles with the aim of modifying behaviour and enhancing their children's ability to read and learn. Participants of the study by Bull (2003) reported that "parents become concerned about dyslexia but significant others in the family believed that parents needed to be a bit stricter and that will be the end of the matter,

although parents believed that the problem was deeper than punishment and reward” (p.91). This implies that being uninformed about the child’s disorder and lack of support from external structures could have a direct detrimental effect to the child concerned. When parents run out of options and effective teaching methods, they may quickly resort to the way they were taught and raised, and this could negatively impact the child. Such experiences may be aggravating factors as children may lose self-confidence, develop low self-esteem and end up presenting with behavioural problems because of the way they are treated at home (Du Plessis, 2012 and Dreyer, 2015).

According to Bull (2003), Bonifacci et al., (2014) and Delany (2017) parents of children diagnosed with dyslexia reported that they were undergoing a high degree of parental stress. This is mostly because they were feeling isolated and less empowered in assisting their children and they lack information and social support from significant others. Nonetheless other findings reveal that some parents were not necessarily stressing about their children’s inability to read but the fact that such difficulty is often accompanied by behavioural problems, academic, social and psychological barriers which made parenting very challenging as they are required to nurture and discipline at the same time (Howie-Davies and McKenzie, 2007; Scott, 2004). Such findings imply that parents also need support on how to deal with those parenting difficulties. This is emphasized by Howie-Davies and McKenzie (2007) when stating that parents of children with reading impairment did not receive enough support compared to parents with children diagnosed with developmental disorders such as autism, Attention Deficiency Hyperactivity Disorder (ADHD), Down’s syndrome and so forth.

The study by Seals (2010) found that sometimes parents believed that it was consoling to see the teacher’s positive attitude and willingness to assist their children who present with reading impairment. Parents considered the teacher’s compassionate understanding to be a huge comfort when their children’s scholastic performance was not succeeding as anticipated. Parents looked up to teachers to guide and help them choose what is legally and educationally right and appropriate for their children. Consequently, arguments and conflictual relationships have been witnessed between parents and teachers as a result of believing and feeling that their needs were not met by the school. Looking at this from an exosystemic perspective, it is understood that schools are not the only role players in education, but families and significant others also determine the coping ability of parents and children with reading impairment. Therefore, it is important to explore how do parents experience the support of significant others in an attempt to help their children.

The presence of social support from families plays a critical role in helping children and parents to deal with dyslexia and its inherent challenges. Nalavany, Carawan, and Rennick (as cited in Delany 2017) suggest that family support serves as a protective factor which positively influences the self-confidence of children with dyslexia. Parents and families who emphasize and help children to enhance their strengths are actually providing the opportunity for more-positive outcomes, which is essential and related to satisfaction with adult life (Nalavany & Carawan, 2012). Thus Bull (2003) suggested that family therapy can be a useful method that can be used by therapists to enhance parent's and children's support structures. Family members such as siblings, parents and significant others can have a negative or positive impact when rearing a child with learning difficulties. Thus family therapy plays a significant role in educating significant family members about the learning disorder in question and also to teach them how to support the child concerned.

2.6 Parent's Experiences on Parent-School Interaction.

Epstein's (2002) model of overlapping spheres clearly emphasizes the necessity of maintaining an active relationship between schools, parents and the community in ensuring children's optimal academic development. Studies have shown that parents have information and first-hand experience on difficulties faced by their children. Thus, it is essential to maintain active communication and working relationships between parents and schools or teachers. Reid (as cited by Earey, 2013) emphasized that at times it happens that schools are considered as experts in identifying and supporting learners with dyslexia, while parents are generally considered as less knowledgeable about the matter. Nonetheless, the reality is that at times the opposite happens where parents are more knowledgeable than teachers about learning conditions such as dyslexia and types of interventions required. Therefore, frequent interaction between parents and schools could capacitate both parties and most importantly benefit the child in need of support. Such a collaborative relationship facilitates the flawless flow of essential information that enables both teachers and parents to assist learners concerned. Parental involvement, as well as parent-school interaction, is legally imposed by policies and acts that are stipulated by the South African department of basic education. The next section will discuss the policy that guides the interaction of teachers and parents, especially in the case of learners with learning barriers.

2.6.1 Policy Guiding Parent- School Interaction

According to the Education White Paper 6 (DoE, 2001) on inclusive education, parents are considered as cooperative decision-makers and active role players in developing educational plans for their children. This implies that parents are expected to participate, be informed and knowledgeable regarding their children's academic progress (Seals, 2010). The cooperative relationship between parents, school and community is further emphasized by the Screening, Identification, Assessment and Support (SIAS) policy (DoE, 2014). This policy guides the process of identifying, assessing and providing details on intervention strategies to be used for children with learning barriers. SIAS outlines steps to be followed by the schools, through school-based support teams (SBST) which were previously known as institutional level based support team (ILST) in order to interact with parents and district-based support team (DBST) to assist learners with learning barriers (DoE, 2011; Dreyer, 2015). However successful implementation of SIAS policy in schools is really questionable, especially pertaining to the support for learners with learning barriers (Du Plessis, 2012 and Dreyer, 2015).

Research suggests that although the importance of joint responsibility and active relationship between parents and schools have been emphasized, there seems to be minimal communication and cooperation between schools and parents of learners with learning barriers (Fong as cited by Dreyer, 2015). Despite legal provisions by the Department of Education, there is inadequate support for learners with reading impairment. The primary role of the school-based support team (SBST) or institutional level support team (ILST) has been clearly mentioned as that of identifying learners with barriers to learning and working with parents on developing individual support plan or suitable interventions, however, this is not always the case (DoE, 2011; Dabokowski as cited in Dreyer, 2015). Some schools have existing structures that are created to assist learners with learning difficulties and other barriers, however, not all schools or structures are actively involved in identifying and referring learners for the relevant support (Du Plessis, 2011). Failure of the system has detrimental effects on affected learners and their parents. According to Seals (2010), delays in identifying, assessing, diagnosing and supporting learners with learning disorders such as SLD can mean prolonged academic difficulties for learners concerned. Preceding studies found that parents had different experiences with regards to their interaction with schools in an attempt to help their children. Hence, the next section will be a discussion of how parents experienced interaction with the school community.

2.6.2 Parents' Experiences on School- Parent Interaction

Research findings by Rose as (cited in Earey, 2013) ascertained that the parents communicated the main issue which was regarding the absence of support from the schools. Lack of support could also include the lack of communication between parents and the school about the child's learning difficulties. The absence of effective communication between the school and parents could induce feelings of helplessness and hopelessness in parents and teachers concerned. As much as some parents might be knowledgeable about their child's reading difficulty and its nature, some parents may not be aware and might be uninformed about ways of supporting the child. Thus active relationship and interaction between these parties could mean that both parents and teachers are aware of the learner's difficulties and are also using effective learning strategies to support the child concerned. This was confirmed by the study by Seals (2010) which found that some parents reported having a good experience in terms of their interaction with teachers who were very knowledgeable and supportive to their children who had dyslexia. These teachers often communicated with parents and shared effective ways that can be used to teach children despite their reading difficulties. These teachers were reported to be understanding, knowledgeable and supportive to parents and learners concerned. However, this is not always the case as some parents reported the lack of support and understanding from the school (Seals, 2010).

In a study by Bull (2003), one of the parents of a child with dyslexia said that she needed the school to provide more information and relevant support on dyslexia, but none of that was made available. She further reported that she was stressed as her daughter had to start her GCSE (general certificate of secondary education) courses, she was clearly struggling and she could foretell the unsuccessful future her child was heading to. This parent communicated her disappointment with lack of support and mutual understanding from the school as she needed them to be helpful and understand her child. According to Bonifacci (2014), it is very common that parents experience the lack of support from the school while they immensely need it for their children to cope with their learning difficulties. Insufficient support invokes feelings of worry, anxiety and hopelessness as parents foresee their children's fading academic and career success (Riddick, 2010). Hence, it is clear that the absence of cooperation between school and parents serve as an exacerbating factor as both parties play a critical role in facilitating learning amongst learners with reading impairment.

The study by Seals (2010) suggested that predominantly parents are very confident about the teachers, the education system, as well as the bureaucratic procedures followed in assisting

learners with learning problems. Although parents could sometimes feel uncertain, they eventually agree if the school or SBST recommends particular remedial options or refers the child to a specialised learning facility. However, trust seemed to be weakened only after a negative event or disagreement occurred that caused parents to reverse that trust and assert themselves as primary advocates for their child (Bonifacci, 2014). Some parents of learners with dyslexia often believed that their children with dyslexia are often mistreated and discriminated when attending a mainstream school (Michail, 2010). Hence, they preferred that their children should attend a special or remedial school where they will feel accepted and understood by teachers and fellow learners.

According to Rose (2009) and Earey (2013), parents tend to feel increased anxiety when seeking appropriate help for their child and only to find that bureaucratic processes appear to move slowly in providing effective interventions to help students overcome reading difficulties. Parents often need to face undaunted and uncooperative teachers when attempting to advocate for their child and this causes additional stress to parents (Karande, Kumbhare, Kulkarni, & Shah, 2009). The South African Department of Education have availed accommodations for learners with reading impairment, however, the responsible persons such as teachers and government officials, tend to delay or fail to implement concessions to deserving pupils (Dreyer, 2015). This is what contributes to continued parental stress, anxiety and helplessness when appropriate interventions are delayed until it is too late or never rendered at all. Hence, some parents' feelings of stress and helplessness were linked to system failure and inability to speed up or personally implement interventions that could assist their children (Delany, 2017).

A study by Meier and Lemmer (2015) indicated that parents generally agreed that the schools are often successful in maintaining conventional school-home communication by means of school reports and quarterly parent meetings. Nevertheless, some schools are generally not doing well in informing parents about the progress, achievement and well-being of individual children, and about academic enrichment opportunities and parental assistance for home-based learning. It is this missing element that is of most importance to parents as they are not present at school and they would like to know how their individual children are performing and what kind of support is expected from them as parents.

According to Mohangi and Archer (2015) it was found that parents' information about the child is sometimes mistakenly considered less important as it seems to lack scientific verification.

Thus some parents are not invited to take part in developing support plans or interventions for children with dyslexia and some parents also feel less needed in the process. Previous studies show that parents reported that they communicated once or twice with teachers when attending parent-teacher meetings (Dreyer, 2015; Du Plessis, 2012 and Woolfson & Grant, 2006). This becomes possible where parents are less knowledgeable about the child's condition or believe that their teachers are in a better position to assist. Thus, it is very crucial for teachers to involve parents every step of the way, from identifying a learning difficulty to implementing interventions. Parental involvement makes parents understand that they are essential stakeholders and their input is important for their child's academic progress. Hence they might learn that their maximum support at home is also crucial in easing dyslexia-related difficulties.

According to Seals (2010), a lack of parental involvement in the education system could be due to lack of mutual understanding between parents and professionals who work in the teaching and helping professions, such as teachers and educational psychologists. This is mainly because some professionals use their professional jargon or scientific terms when communicating with parents, thus, it leaves them with unanswered questions and lacking understanding of what is going on with their children and what is expected of them. Reid and Valle (2004) further clarified that parents might have difficulty in understanding the professional jargon that is commonly used by professionals, for example, when "their child is described by professionals as an amalgamation of test scores, discrepancies, deficits, and limitations, sometimes becomes virtually unrecognizable to them" (p.24). This information becomes hard to embrace because parents do not understand how their "ideal" child has turned out to be a special case that needs so much scrutiny (Reid & Valle, 2004). For that reason, mutual understanding and cooperation are essential to ensure that teachers and parents are aware of the circumstances pertaining to the learner's performance and they both know how to maximize the child's potential regardless of their reading difficulties.

The study by Reid and Valle (as cited in Seals, 2010) found that personal beliefs and culture are one of the factors that influence cooperation of parents in educational tasks and interventions that are recommended for the child. Some parents may feel inferior and less confident to confront teachers about their children's academic progress. They may become passive and less responsive to the teacher's plea for their involvement. Parents may distance themselves from the process while others may be confident and willingly involved in the process that pertains to identifying, assessing and supporting their children. Thus it is very important that teachers understand the contextual and cultural factors that may influence

parent's behaviour is helping their children with special educational needs. Nonetheless, regardless of the parent's cultural and contextual factors, they still own a full right and responsibility to be involved in matters that pertain to the education of their children (DoE, 2014). In an attempt to explore and understand parents' experiences of their interaction with schools, it is also essential to consider the conditions that influence such interaction in a South African context.

According to Geldenhuys and Wevers (2013), South African schools seem unsuccessful in the following areas; identifying learners with learning barriers early, properly assessing learners' abilities and weaknesses, as well as dysfunctional working relationships within microsystems. Delayed identification of learners with learning barriers could be accounted for by factors such as the lack of information and training on learning barriers, high work load, overcrowded classes, lack of resources and sometimes working in remote areas where getting psychoeducational help is a challenge on its own. Delayed identification could also be due to a daunting bureaucratic process involved in identification and referral of learners with barriers for assessment and other interventions. Bojuwoye, Moletsane, Stofile, Moolla and Sylvester (2014) mentioned that the purpose of encouraging schools to avail support for learners and parents is to capacitate them so that they can successfully deal with the challenges associated with learning barriers. Bojuwoye et al. (2014) further state that the assistance of learners with learning disorders is expected to start in schools and go beyond to include relevant professionals and important stake holders within the education system. Therefore, schools need to actively interact with multi-disciplinary parties and parents for early identification and effective interventions to be made possible. This discussion is very much in line with Epstein's (2002) theoretical framework underlying this study as it states that interaction between schools, teachers and communities is the most viable and effective way of facilitating successful learning for learners with special learning needs.

2.7 Parents' Experiences on Interacting with Community Members and the use of Available Resources in Assisting Children with Reading Impairment

Epstein (2002) suggested that schools and parents do not work in isolation to facilitate learners' academic development, but the community is also a critical stakeholder in the academic and holistic development of children. As per the purpose of this study, community is represented by friends, neighbours, members of the society, professionals, facilities that are available in the community, service providers as well as the government departments. For the aim of this study, it is important to find out about parents' experiences in their communities and the use of the

available services and resources to help their children who have reading difficulties. Before engaging with empirical literature that pertains to parents' use of community resources, it is important to look at legal provisions for children that are diagnosed with SLD, with reading impairment. The South African government has made available a number of concessions and interventions to accommodate learners with impairment in reading.

2.7.1 Policy on Concessions for Learners with Reading Impairment

According to DoE (2014) learners with obstructions to learning and assessment might be eligible for the variety of concessions which addresses their individual barriers. Dyslexia or impairment in reading is listed as one of the recognized learning barriers, meaning that learners diagnosed with SLD with impairment in reading/writing are considered as lawful potential recipients of the variety of accommodations. According to DoE (2014) learners with reading, writing impairment or dyslexia are entitled to a variety of concessions. The following concessions were made available for learners with dyslexia: “getting a scribe/reader/extra time, amanuensis, computer, typewriter, spelling and handwriting flag, sign language interpreter, oral assessment (for internal assessment only) and being exempted from particular compulsory subjects” (DoE, 2014, p.7). Parents of learners with dyslexia and other learning barriers should be informed (by the school) about the available services and concessions that are aimed at assisting learners with learning barriers. However, it is crucial to note that teachers and parents are not the only role players in implementing these concessions, but a variety of helping professionals are needed to take part in assessing and supporting learners and parents concerned. The table below has been included to further describe the above mentioned accommodations for learners with reading impairment (DoE, 2014).

Table 1

(Source: DoE, 2014)

Accommodations/concessions for (specific learning disorder)

Concessions	Description
Extra-time	For candidates who experience barriers, which prevent them from being able to work at optimum speed/rate.
Adapted Question Paper (if learning disorder is due to/ associated with visual impairment).	Question papers can be enlarged to A3 size or font size 14 on A4 paper. This concession will also warrant extra time. A candidate may also apply to use magnifying equipment.
Computer/typewriter (with text reading and writing software)	Computer can read out instructions or questions and typewriter (software) is used to type what is said by the student. For subjects where answer booklets are provided, the answer booklet will be pre-loaded on the computer by examination officials.
Amanuensis/scribe/ Reader/assistant	This concession is considered in extreme cases, e.g. where the candidate is completely unable to write and/or read and has used this method of assessment for internal examinations and tests. An amanuensis will read the questions to the candidate and write or type the responses dictated by the candidate. A scribe writes or types the candidate's answers from dictation. A candidate who has visual impairment can use a reader.
Spelling flag	A spelling flag is provided to the Chief Invigilator, to be attached to the scripts submitted by the candidate. This flag alerts the Examiner to the problem. Extra care would then be taken with the marking of the script, which would be done by a senior/experienced marker.
Oral assessment (internal assessment tasks only)	This concession is for learners who have a specific writing and/or reading disability. The learner responds orally to a written assessment task or the entire assessment is conducted orally.
Sign language interpreter	Used if the learning disorder is due to/associated with hearing impairment). The sign language interpreter interprets the written material to the candidate.

2.7.2 Inclusive Education and Specific Learning Disorder with Impairment in Reading.

Inclusive education forms the basis of the above-discussed concessions because it is aimed at accommodating learners with special needs in all educational institutions, especially mainstream schools. Inclusion policy is globally considered as means that can help to level the playing fields and for that reason it has been expressed in many policy documents, including the United Nations Convention on the Rights of the Child (United Nations, 1990); the UNESCO Salamanca Statement (UNESCO, 1994); the Dakar Framework for Action, Education for All: Meeting our Collective Commitments (UNESCO, 2000) and the UN Convention on the Rights of Persons with Disabilities (United Nations, 2006), amongst others. These international policy documents endorsed and promoted inclusive education, declaring that “every child has unique characteristics, interests, abilities and learning needs” and that “those with special education needs must have access to regular schools which should accommodate them with a child centered pedagogy capable of meeting those needs” (UNESCO, 1994, cited in Mehangi & Berger, 2015, p.67). The basis of the above emphasis on inclusive education is that inclusive mainstream and full service schools are believed to be “the most effective means of combating discriminatory attitudes, building an inclusive society and achieving education for all” (Ainscow as cited in Mehangi & Berger, 2015, p.67). Despite inclusive education being embraced internationally (Engelbrecht, 2006; Forlin, 2010; Ngcobo & Muthukrishna, 2011), the successful execution of the policy at school level is still an international challenge.

The main objective of the Education White Paper 6: Special Needs Education (DoE, 2001) is to promote inclusive education where learners with special educational needs are included in the South African mainstream and full service schools. This policy encourages accommodation of learners with a variety of learning barriers and availing maximum support to assist every learner to reach his/her best ability (DoE, 2001; Davidoff & Lazarus as cited in Mehangi & Berger, 2015). From the time when the Inclusive Education Policy was introduced in 2001, the South African Department of Basic Education invented strategies that needed to be implemented to transform the system so that learners can go to schools in the communities they belong to and also get psychoeducational assistance regardless of their difficulties. Learners diagnosed with specific learning disorder are also included in the provisions of this policy and are also encouraged to be included in mainstream schools with maximum support being offered to cater for their needs. However, the legal provisions of this policy are not effectively implemented as some parents reported that their children were referred to special schools in

order to receive maximum support as required by their educational needs. Placement of learners with specific learning disorder, especially with impairment in reading has been an ongoing practice regardless of the concessions that are available for these learners in mainstream schools.

Engelbrecht, Oswald, Swart and Eloff (2005) indicated that some parents of children with SLD decide to put their children into mainstream schools because they do not want their children to be socially excluded. These parents consider social inclusion and sense of belonging to be more significant than academic achievement, although they knew that their children would not receive maximum academic support in mainstream schools. Some parents even preferred to give more scholastic support at home and allow their children to take additional lessons in order to enable them to continue attending a mainstream school, primarily because it enables learners to feel a sense of belonging in the larger society even post school leaving (Engelbrecht et al., 2005). Some schools decided to exclude learners with SLD and place them in a remedial class or even refer them to special schools. Hence, the study by Bull (2003) found that some parents were stressed out about the exclusion of their children from “normal” classes to those with special educational needs. Segregation of learners with dyslexia also impacted the learner’s self-confidence as they felt undervalued and less intelligent. This further impacted parents as they started perceiving their children as less intelligent and incapable while some felt that their children were actually ill-treated by being unnecessarily sent to special schools.

Engelbrecht et al. (2005) reported that it takes the informed and confident parent to know that every child has a right to attend mainstream schools, irrespective of learning difficulties they may be presented with. Parents who think that mainstream schools are doing a favour by enrolling a child with learning disorders into mainstream education often compromise and take individual responsibility to ensure efficacious inclusion of a child (Engelbrecht et al., 2005). These parents take it as their responsibility to support educators and other relevant professionals, and this facilitates the process of identifying and supporting learners with special needs. According to Mehangi and Berger (2015), other parents tend to withdraw from interacting with schools because they do not want to be considered as interfering, they believe that they will be informed by teachers if their children are not coping at all. It is also true that some parents feel embarrassed and keep a distance because they do not know how to alleviate the problem. Thus minimal parental involvement also becomes a problem for teachers as they cannot solely decide on interventions without the parents’ consent. This further emphasizes that learning development is facilitated by all parties involved, including teachers, parents and

members of the greater community. Therefore, it remains important for schools and professionals to support parents and learners with dyslexia so that the goals of inclusive education can be accomplished. On that note, the next section will discuss the role of helping professionals in working with learners and parents affected by dyslexia.

2.7.3 Role of Helping Professionals in Working with learners and Parents affected by SLD with Impairment in Reading

Continued community of support is needed to work with learners, parents and schools in order to facilitate early identification, diagnosis and maximum support for learners and parents who have been affected by learning disorders (Mohangi, 2015). Professionals such as educational psychologists, occupational therapists, health care workers, social workers, speech and language therapists and other paraprofessionals may work in a multi-disciplinary means to exclude or deal with particular underlying conditions that may be the basis of barriers to learning. These professionals may also play a crucial role in providing suitable interventions and support for learners with dyslexia and their parents. According to Donald, Lazarus and Lolwana, (2010)', as well as Mohangi and Archer (2015), educational psychologists and other champions in the field of education may be required to be involved work, hand in hand with teachers, families and communities in overcoming challenges associated with learning disorders and other limitations to learning. Nonetheless, it is important to note that in a developing country such as South Africa, reaching to the above mentioned professionals may be a huge challenge to parents and learners who live in rural areas and whose socioeconomic status is underprivileged.

2.7.4 Role of Educational Psychologist in Diagnosing and Managing SLD

Educational psychologists in South Africa are chiefly responsible for assessing and supporting children with special educational needs (Farrell as cited in Mohangi & Archer, 2015), and the scope of their practice is formally defined in the Health Professions Act (No. 54 of 1974) as inter alia “assessing, diagnosing, and intervening in order to optimize human functioning in the learning and development”, as well as “applying psychological interventions to enhance, promote and facilitate optimal learning and development” (Department of Health, 2011, p.8). The educational psychologist conducts a full psychoeducational assessment to learners who are presenting with learning difficulties. The outcome of the assessment is the one that determines whether the child remains in a mainstream school or needs a different environment to facilitate their learning.

A full psychoeducational assessment and psychological report are compulsory requirements for students to receive concessions that are available for learners with a variety of learning disorders, including specific learning disorder (DoE, 2014). Institutions of higher learning also require a psychoeducational assessment to be administered in order to determine if the student qualifies for dyslexia-related concessions (Harkin, Doyle & Mc Guckin, 2015). Therefore, parents of learners with reading difficulties are required to contact the educational psychologist for assessment and report that would qualify their children for ascribed accommodations. The requirement of the psychologist's report becomes a barrier to financially needy parents who cannot afford to pay an educational psychologist although they desperately need psychological services.

In light of the scientific process of assessing and diagnosing children with SLD with impairment in reading, previous studies found that some parents are illiterate and uninformed so they do not understand the value of this process, therefore, they may not consult professionals for help (Seals, 2010; Reid and Valle, 2004; Dreyer, 2015). These findings are very much applicable to the South African context, given its political and educational history of apartheid, imbalance and deprivation of particular racial groups. Some parents may feel like they are obliged to enter the complex scientific world of special education, which may be perceived as continued oppression. Reid and Valle (as cited by Seals, 2010) reported that the process of psychological assessment and placement may be experienced by parents as a system of practices that gives authority to professionals as they often have a final say with regards to diagnoses and interventions. This is mainly applicable to some African parents who may believe that spiritual or traditional forces may be the cause the child presenting problems.

Reid (2007) suggested that parents need to take a leading role in ensuring that their children are assessed or screened for learning difficulties in case they see symptoms or a certain level of abnormality. Early identification and assessment are very essential in order to ensure that appropriate interventions are put into place as early as possible. It is encouraged that parents make use of the services provided by educational psychologists and other relevant professionals to screen their children for possible hindrances or deficits that can hinder their academic development. Lam (as cited by Dreyer, 2015) ascertained that some parents choose to send their children for assessments by experts from the medical, psychological and educational disciplines. Nonetheless Reid (2007) and Du Plessis (2012) state that parents actually need sufficient information regarding their children's difficulties in order to take them for assessment if they can afford it. Thus it is clear that some parents may not send their children

for psychological assessment or screening because they are unaware of the necessity for so doing, while others may not send their children for assessment because they cannot afford to. Reid and Valle (2004) and Reid (2007) found that some parents do not have a positive experience of working with professionals like psychologists and medical doctors because they have consulted them to seek advice, but find themselves more confused and frustrated when they did not receive straight answers or clear solutions.

The South African government has introduced a number of policies that require parent, school and community engagement in addressing the needs of learners with learning barriers, including reading impairment. However successful implementation of these policies requires effortful monitoring and ongoing educational research to learn about new developments, challenges and success of parent-school-community interaction in overcoming learning barriers. Mohangi and Archer (2015) agree that there is a great need for educational research that will focus precisely on how SLD or dyslexia affects behaviour in a domestic setting and school environment, and also study the professional role of educational psychologists in addressing such. Seabi and Economou (2012) reported that South Africa lacks pragmatic knowledge on the possible supportive role of educational psychologists in facilitating inclusive education. This shortfall is particularly manifest in areas pertaining to the impact of cooperation between schools, parents and associated health care professionals to optimize academic achievement of learners who have dyslexia. Limited knowledge on the interactive role of these parties has been evident in instances where parents do not know that they need to consult professionals such as an educational psychologist for assessment and support. At times some teachers do not refer or consult psychologists and other professionals for help because they do not know the role played by those parties in enhancing learner's academic performance. Therefore, psychoeducation and research are essential elements that need to be considered as a means of prevention and support for learners and parents affected by dyslexia.

According to the South African Department of Education's policy on inclusive education (DoE, 2001), there are two best operational methods of addressing learning barriers, those are prevention and support. Therefore, teachers and educational psychologists play a significant role in the prevention of and supporting learners and parents who are affected by learning barriers such as SLD. Teachers are often regarded as knowledgeable sources of information and key role players in schools with regards to identifying, referring and supporting learners with dyslexia (Decaires-Wagner & Picton, 2009). However, that is not always the case as some teachers are not sufficiently trained on mental disorders that impact pupil's learning and

development. Therefore, educational psychologist and other proponent professionals have the essential role to play in assisting teachers and parents so they may be able to work effectively with learners whose reading is impaired.

2.7.5 Parents' Reactions to a Formal Diagnosis of Specific Learning Disorder (dyslexia).

Parent's reaction to a diagnosis of dyslexia varies from one parent to the other. Some parents completely deny the presented diagnosis while others embrace it and seek more information to understand the disorder (Mohangi & Archer, 2015). Some parents believe that the diagnosis of SLD or dyslexia is a misfortune as it leads to discrimination and neglect of their children. According to Green, Tonnessen, Tambs, Thoresen and Bjertness (2009), the adverse impact of separating and labelling children with dyslexia could comprise poor scholastic success, as well as the possibility of psychosocial problems. Evidence indicates that most learners who have dyslexia in mainstream schools are deprived of relevant support and concessions and consequently they find it hard to perform to the level of their peers who do not have dyslexia (Nalavany, Carawan & Brown, 2011). Thus some parents may believe that it is better that their children live without any formal diagnosis as it is believed to negatively impact the lives of their children during and post school (Green et al., 2009). This shows that parents have varying experience and can be differently affected by the diagnosis of reading impairment. Thus it is essential to know their experiences so that effective strategies can be implemented to respond to their lived experiences.

The study by Seals (2010) found that some parents responded with disbelief and denial when they learned that their children were diagnosed with SLD with impairment in reading. This mostly applied to children who were diagnosed while doing intermediate and senior phase grades. Although it is usually not the first time that parents learn about their children's difficulties, they reported that they thought that their children were just slow learners, but not having a learning disorder. This is more especially because the child's intelligence was considered to be average across other areas of life. Hence, some parents were surprised and did not understand how a generally intelligent child could be diagnosed with a learning disorder.

Some parents expressed feelings of loss, disappointment, heartbreak and frustration when they were informed about the diagnosis of their children (Snowling, 2013; Mackenzie, Cologon, & Fenech, 2016 ; Delany, 2017). These parents were frustrated by the fact that professionals told them that there was nothing they could do to "fix" or eradicate the problem experienced by their children. A medical model purports that an external source is the only means of

intervention to 'fix' and change a child so that they "fit in" with society (Runswick-Cole as cited by Delany, 2017). In actual fact, professionals are unable to "fix" the characteristics of dyslexia to meet society's anticipations (Snowling, 2013), it is only through maximum cooperation between the individual child, parents, schools and the larger society that can enhance children's reading ability. As a result of this discrepancy, frustration was the common reaction in parents of the learners diagnosed with SLD.

Nonetheless, the study by Seals (2010) also found that some parents were actually relieved that they finally knew a formal diagnosis and knew what was going on with their child. Similarly, Earey (2013) concur that a diagnosis of dyslexia or SLD may be a positive and anticipated relief after a long battle to come into terms with a child's difficulties, as it provides a more specific explanation than "learning disability". Some parents that were studied reported that they did not have difficulties in telling other family members and significant others that their children have been diagnosed with learning disorder (Earey, 2013). At times children themselves are the ones who made fun of the diagnoses and told others that they were slightly different from them and needed special treatment to succeed. When learners themselves were quick to adjust and accept the diagnosis of SLD, it was easy for parents to accept the diagnosis.

Cameron and Billington (2015) also reported that some parents had positive feelings when their children were finally diagnosed with dyslexia. This is mainly because a formal diagnosis meant that their children would be able to access services and the above mentioned concessions that are available for learners with this disorder (Snowling, 2013). These parents felt that it was much more relieving that their children will be receiving accommodations and special interventions that will help them deal with a reading difficulty rather than being considered a low achiever with no assistance offered (Delany, 2017).

2.7.6 Support from Community Members

Preceding studies suggest that some parents do not receive enough support from relevant professionals and community centres to deal with challenges of parenting children with dyslexia (Baker, 2003; Woolfson & Grant, 2006). Some parents' frustration was also elevated by different and sometimes contradicting advice offered by a variety of practitioners and experts with regards to the child's inability to read (Du Plessis, 2011). This confused parents as they became uncertain of the best choice for their children. According to Baker (2003), professionals need to provide counselling and organize support groups to assist parents of children diagnosed with dyslexia. Such interventions will assist parents to better comprehend

their child's reading problems, ways of supporting them, and also capacitates them with strategies of enhancing their abilities to cope with their own emotional difficulties of parenting a child with dyslexia.

Community members in the helping professions such as Psychologist, social workers, teachers and counsellors have a huge role to play in terms of supporting parents or directing them to relevant people who can help them to deal with their children who have reading impairment. The study by Bull (2003) found that participants were actually referred by educational psychologists and teachers to attend support groups for parents with similar challenges. These parents reported that they were assisted by these support groups as they learned about ways of helping their children to deal with reading impairment and associated challenges. Parents also reported that these meetings were very helpful as they started identifying with other parents and felt that after all, each of them was not alone and could contact each other for help, advice and support. This implies that in the presence of maximum support and resources, parents are better able to support their children and successfully deal with dyslexia-related challenges experienced by their children and families.

2.8 Conclusion

This chapter presented the writings of other authors pertaining to experiences of parents whose children have been diagnosed with dyslexia. The researcher discussed the findings of contemporary literature and how they relate to the subject being discussed. In the next chapter, the researcher discussed the research methodology that was used in undertaking this study.

CHAPTER THREE: RESEARCH METHODOLOGY

3.1 Introduction

The former chapter presented a comprehensive review of the literature. This chapter presents the research methodology that was used by the researcher in the execution of this study. It discusses the exploratory research design that was used, the study site, as well as the target population of this study. This chapter also looks at the sampling strategies that were used to select the participants, the sample composition and the sample size that was selected for this study. Data collection and data analysis methods are also discussed in detail, followed by the ethical issues that were considered throughout the study.

3.2 Research Paradigm

In this study, the researcher used interpretivist paradigm because it was suitable for the type of a qualitative study that was conducted. Flick (2009) explains that interpretive paradigm is mainly about the way in which people construct and understand their subjective reality and how they confer meaning to such reality. The research methods used by interpretivist paradigm describes and construe people's emotions and experiences using qualitative rather than quantitative approach (Terre Blanche, Durrheim, & Painter, 2006; Wagner et al., 2012). The fundamental notion of interpretivist paradigm is that human beings' subjective experiences are real and people can make sense of other's experiences by engaging with them and listening to that which is communicated (Terre Blanche et al., 2006; Flick, 2009 & Wagner et al., 2012).

In relation to the paradigm's assumptions discussed above, interpretive design is deemed suitable for this type of research because it is aimed at exploring subjective experiences of parents in their natural setting and making sense of it from their perspective. This research paradigm is also in line with the qualitative research method used in this study where the researcher used qualitative data to explore, collect and analyze the participants' subjective experiences. Similar to the assumptions of the interpretive paradigm, this study explored participant's feelings and lived experiences in their living context and derived meaning as expressed and experienced by participants. Therefore, interpretivist paradigm was deemed as the appropriate paradigm for this study.

3.3 Research Design

Research design is the outline or blueprint that shows the structure of the study (Wagner et al, 2012). A research design is developed along the dimensions of the purpose of the research, the theoretical paradigm informing the research, the context within which the research is carried out and the research techniques employed to collect and analyse data (Terre Blanche et al., 2006). There are predominantly three main purposes of research, and these include explaining how a new problem can be structured and identified, describing how a solution to a problem can be developed and assessing how feasible a solution is to a given problem by providing empirical evidence (Van Wyk, 2013). These three research design methods are named exploratory, descriptive and explanatory research design.

The researcher for the current study used an exploratory design to explore parent’s experiences on parenting children who have been diagnosed with dyslexia. The foremost purpose of an exploratory research design is to explore the limitations of the context where the phenomenon occurs, to identify the conditions of interests and to recognize variables that might be found and be applicable to the study (Van Wyk, 2013). Thus, the explorative design was the most suitable because it aimed at exploring the experiences of parents whose children have been diagnosed with dyslexia. A figure has been added below to illustrate the type of research design that was used in the study undertaken.

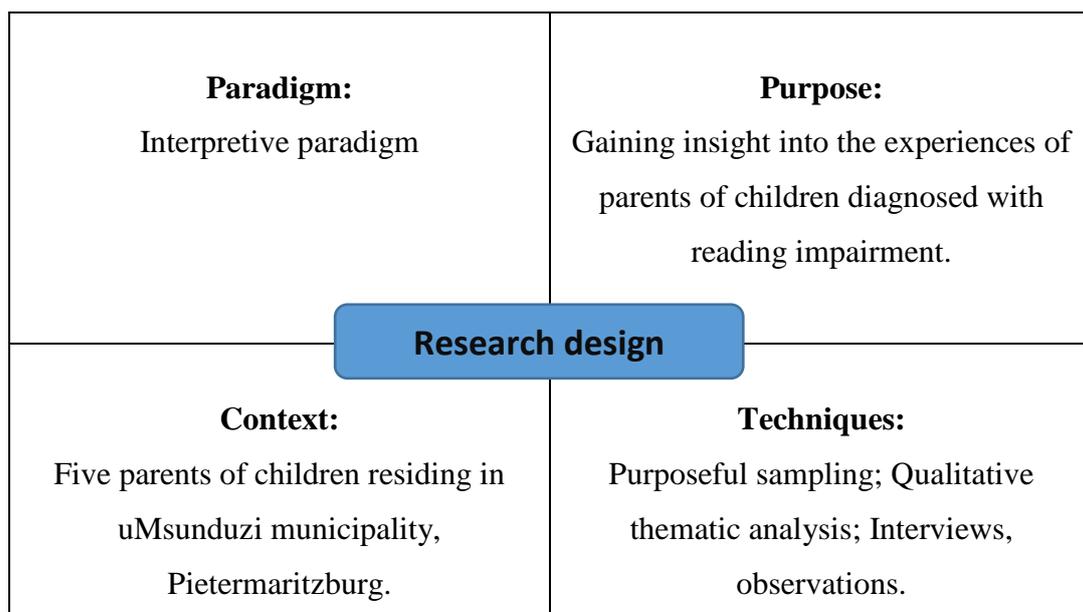


Figure 2 The research design of the current study

Furthermore, this study was conducted using the qualitative research approach because it is aimed at developing an in-depth understanding of the social phenomenon in its context. Hancock, Ockleford and Windridge (2009) state that the aim of qualitative research is to delve deep into the explanation of social happenings. In other words, it assists the researcher to explore and find out about the social world and the motives behind what is observed in the social world. Qualitative research could also be used if the event studied has to be understood from the vantage point of an individual or group that occupies a singular or highly specialised role in the society.

The qualitative method is used in cases where the phenomenon is not well defined or when that matter being studied is genuinely seated in the individual's knowledge and experiences (Ritchie, Lewis, Nicholls & Ormston, 2013). Hence, this was the suitable methodology for this study as it meets the required conditions for using qualitative research. According to Haji (2006), the research methodology reflects the general orientation through which the research is conducted. In broad terms, the difference between a quantitative and qualitative research approach is that "quantitative research emphasizes on quantification in the gathering and analysis of data, whereas a qualitative strategy emphasizes on words" (Bryman, 2004 as cited in Wagner et al., 2012, p. 61).

3.4 Study Site

This study was conducted in Pietermaritzburg, the capital and second-largest city in KwaZulu-Natal province, South Africa. Pietermaritzburg is located in the Msunduzi Local Municipality. The study was conducted at Mvuzo Secondary School and Ekukhanyeni Special School located in Pietermaritzburg.

3.5 Target Population

The target population is defined as the entire group of people or objects to which the researcher wishes to generalize the study findings (Haji, 2006). The target population was parents of children (on selected schools) who have been diagnosed as having reading impairment.

3.6 Sampling Strategy

Sampling is defined as the process of selecting a sample that is going to participate in the study (Wagner, Kawulich & Garner, 2012). There are two main sampling techniques, namely the non-probability sampling (qualitative sampling) and probability sampling (quantitative sampling) methods (Wagner et al., 2012).

This study used nonprobability sampling which is a process where the selection of research participants depends entirely on the researcher's judgment (Van Wyk, 2013). The type of non-probability sampling method that was used in this study is called purposive sampling, where the researcher purposefully selected the participants that were included in the study. Purposeful sampling was suitable for this study because the researcher needed learners who were already diagnosed with dyslexia. Hence knowing children who were previously identified as having reading impairment made it possible for the researcher to purposefully select parents who could participate in this study.

After receiving ethical approval and gate keeper's letter (see Appendix D and E), the researcher contacted selected schools and was further permitted to conduct the study. The schools gave the researcher a list of parents of learners with reading impairment. The researcher then purposefully selected those parents who met the criteria and were believed to have first-hand experience in terms of parenting children with dyslexia. The researcher issued a screening tool or letter (see Appendix B) that was sent to parents so they may indicate if they have an interest in participating in the study. Parents who responded were then phoned and invited to meet the researcher. Before commencing with the interviews, participants were thoroughly informed about the study and their rights as indicated in the informed consent letter in Appendix A. Following that, parents who wanted to participate were asked to sign informed consent letter (Appendix A) before the commencement of the interviews.

3.7 Sample

A sample is a subset of the entire population selected to participate in the study and it provides the data needed to understand a research problem (Sekaran & Bougie, 2010). The researcher selected five participants from two schools in uMsunduzi municipality, the sample included parents of children who were diagnosed with dyslexia (SLD with reading impairment). To select the participants, the researcher worked with the learner support teacher in the identified schools. The school handed the list of parents who have children who were diagnosed with dyslexia or SLD reading impairment. The researcher then purposefully selected those parents who met the criteria and were believed to have first-hand experience in terms of parenting children with dyslexia. The table below shows the demographics of the study sample.

Table 2

Demographics of the study sample

Individual interview	Gender	Age	Relationship to child	Level of education
1	Female	55	mother	Grade 7
2	Female	62	grandmother	Grade 5
3	Female	42	mother	Grade 11
4	Female	69	grandmother	Grade 6
5	Female	45	mother	Grade 12

3.8 Sample size

The sample size of the current study consisted of five participants who had first-hand information on parenting children with dyslexia. The diagram below demonstrated the demographics of the study sample.

3.9 Data Collection Technique

The data collection method that was used in this study was semi-structured interviews, where the researcher designed a set of open-ended questions that were used during the interviews (see Appendix C). Wagner et al. (2012) clarified that open-ended questions often outline the topic being studied and allow both interviewer and interviewee to converse on the finer points of the topic. The interview guide was developed by the researcher and guided by the research questions under study. The development of the interview guide was also informed by the literature which suggests the use of the standardised open-ended question approach to develop a research interview guide. According to Turner (2010), standardised open-ended questions allow the participants to contribute as much information as possible and the researcher to ask probing questions of follow up. Interviews were conducted in the isiZulu language because the participants speak the isiZulu language. Collected data was then translated from isiZulu to English for convenient analysis and presentation of data.

During data collection, the researcher used a tape recorder to record the data and later transcribed the content of the interviews. The data was transcribed by the researcher using a continuum with two dominant models which are naturalism and denaturalism practises. According to Davidson (2009), “for the researcher who uses a continuum method of transcribing, naturalism describes transcription practices that seek to provide as much details as possible, and denaturalism as practices where idiosyncratic elements of speech (e.g. stutters,

poses, non-verbal cues) are removed” (p.8). Using both naturalism and denaturalism methods were appropriate because the researcher needed to capture and analyse as many details of the interviews as possible (experiences and emotions) without adding any redundant information such as poses, stutters, “ums” and “ers”.

3.10 Data Analysis

Data analysis in qualitative research is an ongoing process; as initial observations, conversations, and interviews are collected the researcher analyses and codes them, in order to discover the nuances of the context, the perspectives and the beliefs of the participants (Creswell as cited in Haji, 2006). Qualitative data analysis is defined as “working with data (which are textual, non-numerical and unstructured), organising it, breaking it into meaningful units, synthesising it searching for patterns, discovering what is important and what is to be learned, and deciding what to tell others” (Creswell, 2009, p. 150). In a nutshell, qualitative data analysis is all about “taking apart” or de-contextualizing, sifting or sorting masses of information acquired during the process of data collection and organising or re-contextualising it in such a way that the themes or categories and interpretations that emerge from this process address the research problems and the ensuing question posed at the outset of the research (Creswell, 2009).

In this study, the researcher used thematic analysis to analyse the collected data (Sekaran & Bougie, 2010). Thematic analysis is a process of reviewing data, making notes and sorting the data into categories. Thematic analysis helps researchers to move from handling crude data to discovering patterns and developing themes (Braun & Clarke, 2006). Six thematic analysis phases were followed in this study, as discussed below:

3.10.1 Phase one: familiarization with the data

This is the initial phase where the researcher read and started analyzing data during and after transcription. The reader further familiarized herself with data on completion of the transcription and also start creating potential codes (Braun & Clarke, 2006).

The researcher started the familiarization phase from the time of transcribing and interpreting the data after interviews. Furthermore, the researcher also read the transcripts repeatedly to become more familiar with data and the underlying meaning.

3.10.2 Phase two: generating initial codes

In this stage, the researcher generated the initial list of items from the data set that have a reoccurring pattern (Braun & Clarke, 2006). This coding was also informed by the research questions.

For an example codes such as PPE (parent's personal experience), PSI (parents-school interaction) and PCR (parent's community resources) were generated and noted on the recurring pattern. By the end of this phase all data was coded and collated, and a list of the different codes was identified across the data set.

3.10.3 Phase three: searching for themes

The researcher searched for themes that related and those that did not relate to each other. Codes were analyzed and combined to form main themes in the data. This enabled the researcher to have a list of themes (Braun & Clarke, 2006).

The generation of themes was also guided by the underlying theoretical framework and the research questions. For an example all codes that related to PPE, PSI and PCR were grouped together to form main themes and sub themes. Irrelevant themes that neither related to each other nor answered the research questions were discarded.

3.10.4 Phase four: reviewing themes

The researcher, in this stage, expanded and revised the main themes as that emerged. This allowed the researcher to have potential themes with some themes collapsing into each other, and others condensed into smaller units (Braun & Clarke, 2006).

For an example, the code for the first generated theme was 'PPE' which stands for parent's personal experience. Below the main theme, other sub codes such as 'EM' for emotional experience were generated and those became subthemes. Some themes collided into each other such as 'KC' (knowledge of concessions) and 'IE' (inclusive education).

3.10.5 Phase five: defining and naming themes

In this stage, the researcher identified themes and gave suitable names or subtitles to the themes that emerged in the study and how each theme impacted on the outcomes of the data (Braun & Clarke, 2006).

For an example, during this phase, the researcher reviewed the coded data extracts for each theme to consider whether they appear to form a coherent pattern. The subthemes that had a similar train of thought were grouped together and given a name for example, all codes that related to each other were named as EM (emotional experience), FE (financial experience), PE (parenting experience), then all these subthemes were titled PPE (Parents Parenting experience) and this became the first main theme.

3.10.6 Phase six: Writing the final report

This stage allowed the researcher to write the final report after finding the main themes and subthemes. The researcher decided and reported on themes, especially those that enabled her to answer the research questions underpinning the study (Braun & Clarke, 2006).

For each individual theme, the researcher conducted and wrote a detailed analysis, identifying the story that each theme told. During report writing, themes titles or names were continuously refined so that it reflected the content of the theme while it also made clear sense to the reader.

3.11 Trustworthiness: Data Quality Control

Merriam (2009) stresses the significance of generating valid, as well as reliable findings when undertaking qualitative study. According to Anney (2014), trustworthiness is a more obscured concept as it is put in different terms because qualitative researchers do not use instruments with established metrics about validity and reliability of the study. However, in simple terms, trustworthiness is a concept that refers to the establishment of credibility, transferability, confirmability and dependability of the research findings of a qualitative study (Anney, 2014). Nowell, Norris White and Moules (2017) further add that trustworthiness is one way researchers can persuade themselves and readers that their research findings are worthy of attention. According to Shenton (2004), there are four different ways that can be used in a qualitative study to ensure trustworthiness, those include credibility, transferability, dependability and confirmability. Credibility and dependability are concepts that are frequently utilized when referring to ensuring trustworthiness and rigour of the study (Merriam, 2009).

Credibility in a qualitative study recognizes that reality is subjective and that it can be easily influenced by a number of factors. Therefore, in order to ensure credibility in this study, the researcher provided enough details and supporting evidence to meet the standard for credibility. Participants' checks were done as this is considered to be very effective in evaluating the integrity and quality of a qualitative study (Van Wyk, 2013).

Dependability is about ensuring consistency in qualitative research (Shenton, 2004; Terre Blanche et al., 2006). In order to ensure dependability in this study, the researcher ensured adequate engagement in data collection, reflexivity, interactive questioning as well as scrutiny of the research project by the supervisor.

According to Wagner et al. (2012) and Van Wyk (2013) confirmability refers to the extent to which the research findings can be confirmed or corroborated by others. Shenton (2004) explained that confirmability is the qualitative researcher's comparable concern of objectivity. In this study, the researcher used the literature review to support the choice of research methodology used and also to confirm the findings of the study so that the findings are those of the informants and not the preferences of the researcher. Furthermore, in the completion of data analysis participants were asked to confirm the findings based on their experiences and perceptions as they were better qualified to verify plausibility of research findings since they provided the data (Wagner et al., 2012). This was done by giving them a copy of findings or requesting a verbal confirmation of findings to those who could not read.

According to Shenton (2004) and Wagner et al. (2012), transferability is about the possibility of transferring the research findings to similar contexts. With regards to this study, although the findings cannot be generalized to the larger population, who are parents of children with dyslexia, it is believed that the findings would be transferable to other parents of learners who have been diagnosed with dyslexia in the province of KwaZulu-Natal, who are in context similar to those of this study's sample.

3.12 Ethical Considerations

Strewing & Stead (as cited in Wagner et al., 2012) stated that research ethics guide researcher's actions during the study to be more ethically acceptable. The ethical considerations prevent researchers from acting unethically such as the inability to maintain confidentiality, forcing participants to participate in the study, disregarding participant's consent, plagiarism, misrepresenting data and failing to manage data in a professional manner (Van Wyk, 2013). Ethical considerations also include considering method in which research is conducted and presented to participants, the possible impact of the study to participants, impacts of sampling methods and engaging with the researcher during the study (Wagner et al., 2012 & Van Wyk, 2013). Therefore, the ethics that were considered in this study included the obtainment of ethical approval and gate keeper's letter, preserving confidentiality and anonymity, informed consent, information management and professionalism throughout the study.

3.12.1 Ethical Approval

As per the requirement of the university, ethical approval for this research was obtained from the University of KwaZulu-Natal's Humanities and Social Sciences Research Ethics Committee (HSSREC) (see Appendix E).

3.12.2 Gate Keeper's Permission

As this study was conducted within KwaZulu-Natal DoE, the researcher obtained a gatekeeper's letter from this department in order to give her permission to conduct the study (see Appendix D).

3.12.2 Informed Consent

Informed consent is the ethic that the researcher also considered to ensure that each participant is well informed about the study and participates voluntarily. The researcher gave and explained the consent letter to the participants before the beginning of the study. Thus human dignity was upheld by seeking informed consent from the participants and they participated in the study based on the adequate knowledge they were given about the study (see Appendix A). These consent forms or letters were voluntarily signed by the participants of the study and kept by the researcher.

3.12.3 Anonymity and Confidentiality

Wagner et al., (2012) explained that confidentiality means that the researcher should make a commitment to keep identifying details of participants confidentially. The researcher ensured that participant's identifying details were kept confidential by using pseudonyms to refer to participants throughout the study. All participants remained anonymous and no names except pseudonyms were used in this study. Privacy and confidentiality were upheld as the participants were reminded of their right to limit access to their private information during interviews.

3.12.4 Management of Information

Information management is about professional management of the information collected during the study (Wagner et al., 2012). During and after the study information had been managed in a confidential manner by safe guarding the tools that were used during the research such as the tape, notes and transcript of the recordings. The researcher also informed participants that the tape recordings and transcript with raw data were to be kept in the supervisor's office and shall be erased or destroyed after the period of five years.

3.13 Conclusion

This chapter provided detailed information regarding the research methodology that was used in the study. This chapter included a discussion of the research design used in the study, the research methodology, sampling and sampling strategies, data collection and the data analysis method. This chapter concluded with ethical issues that were cautiously considered during the study. The next chapter will present the findings of the current study.

CHAPTER FOUR: FINDINGS

4.1 Introduction

The previous chapter presented the research methodology that was used in the current study, and this chapter now presents the data collected in this research. The findings are presented according to themes that emerged from the data, which are aligned with the research questions. The research questions sought to explore: a) how parents understand dyslexia and how they have experienced parenting children diagnosed with dyslexia; b) parents' experiences on interacting with schools in assisting their children diagnosed with dyslexia; and c) parents' experiences regarding the use of resources in their community to assist children with dyslexia. The chapter ends with a conclusion on parents whose children were identified as having reading impairment.

4.2 Parents' Understanding of Dyslexia and how they have Experienced Parenting Children Diagnosed with Dyslexia.

Under the first theme, the following subthemes emerged during data analysis and will be presented herein: Parents understanding of dyslexia, parent's emotional experiences when parenting children with dyslexia, parent's experience of behavioural problems of children with dyslexia, parent's experiences in helping children with homework, parent's experience regarding financial circumstances, as well as parent's experience of support from significant others.

4.2.1 Parents Understanding of Dyslexia and its Underlying causes.

The participants shared common insights with regards to their understanding of dyslexia and its underlying causes. There was a clear pattern of the lack of knowledge and understanding about what dyslexia is. Although their children were diagnosed with specific learning disorder with impairment in reading, they neither knew what it means nor the underlying causes of the disorder.

This was well noted from a participant's response stating that:

I do not even know what that is. I know that the psychologist said she could not read and could not write. I really do not know what caused such a problem in my child, but I know that it became worse after being sexually abused (P1).

I do not know what dyslexia is. I only know that the social workers said the child has reading and learning difficulties so he needed a special school. I am not really sure what is causing his learning difficulties. But I know that he was infected with HIV when he was born (P2).

I do not know what dyslexia is, I don't even know if my child has dyslexia or not, I just know that he is a slow learner I am not sure what caused it but I know that his mother didn't finish school so it could be his maternal family thing (P4).

The data that emerged in this theme suggests that parents do not seem to seek clarity from the diagnosing professional on what exactly is the problem or diagnosis that their children were found to have. They seem to accept what they are told and refrain from asking questions of clarity regarding the child's presenting problems and possible underlying issues.

4.2.2 Parents' Emotional Experiences when Parenting Children with Dyslexia.

The participants communicated shared feelings of guilt, depression, helplessness, worry and great concern for the future of their children. Most of them were concerned about their children's future financial stability, considering that they are not succeeding academically and therefore are likely not to find secure jobs for themselves.

This was depicted in a response by one of the participants:

It is very frustrating to parent such a child and I feel like I have exhausted all my options and I don't know how to help her anymore. I really feel abused myself (...crying...) mainly because from the time she was identified as having learning difficulties, it has been a long standing burden that I have to bear on my own (P1).

Common articulation is represented in the response of the participant who also reported that:

I have experienced a lot of problems and emotional difficulties parenting this child... That is very emotionally draining because as a parent it is not a nice thing if your child is side-lined all the time.... That has been a difficult experience and you start asking myself, what is it that I didn't do well that my child is going through such an awful experience ...I get very worried and concerned if I think about his future. Where will he get a job, who will employ him and where. Thinking of is stressful on its own because I don't get anywhere with my thoughts (crying) (P3).

Common experiences were shared by 2 respondents who reported that:

That is the most stressful part for me because I need money to all those trips, and I don't have money. To tell you, parenting this child is very frustrating and stressful for me... So all of that makes you feel less useful as a parent (P2).

Personally, I find it very difficult to calm her because at times I also feel embarrassed, guilty, frustrated seeing that I cannot do anything to help at the present moment... I worry a lot about the future of my child... It hurts the most (P5).

This theme reveals that most parents experience emotional difficulties which are not attended to. This implies that most parents lack support and guidance on how to cope with difficulties associated with parenting a child with a learning disorder. This means that the government and relevant professionals need to put more effort into supporting parents.

4.2.3 Parents' Experiences of Behavioural Problems of Children with Dyslexia.

The study also revealed that parents are experiencing behavioural changes and problems with children who have reading impairment. Some children start presenting with behavioural problems after being diagnosed, feeling side-lined and different from their peers and siblings. This becomes a challenge to parents as they don't know how to deal with in addition to the other list of problems they experience.

This was depicted from the participant's corresponding response who mentioned that:

Even at school they recently reported behavioural problems where she doesn't pay attention in class, is playful and developing a negative attitude towards her school work. All of that is new because she used to love school and has been a disciplined child until lately (P5).

Her behaviour has changed rapidly, from being a soft and teachable child to being an angry and short tempered child. She is now sensitive to things said about her and often say that she thinks I don't love her... she is generally rebellious and does not want anything to do with books at home (P1).

Similar to the above, the other participant said that:

His teacher previously told me that he is good in maths but now he has completely changed. He doesn't want to study anymore. He gets easily annoyed and does not want to do any school related work (P2).

The issue underlying these findings indicates that learning difficulties and behavioural problems are intertwined. It could be inferred that learning difficulties can lead to learners presenting with behavioural problems as they may consider different defence mechanisms that could manifest as unacceptable behaviour.

4.2.4 Parents' Personal Experiences in Helping Children with Homework.

During the study, participants reported different personal experiences pertaining to helping their children with homework. A common trend was reported where parents or grandparents (guardians) were not helping their children with homework because they also had reading difficulties.

This was well noted from a participant's response stating that:

Now I am old, I can't read so I can't afford assisting him because even myself I need assistance. During those times he used to be rebellious and angry when asked to do academic work (P3).

Another participant reported similar experience, stating that:

I don't help him with homework as I said that I didn't go to school and I don't see properly, so he is being assisted by his older sister. But he is generally a cooperative child who loves learning, especially if you don't shout at him and are patient enough with him (P4).

Another participant supported this idea by articulating that:

She does not want to do school work. She spends most of the time on her cell phone or watching Television. Nonetheless even myself I am not very good with reading as I was out of school at an early age (P1).

The above data shows that some learners are not assisted with homework because parents cannot read. This suggests that lack of academic support from home can be considered as the exacerbating factor because children are not supported sufficiently as needed. Thus parental

academic support plays a significant role in scaffolding or helping learners to reach their full potential, whether they have learning disorders or not. Implying that the absence of support could have a detrimental effect where learners are not further stimulated in their home environment.

Some participants highlighted their emotional frustration and how they lose their temper and raise their voices at their children when they are trying to help them with homework. A common pattern emerged where parents become angry at children when they are not able to master reading skills.

This common articulation is represented in the response of the participant who reported that:

I also get angry and frustrated and I beat him at times because I think he is being so weak and unnecessarily sensitive. After assisting him with homework I blame myself for being harsh on him because I see that it is not helping either and I feel stuck and confused, not knowing what exactly I have to do for this child to learn and read like others. Of late, he becomes scared and fears if I want to help him with school work. I also don't like the fact that he is scared of me, but what can I do because I want him to learn to read (P2).

Another respondent articulated that:

I think she feels embarrassed if she fails to execute tasks in front of her siblings. She often becomes very stubborn if I shout at her because at times I lose my temper and get angry at her for not being able to read basic words (P5).

The above parents' experiences show that there is a close relationship between learning problems, parenting styles and behavioural problems. In response to children's learning difficulties, parents may use 'inappropriate' parenting styles which may lead to children presenting with behavioural problems as a way of coping.

4.2.5 Parents' Experiences Regarding Financial Circumstances

Participants in this study reported that they are experiencing a lot of financial strains and demands since their children were diagnosed with dyslexia. Parents reported that they were required to spend a lot of money travelling and consulting different professionals to seek help.

This was noted on the corresponding participants' response who reported that:

The fact that I've had to move from one doctor to the other, from one school to the other has been a difficult experience because it requires a lot of money and emotional fitness. So there are financial, emotional and social difficulties that we go through when trying to support this child (P4).

Here at school they often call me to see different professionals or take him somewhere. That is the most stressful part for me because I need money to all those trips, and I don't have money (P3).

Finances are also seriously affected because I usually have to go from one professional to the other, as I said that she is taking medications so she needs to go to the hospital every month, while the school is also in town so I need money to take her to school if the school bus is not available. All of that is problematic for me because the social grant is not enough for all needs. (P2).

The above responses indicate that there seems to be a difficulty in the availability and accessibility of multi-disciplinary professionals within the Department of Education and this extends stress and despair amongst parents with low economic status. Thus the underlying concern in this theme is that parents with low economic status are likely to present with poor coping abilities because they experience additional stress as they cannot afford taking children to specialists.

4.2.6 Parents' Experience of Support from Significant others

During the study, most participants reported that they were not receiving support from significant others in helping children with dyslexia. Parents felt like their children with reading impairment were their 'own burdens' and no one else was playing a role in supporting them.

This was noted from the response of the participant who reported that:

I really feel abused myself (...crying...) mainly because from the time she was identified as having learning difficulties, it has been a long standing burden that I have to bear on my own (P1).

Another participant reported that:

At the moment I am able to take care of him and provide financially but in my absence who will do that because I'm the only responsible adult in his life. His father passed on and his paternal family do not see a problem in him, so I'm all alone in this (P3).

Similarly, even grandparents who take care of children with dyslexia felt that even the children's biological parents were not supportive of them or their children as she stated that:

I happen to worry a lot about his future because his parents are very careless and they didn't finish school so they don't pay attention to the child's educational needs. So I get very worried when I think of his future. If I die now what is going to happen because I'm the only one who has taken care of him from birth till date, as his parents are alcoholics (P2).

The absence of support for parents of children with learning disorders implies that there has not been enough psychoeducation done amongst communities to educate them about learning disorders and associated problems. Learning disorders seem not to be recognised as 'real' disorders that needs as much attention as other developmental or childhood psychological disorders such as ADHD, Down's syndrome and so forth.

4.3 Parents' Experiences Regarding their Interaction with Schools in Assisting their Children Diagnosed with Dyslexia.

The following subthemes emerged and will be discussed under this theme: Parent's experience of ongoing school- parent interaction, parent's experiences on the lack of ongoing school-parent interaction, as well as parent's experience on teacher's role in assisting learners with dyslexia and parents.

4.3.1 Parents' Experiences of Ongoing School- Parent Interaction.

Throughout the study, it was noted that most participants reported that they have an ongoing and good relationship with some of the teachers. This kind of continued communication served as a form of support to parents as they felt informed and involved in the process of teaching their children.

This is depicted from responses of the following participants:

In his current school communication really improved because we had a good relationship with his new class teacher and she was really very supportive to my child. I have been communicating with her very often and she often told me if there is anything concerning with my child's behaviour or school work (P3).

Yes, I used to interact with her teachers in the previous school and also her current school. In her former school they called me twice, firstly it was reporting that they are noticing behaviour and academic problems and she needed further assistance from professionals (P1).

In agreement to the above experiences, other respondents articulated that:

I think we have a very good relationship with teachers in this school. They often write me letters inviting me to the school if there is a need. I really think they are doing all they can to support him and call me on board if there are professionals who can be able to help the child (P4).

Yes, I do interact with her teachers, in fact from primary school we used to interact with teachers and they would tell me how much difficulty she is having with studies. I have had a good relationship with teachers throughout (P5).

This theme suggests that there are schools with teachers who ensure that they maintain an active ongoing relationship with parents. This implies that some schools play a significant role in implementing the policies of the Department of Education which requires the involvement of parents in the education of their children.

4.3.2 Parents' Experiences on the Lack of Ongoing School- Parent Interaction

Although participants reported continuous communication and stable relationship between themselves and teachers, some of them also indicated that some teachers were not communicating with them (in some grades). So it seems as if teacher's dedication and passion determined whether they will communicate with parents or not.

Minimal communication was reported by the following respondents:

In her current school, there hasn't been much communication besides parent's meetings. We have not been invited for special parent-teacher meeting. Such that I only heard from the child that this year will be their last year at school because they will be turning 18. But we were not formally informed by the school as parents (P1).

I wouldn't say there was a two-way communication between myself and teachers because even on our first meeting, I am the one who initiated contact with the school in order to inform them that my grandchild was having hearing problem on his left ear. That was the time that they reported that he is actually having reading difficulties (P2).

Some teachers are good, supportive and understanding, while some do not care at all. I had a conflictual relationship with his grade one teacher because he always communicated negative things to the child rather than informing me about what the child was doing. She was threatening my child that she will take her to the special school because he is not doing the work, and that discouraged my child (P3).

The last response shows that the principle of inclusive education in mainstream schools is not practised as learners are discriminated by teachers on the basis of their academic abilities. Hence it's one of the reasons why parents might consider it as the best option to remove their children from the mainstream and take them to special schools.

4.3.3 Teacher's Supportive Role in Assisting Learners and Parents with Reading Impairment.

In this study, some participants strongly believed that teachers are putting enough effort to support children and parents whose children have reading impairment.

This is well depicted in the response of the participant who mentioned that:

Well, although I don't know much but teachers have been making means to contact us if there is something important to be reported. More especially because they are the ones who found a school for my daughter so effort has been invested to help me and my child (P1).

In support of that thought, another participant said that:

I really think they are doing all they can to support us (myself and child) because they call me on board if there are professionals who can be able to help the child. They even assisted in finding the suitable school for him (P3).

Contradictory, some parents believed that teachers work hard to teach and support learners where possible, but some of them as parents usually feel left out and unsupported in the process.

This is well depicted in the responses of the respondents who articulated that:

I think teacher is working hard in assisting our children and improving their performance. I know they reported that he seems to be good in maths, but the main problem is reading and writing own sentences. But I don't think they put any effort in helping us as parents. They also seem uninformed when it comes to learners with learning difficulties (P4).

I don't think teachers are doing much to understand and support us as parents, some of them support children only. At times even if you seek more information and understanding they wouldn't give you as much clarity as you need". I really didn't understand why they returned his hearing aids while it was actually prescribed by the doctor (P2).

As much as I'm not informed about the department of education but the only thing they have done so far is to promote her to the next grades (due to previous repetition or age) and letting her repeat where possible. I don't think they have done anything special to assist my child. Same thing applies to us as parents, I don't think teachers are making any means to give us more information about the child's condition. If you are not educated, you remain like that and feel obliged to agree to whatever they put on the table as an option (P5).

The issue that unfolded in this theme is that some parents feel neglected and unsupported by the education system. Hence, this could be one of the factors that propels parental stress because they feel excluded, unknowledgeable and unsupported on how to deal with the difficulties they face when parenting a child with dyslexia.

4.4 Parents' Experiences Regarding the use of Resources in their Community to Assist Children with Dyslexia.

The following subthemes emerged under this theme and will be discussed herein: Parent's experience on the availability and use of resources in assisting children with reading impairment, parent's experience about consulting helping professionals to help learners and parents affected by dyslexia, inclusive education and specific learning disorder with impairment in reading, parent's knowledge of concessions that are available for children with dyslexia as well as the assessment and placement of learners with dyslexia.

4.4.1 Parents' Experiences on the Availability and use of Resource in Assisting Children with Reading Impairment

The results of this study indicate that some participants believe that their communities have enough resources available to assist learners with learning problems and their parents. Most of these parents were satisfied with the services they received and happy that their children were eventually placed in suitable schools.

This was well noted from a participant's response stating that:

I think the government is trying their best to provide services to the community in order to help learners with reading difficulty. For an example, I was told to take my child to Fort Napier where she consulted a psychologist and was placed in a special school. The psychologist also referred me to Edenvale hospital to see social workers to help her cope with behavioural and emotional issues following the incidence of being raped. The psychologist consulted her without any fee (P1).

I can also say that the government is trying their best to help us and affected children because I was assisted by the school principal to find a special school for him. Just like I also told you that I am seeing psychologists at Edenvale hospital to help me cope with depression. He also consults social workers at the hospital where they are given counselling about ARV's and they are advised about healthy living habits (P4).

Some participants believe that there are not enough resources to help learners with reading difficulties in communities they live in. Most of these parents were not happy about the option of taking children to special schools as the only viable solution offered by teachers in mainstream schools. The trend of dissatisfaction with the available resources was noted from the respondents who mentioned that:

I don't think the community has enough resources to assist learners with learning difficulties. If there was enough of professionals, then learners with learning difficulties should be supported inside mainstream schools without them being removed to special schools because when they get to special school, their academic needs are not prioritised, rather they are treated as intellectually defective individuals who cannot learn (P3).

I don't know of any supportive community resources that are available here for learners with reading difficulties because even the nearest library cannot assist someone who can't read on their own. I also don't know of any support groups and I don't think it exists, more especially because support lacks even within our families. Teachers are the only ones that help children, failing that, then they are sent to special schools (P4).

I don't think there are enough resources to help children with learning disorders because if there was enough then my child would have received suitable help. When I asked at school what they were going to do to assist him, they said they have referred the case to the department of education and they will be coming to school to do assessment. Until today I have been waiting for that psychologist to come and assist my child but nothing has been done (P5).

This theme reveals an issue of the lack of support for learners who experience dyslexia and go to mainstream schools. The available assistance is found in hospitals who hardly provide any psychoeducational assessment and interventions. This suggests that although the Department of Education encourages inclusive education, there are not enough resources to support parents and learners with dyslexia.

4.4.2 Experience about Consulting Helping Professionals to Help Learners and Parents affected by Dyslexia.

Most of the participants have consulted a number of helping professionals to help their children with reading impairment. Professionals consulted ranges from Doctors, psychologists, teachers and social workers in a variety of settings. This is well depicted in the participant's response where they mentioned that:

I was told to take my child to Fort Napier where she saw a psychologist and was placed at a special school. The psychologist also referred me to Edenvale hospital to see social workers to help her cope with behavioural and emotional issues following the incidence of being raped (P1).

Yes, I consulted a social worker who initially placed him in a special school. When attending special school, I am not sure whether he was seen by the psychologist or not. Although I know that there is a professional who met him several times before he started attending, I am not sure whether that was a social worker or psychologist (P2).

I did not see a psychologist. What happened is that I went to Imbalenhle clinic and the social worker referred me to the Doctor at Edenvale hospital. The doctor then wrote a referral letter that allowed him placement at a special school (P3).

The above responses suggest that the Department of Health is playing a vital role in terms of providing services to learners and parents who need psychological intervention. However, this is very concerning because the above mentioned professionals in the Department of Health can only offer limited services, and the question is where then do parents and learners find full psychoeducational interventions to address dyslexia-related challenges?

4.4.3 Inclusive Education and Dyslexia (SLD with Reading Impairment).

The study shows that the policy of inclusive education has not been implemented in all school attended by the children whose parents were interviewed in this study. Four of these children were all removed from mainstream schools and placed in special schools where they are currently attending due to reading impairment. Only one of five learners is still attending a mainstream school with minimal or no support reported. The following table shows the current academic enrolment of learners with dyslexia whose parents participated in the study. This table clearly shows the reality with regards to the lack of inclusive education as learners with dyslexia seem not to be accommodated in mainstream schools.

Table 3

Current academic enrolment of participants' children with dyslexia

Learners attending special school	Learners attending main stream school
Child of Participant 1	Child of participant 5
Child of Participant 2	
Child of Participant 3	
Child of Participant 4	
Total in special schools: 4	Total in main stream: 1

In support of the lack of inclusive education in main stream schools, participants mentioned that:

I don't think the community has enough resources to assist learners with learning difficulties. If there were enough of professionals, then learners with learning difficulties could have been supported inside mainstream schools without them being removed to special schools because when they get to special school, their academic needs are not prioritised, rather they are treated as intellectually defective individuals (P4).

I don't think there are enough resources to help children with learning disorders because if there was enough then my child could have received suitable help. When I asked at school what were they going to do to assist, they said they have referred the case to the department of education and they will be coming to school to do an assessment. Until today I have been waiting for that psychologist to come and assist my child (P5).

The only option that I was told about was removing a child and placing him in a special school. I don't think mainstream schools know what to do with children with learning problems, besides removing them from mainstream schools (P3).

This theme implies that the South African Department of Education has not done enough to provide the necessities for implementing inclusive education in mainstream schools. This study has revealed that the Department of Education lacks relevant professionals who are needed to support special needs learners within mainstream schools, teachers do not seem

fully capacitated to implement inclusive education and the only viable option is taking learners to special schools.

4.4.4 Parent's Knowledge of Concessions that are Available to Assist Children with Learning Barriers such as Dyslexia

According to the participant's responses, it appeared that none of the participants knew about concessions or remedies that are available for learners with reading impairment in schools. Most of them were informed that placement at the special school was the only option. . This finding also supports the above analysis (Table 4.1) indicating failure of the implementing inclusive education in mainstream schools. This is well noted in the following response from the participant who reported that:

I do not know anything about concessions or remedies that are available for learners with reading difficulties. As I said the school only called me twice, to report the problem and to place her in a special school, upon my permission. So we didn't talk about anything that could have been done as they believed that removal of a child from the mainstream was the best option (P1).

I do not know about concessions available for learners with impaired reading. The only option that I was told about was removing a child and placing him in a special school. I don't think mainstream schools know what to do with children with learning problems, besides removing them (P2).

I was never told about accommodations available for learners with impaired reading. I was only told that the child will be placed in a special school and nothing else was said to be the best possible remedy for the child in his situation (P3).

The fact that all participants were not informed about the available concessions brings a serious concern of questioning whether teachers know about these concessions. It seems as if teachers in mainstream schools lack knowledge about accommodations to be used to inclusively assess learners with learning disorders and other special needs.

4.4.5 Assessment and Placement of Learners with Dyslexia

The study has shown that multiple professionals have been involved in assessing learners and placing them in special schools. According to the participants' responses, professionals such as social workers, medical doctors, clinical and educational psychologist have been involved in assessing and placing learners in special schools. Although assisting children with learning barriers require the effort of multi-disciplinary team, educational assessment and placement recommended by any professional could be confusing to parents as they may not know who is allowed to assess and place children in special school necessary and who is not allowed.

This is depicted in the participant's response who stated that:

I consulted the psychologist at Fort Napier hospital. I think their services are very useful because they helped my child to be placed in a suitable school (P1).

Yes, I consulted a social worker who initially placed him in a special school. When attending special school, I am not sure whether he was later seen by the psychologist or not. Although I know that there is a professional who met him several times before he started attending, I am not sure whether that was still a social worker or psychologist (P2).

I did not see a psychologist. What happened is that I went to Imbalenhle clinic and the social worker referred me to the Doctor at Edenvale hospital. The doctor then wrote a referral letter that allowed him a placement at a special school (P3).

The underlying issue in this theme is the lack of uniformity and accessible resources to help learners with dyslexia. It seems as if anyone can assess and determine whether to keep them in mainstream school or place a child in a special school. This implies that learners with learning disorders are very much disadvantaged and they do not get well deserved services to address their learning needs. This could add to parental stress if their children are identified as having learning difficulties.

4.5 Conclusion

This chapter presented the collected data in a form of themes that emerged during the study. The succeeding chapter will discuss the outcomes of this research in relation to the current body of knowledge, and the findings will be analysed, discussed and supported by the contemporary literature found.

CHAPTER FIVE: DISCUSSION

5.1 Introduction

In the preceding chapter, the findings of this study were presented thematically. This chapter presents the discussion and interpretation of these findings, divided into three main sections that relate to the research questions; namely a) parents' understanding of dyslexia and how they have experienced parenting children with dyslexia, b) parents' experiences regarding their interaction with schools in assisting their children with dyslexia, and c) parents' experiences regarding the use of resources in their community to assist children with dyslexia. The chapter ends with a conclusion on the findings discussed.

5.2 Parents Understanding of Dyslexia and how they have Experienced Parenting Children Diagnosed with Dyslexia.

This section discusses the study's finding on the first theme which is parents' understanding of dyslexia and how they have experienced parenting children diagnosed with dyslexia. Under this theme, the following subthemes emerged during data analysis and will be discussed herein: parents understanding of dyslexia, parents' emotional experiences when parenting children with dyslexia, parents' experience of behavioural problems of children with dyslexia, parents' experiences in helping children with homework, parents' experience regarding financial circumstances, as well as parents' experience of support from significant others.

5.2.1 Parents Understanding of Dyslexia and its Underlying Causes

This study found that most parents had limited knowledge of the definition of dyslexia and its underlying causes. They knew that their children were diagnosed with a learning disorder which means they had a learning difficulty, but they could not define what dyslexia is and what causes it. The study was done by Seals (2010) also found that parent's understanding of dyslexia was very limited as some of them thought SLD with impairment in reading was genetic or an exhibition of laziness and inattention to school work (Seals, 2010). Similar to this study, some parents thought dyslexia was due to laziness, hence some of them tried pushing their children harder while others were harsher to them with the hope of achieving changes in their learning. Some parents in this study believed that dyslexia is a genetic disorder that was transferred from the previous generations.

The issue that evolved in this theme is that parents seem not to understand the meaning of the disorder and its underlying causes. This implies that there is a lack of mutual understanding

between professionals and parents, furthermore, parents tend to hesitate to ask the professionals questions of clarity. Seals (2010) had similar findings which indicated that in most cases parents are 'left in the dark' as they do not understand the scientific terms and professional jargons that are used by professionals.

5.2.2 Parent's Emotional Experiences When Parenting Children with Dyslexia.

This study ascertained that parents experienced a variety of negative feelings because of parenting children with a learning disorder. Their emotional experiences were inclusive of feelings of guilt, sadness, disappointment, frustration, stress and sometimes depression. Similarly, previous studies show that parents and guardians experience a range of negative feelings associated with stress and guilt when parenting children who are diagnosed with learning disorders, more especially reading impairment (Dreyer, 2015; Du Plessis, 2011 & Seals, 2010).

One of the themes that developed in this study is that participants reported that they were stressed and worried about their children. This implies that the above mentioned negative feelings are very prominent amongst parents and guardians of children with reading impairment. In line with the findings of this study, research done by Bull (2003) found that amongst 12 participants of parents of learners with dyslexia, nine of them reported that they felt very stressed", "awful" or "just terrible". Similarly, the findings of Dreyer (2015) suggested that parents reported feeling very worried and anxiously seeking "quick fixes". Emotions of "frustration, shock, fear, uncertainty, resistance, confusion, sadness, anger and feeling out of control were reported commonly. These parents also stated powerlessness and dismay as they wanted to help their children, but not knowing how.

All participants' who responded to this study were female parents and guardians. In most cases, the fathers were either deceased or not involved in the child's life. Hence, it was found that in this study, mothers and grandmothers who are primary care givers of these children reported being stressed and frustrated by their child's learning difficulties. Correspondingly, studies by Snowling, Muter and Carroll (as cited in Delany, 2017) and Karande et al. (2009) reported that mothers specifically were mainly found to present with increased stress levels and depression as they reported major effects on family and increased difficulties in everyday life. The utmost evident maternal concerns were pertaining to both emotive and practical difficulties, mainly because of their children's continuous scholastic underachievement which was related to loss of self-esteem, feeling irritated, withdrawing from social activities and the development of

aggressive behaviour in their children (American Academy of Paediatrics, 2011; Bonafacci et al., 2014; Delany, 2017 and Earey, 2013).

The findings of these studies imply that female parents and guardians are more vulnerable to stress if their children are identified as having this disorder. This is similar to the findings of Snowling (as cited by Bonifacci et al., 2014) who studied the impact of learning difficulties on the family, and found that approximately 74% of the parents reported that their child's difficulties had a mild to severe impact on family life and that mothers of children with dyslexia had higher levels of stress and depression. Similarly, Karande, Kumbhare, Kulkarni and Shah (2009) reported mild anxiety levels including a list of worries in mothers of children who were undertaking a diagnostic evaluation for specific learning disorders.

The study also found that most parents experience a certain level of guilt when they question what they could have done wrong or omitted for their children to be experiencing reading difficulties. They continued to try hard to help their children improve their reading ability, but it has not been a success in most cases. In relation to these findings, a South African study done by Du Plessis (2012) established that parents of children with learning difficulties often experience common emotions of frustration, confusion, anger, guilt, as well as helplessness, as their children presented with reading impairment. Parents often believe that their children's ability to learn and develop mainly depends on them, therefore learning difficulties such as reading impairment could evoke feelings of guilt, anger and frustration as they may believe that they have contributed or failed to prevent such an unfortunate circumstance (Du Plessis, 2012; Dreyer, 2015). Parent's fruitless effort of forcing children to read may be the source of frustration and helplessness, seeing that their effort is not eradicating the reading impairment.

This theme revealed that parents lack support from teachers, significant others and professionals on how to deal with problems that are associated with specific learning disorder. Hence this propels parental stress and emotional difficulties. This is confirmed by the study conducted by Heaton (as cited in Earey, 2013) which found that parents lack knowledge on how to support a child with reading impairment and they feel that their needs are usually overlooked. Parental stress and emotional problems can be accounted for by the lack of support from relevant persons (Delany, 2017; Machail, 2010).

5.2.3 Parent's Experiences of Behavioural Problems of Children with Dyslexia.

This study ascertained that parents experience difficulties in managing their children's behavioural problems that mainly manifested after being diagnosed, and sometimes removed from full service school. The study found that most children did not present with behavioural problems until they were diagnosed with reading impairment and later moved from their schools or treated differently from their peers and sibling. These findings corroborate the findings of a study by Lenz and Deshler (as cited in Seals, 2010) who found that many adolescents diagnosed as having a learning disorder often develop secondary characteristics that are due to inexorable academic underachievement during their primary years of schooling. Adolescent's recurrent fruitless efforts and failure may create anger and unjust negative perception of self and others.

Parents reported that they were stressed by all the demands of parenting children with reading impairment. According to Bonifacci et al. (2014) and Delany (2017), parents of children diagnosed with dyslexia reported that they were undergoing a high degree of parental stress. Scott (2004) and Howie-Davies and McKenzie (2007) argued that some parents did not necessarily stress about their children's inability to read but the fact that such difficulty is accompanied by behavioural and social problems which made parenting very challenging as they are required to nurture and discipline at the same time. Scott (2004) and Karande and Kuril (2011) stated that a parent's chronic stress and inadequate parenting styles may trigger behavioural problems in children. This implies that one problem could lead to the development of the other if not well attended to. These findings confirm the assumptions of Epstein's (2002) model of intertwined spheres which equally affects the developing child. Thus it is very important to attend to all multiple spheres (parents, school, and community) in order to enhance the healthy development of the child at the centre.

The issue underlying the findings in this theme indicates that learning difficulties and behavioural problems are intertwined.

5.2.4 Parents' Personal Experiences in Helping Children with Homework.

Helping children with homework is the responsibility of every parent with a school going child. However, this study found that helping children with dyslexia to do their homework can be a difficult and challenging thing too. Parents reported that their intervention to help their children with homework turned out to be bitter and undesirable because they ended up being harsh towards their children if they could not complete academic tasks successfully, especially

reading basic words. It was found that parents become impatient and angry with their children if they cannot read. This makes it further difficult because children end up avoiding homework time and parental assistance because they fear being beaten and reprimanded. This finding of this study is synonymous with findings of previous studies, which state that while parents may provide help, in most cases they are reported to become impatient and angry (Bonifacci et al., 2014). According to Preston (as cited in Du Plessis, 2015), parents described feelings of anger, nervousness, hopelessness, frustration, aversion, humiliation, as well as worry when trying to help their children with academic tasks. When parents become impatient and frustrated, their efforts to assist their children are likely to result in developing of a negative self-concept, low self-esteem, and more resistance to do academic tasks, and at times it could lead to behavioural problems (Dreyer, 2015).

According to Du Plessis (2015) and Dreyer (2015), parental involvement in completing academic tasks does not only improve children's scholastic aptitude but further enriches the child's perception of own capability and self-management. Therefore, if the study reveals that some parents are impatient and express feelings of anger and annoyance if children are not able to read or write, it becomes very concerning to think how much damage parents inflict on their children when assisting with homework. These results show that parents equally need help and support to deal with their children with learning barriers so they can contribute to the enhancement of a better child. According to Earey (2013), parents are believed to be able to enhance a positive self-concept in their children or further make them feel inferior and less confident to complete academic tasks. Research by Dreyer (2015) has shown that parents can enhance their children's self-esteem by being cooperative, patient, appreciative, praising good effort, awarding them for success and encouraging them to compete with themselves, not peers.

The current study also found that sometimes parents have difficulties in helping their children with homework because they also have a poor reading capability. A number of parents reported that even though they know the value of education in the current generation, they are unable to help their children because they cannot read properly on their own. Their reading difficulties were either due to early drop out of school or history of experiencing learning difficulties during their childhood. Correspondingly, Bergen (as cited by Bonifacci et al., 2012) indicated that among children at family risk of dyslexia, the parents of those who developed dyslexia were also assessed and found to have lower scores in letter recognition, word reading fluency, as well as digits rapid automatized naming (RAN) compared to parents of children who did not develop dyslexia. These findings are suggestive of the possibility that parental reading skills

are related to children's reading performance. Delany (2017) argued that the parent's personal difficulty with reading could be the contributing factor of stress as it hugely impacts their ability and confidence to assist children with homework.

The findings of this theme infer that there is a close relationship between learning problems, parenting styles, as well as the manifestation of behavioural problems in affected children. Bonifacci et al. (2014) state that while parents may be helpful in assisting children with homework, in most cases they are reported to become impatient and angry. According to Preston (as cited in Du Plessis, 2015), parents reported constant feelings of nervousness, anguish, irritation, rage, worry, embarrassment, as well as fear when their children struggle with academic tasks. When parents become impatient and frustrated, their efforts in assisting children is likely to result in the establishment of a negative self-concept, low self-esteem, and more resistance to do academic tasks and at times it could lead to behavioural problems (Dreyer, 2015).

5.2.5 Parents' Experiences regarding their Financial Circumstances

Consulting different professionals to seek assistance and support a child with reading impairment is one of the things that was found to require a lot of money and cause financial constraints on parents. Therefore, it was ascertained that being identified as having a learning barrier is not only emotionally and socially straining but it is also financially demanding. The results of this study are confirmed by the study by Dreyer (2015) found that parents experienced financial implications when their children were presented with reading problems, mainly because they were referred to a number of professionals outside the school, such as a psychologist, optometrist, paediatrician, speech therapist and so forth. This put further strain on parents as they spend a lot of money consulting these professionals for help.

Poon-McBrayer and McBrayer (2014) argued that due to the demands of parenting a child with specific learning disorder, some parents may decide to leave their occupations in order to fully attend to their children's educational needs. With regards to the population that was studied, quitting your job is not a viable solution as most of them are not employed and most of them rely on social grants because they do not have other sources of income. The study revealed that most of these parents have a low socioeconomic status and sometimes they lack money even for going and returning from school if they are called for a meeting. This implies that unemployed parents are likely to experience more financial difficulties if their children are diagnosed with learning impairment. Hence, Bonifacci et al. (2014) argued that financial

constraint get worse for unemployed parents who have unstable sources of income as they cannot afford the services that are needed to help their children. However, Michail (2010) suggested that well educated, financially stable and socially secure parents are likely to understand dyslexia-related problems and consequently, cope well with their child's diagnosis.

A concern that transpired in this theme is that parents reported experiencing financial constraints when required to consult multi-disciplinary professionals in order to help their children who have reading impairment. It became clear that parents' financial status impacts their coping abilities as those who are financially stable do not worry about spending money on their children while those with low economic status are further stressed by this need. The study by Michail (2010) established that well educated, financially stable and socially secure parents are likely to understand dyslexia-related problems and consequently cope well with their child's diagnosis. These types of parents usually can afford to consult professionals for diagnosis and suitable interventions.

5.2.6 Parents' Experience of Support from the School and Significant Others.

According to Hassal, Rose and McDonald (2005), "social support is defined as the availability of meaningful and enduring relationships that can provide nurturance and security" (p. 45). There is an African belief that a child is not the sole responsibility of his or her parents but the entire community has a role to play in raising children (Mugumbate & Nyanguru, 2013). The same level of support and understanding is expected for children diagnosed with dyslexia because they still own a full right of being a child like any other. However, this study found that parents of children diagnosed with dyslexia feel lonely and lack support from significant family members. Keller and Honig (as cited in Du Plessis, 2011) explained that social support may be inclusive of resources provided by significant others who are outside the family such as informational, instrumental, psychological, and material resources. This type of support is what is reported to be missing to parents and children with dyslexia.

According to Marmot and Wilkinson (2006), social support is considered to be useful and often essentially serves as a buffer when faced with tough circumstances such as parenting a child with a learning disorder. This study implies that lack of social support affects parents' coping ability as they feel lonely, unsupported, find it difficult to cope and lack external support to deal with dyslexia-related problems. According to Bull (2003), Bonifacci et al. (2014) and Delany (2017), parents of children diagnosed with dyslexia reported that they were undergoing

a high degree of parental stress mainly because they were feeling isolated, less empowered and lacking social support from significant others.

The reported absence of support for parents and learners with dyslexia implies that there has not been enough psycho-education done to educate communities about the nature of this disorder and things that need to be done to overcome its limitations. Learning disorders seem to receive less attention than other psychological disorders. According to Howie-Davies and McKenzie (2007), parents of children with learning disorders such as dyslexia reported that they were not getting enough information and assistance from communities, schools and professionals compared to those parents of children diagnosed with neurodevelopmental disorders such as Down's syndrome, ADHD or Autism spectrum disorder. Dyson (as cited in Seals, 2010) inferred that perhaps professionals do not consider learning disorders to be equally important as other disorders.

5.3 Parents' Experiences regarding their Interaction with Schools in Assisting their Children Diagnosed with Dyslexia.

The second theme that will be discussed in this section is parent's experiences regarding their interaction with schools in an attempt of helping children with dyslexia. The following subthemes emerged and will be discussed under this theme: Parent's experience of ongoing school-parent interaction, parent's experiences on the lack of ongoing school-parent interaction, as well as parent's experience on teacher's role in assisting learners and parents with dyslexia.

5.3.1 Parents' Experiences of Ongoing School-Parent Interaction.

This study found that parents had an ongoing interaction with teachers at some point in the education of their children. Although it is not every school, grade and every year that parents experienced continued interaction with teachers regarding the education of their children, but at some point, they had cooperative teachers who often invited them to school or informed them if there were important things they needed to know regarding their children. Similar findings were established by the study by Seals (2010) which also found that some parents reported having a good experience in terms of their interaction with teachers who were knowledgeable and supportive to them and their children who had dyslexia. These teachers often communicated with parents and shared effective ways that can be used to teach children at home despite their reading difficulties.

The presence of support from some teachers was noted as a positive noteworthy issue in this theme as it indicates that there are teachers who work hard to maintain a healthy relationship between schools and parents and also ensure the best possible parental participation in learner's education. Reid (as cited by Earey, 2013) emphasized that at times it happens that schools are considered as experts in identifying and supporting learners with dyslexia, while parents are generally considered as less knowledgeable about the matter. However, the reality is that at times the opposite is also possible where parents are more knowledgeable about learning conditions such as dyslexia and types of interventions required than teachers. Therefore, constant interaction between parents and schools is essential in order to capacitate both parties and consequently benefit the child in need of support.

However, some parents argued that at some point teachers do not communicate with them regarding issues that pertain the education of their children. It happened that in some grades or years, teachers were less cooperative and there was minimal communication between teachers and parents. Some parents even reported that they were sometimes updated by their children if there are changes or messages from the school regarding their progress, without any official notification. A study by Meier and Lemmer (2015) indicated that parents generally agreed that the schools are often successful in maintaining conventional school-home communication by means of school reports and quarterly parent meetings. However, some schools are not doing well in informing parents about the progress, achievements and shortcomings of learners, academic enrichment opportunities, as well as parental assistance for home-based learning. Similarly, this study revealed that even though parents are sometimes invited for parent's meetings to discuss general school issues, they are rarely invited to discuss individual children's academic progress. These results are in line with those established by previous studies where parents reported that they communicated once or twice with teachers when attending parent's annual meetings (Dreyer, 2015; Du Plessis, 2012; Woolfson & Grant, 2006).

The results of this study show that parent-teacher interaction is not being fully practised in schools as stipulated and required by the (DoE, 2001). Although to a certain extent, there are those teachers who were reported to be investing effort in maintaining a healthy parent-school relationship, this level of communication does not seem to be at the level that is required by the Department of Education. According to the Education White Paper 6 (DoE, 2001) and Screening, Identification, Assessment and Support (SIAS) policy (DoE, 2014), parents are considered as cooperative decision-makers and active role players in developing educational plans for their children. This implies that parents are expected to participate, be informed and

knowledgeable regarding their children's academic progress (Seals, 2010). However, this study established that parent-teacher interaction in schools is not practised as required. Furthermore, research suggests that although the importance of joint responsibility and active relationship between parents and schools has been emphasized, there seems to be minimal communication and cooperation between schools and parents of learners with learning barriers (Fong as cited by Dreyer, 2015).

5.3.2 Teacher's Supportive Role in Assisting Learners with Dyslexia and their Parents

The results of this research indicate that some parents believe that teachers play a supportive role to learners identified as having learning impairment and their parents. These parents were satisfied with the teacher's interventions in trying to assist learners and referring them to relevant professionals where possible. However, the study also suggests that the presence of ongoing parent-teacher communication makes parents feel more supported and understood, while the absence of support could propel parental stress and feelings of despair. However, maintained healthy relationships or interaction between teachers and parents allow parents to be less defensive, seek more information regarding their children's conditions, and are willing and able to support their children where they can. The study indicates that during the years or grades where there were active communication and support from the teacher, it was experienced as a manageable year because parents felt that they were supported. These findings confirm those of Seals (2010) who found that sometimes parents believed that it was encouraging to see the teacher who has a positive attitude and sincere ambition to assist the child who battles with reading. Teacher's compassionate understanding was a very comforting experience to parents when their child's scholastic performance was not progressing as anticipated.

Nonetheless, other parents believed that they were not receiving enough support from teachers. Mainly in terms of being informative, cooperative and understanding of their circumstances. The outcomes of the study show that parents did not have a clear understanding of the type of diagnosis or disorder that their children were presented with. Parents did not get enough information either from teachers or professionals who diagnosed the child. This makes parents feel left out and not understood. According to Machail (2010) and Delany (2017), parents also seek a better understanding of what their children are experiencing so they can be able to support them as required. However, insufficient knowledge and support exert additional pressure and frustration, which leads to feelings of helplessness, as parents are unable to effectively assist their children to be able to read. Supportive and caring parents, with sufficient

social support, were found to be effective in assisting children with impairment in reading and other learning disorders (Boniffacci et al., 2014). This implies that parental support is also essential for the parent to be able to help the child. Epstein's (2002) theory of overlapping spheres is further applicable in this case because it shows that parent, teachers and learners cannot work in isolation but they need each other's support and expertise in order to achieve the main objective of developing the child concerned.

The outcomes of this study further suggest that most parents believe that teachers are putting sufficient effort into helping their children who have reading difficulties. However, parents indicated that they feel left out and they do not get enough information and support regarding the child's condition. Ultimately they end up agreeing to any intervention offered by teachers because they feel less knowledgeable and less empowered to be involved in decision making. Likewise, Heaton (as cited in Earey, 2013) found that most parents do not know how to effectively support their children with reading impairment and they feel that their needs are often forgotten. This study also suggests that most illiterate parents often feel left out of teachers' or professionals' discussions because they believe they do not know much, so their contribution is not valued. These findings are in line with the suggestions of Seals (2010) who explained that the lack of parental involvement in the education system could be due to lack of mutual understanding between parents and professionals who work in the teaching and helping profession, such as teachers, psychologists and so forth.

Some parents felt less supported because they were either not informed about the child's learning difficulties or there were no effective measures effected in mainstream schools to help their children cope with their learning difficulties. Those parents who felt unsupported were generally satisfied by the bureaucratic processes that are followed to assist their children. The procedures followed were perceived by parents as failing and ineffective, especially when it comes to supporting children in mainstream schools. These findings are confirmed by Rose (2009) and Earey (2013) who articulate that parents tend to feel increased anxiety when seeking appropriate help for their child and only to find that bureaucratic processes appear to move slowly in providing effective interventions to help students overcome reading difficulties. Parents often need to face undaunted and uncooperative teachers when attempting to advocate for their child and this causes additional stress to parents (Karande et al., 2009).

This noteworthy issue identified in this study is that the absence of parental support and involvement could be one of the factors that propel parental stress when learners are identified

as having reading impairment. According to Earey (2013), the lack of parental support and communication between parents and the school could induce feelings of helplessness and hopelessness in the parents and learners concerned.

5.4 Parents' Experiences regarding the use of Resources in their Community to Assist Children with Dyslexia

The third theme that emerged in the study is about parents' experiences regarding the use of resources in their community to assist children with dyslexia. This theme will be discussed in terms of the following subthemes that emerged under this theme: Parent's experience on the availability and use of resources in assisting children with reading impairment, parent's experience about consulting helping professionals to help learners and parents affected by dyslexia, inclusive education and specific learning disorder with impairment in reading, as well as the assessment and placement of learners with dyslexia.

5.4.1 Parents' Experiences on the Availability and use of Resource in Assisting Children Dyslexia

One of the themes that emerged in this study includes a belief that the community of Pietermaritzburg has adequate resources to help children and parents of learners with reading impairment. The study found that some parents believe that their community has enough resources because they were able to access and use those facilities to assist their children with reading impairment. The list of the facilities or resources identified by parents includes helpful teachers, psychologists mainly from Fort Napier hospital, social workers, doctors, clinical psychologists and social workers from Edenvale hospitals, intern psychologist placed in schools, as well as locally available special schools.

Nonetheless half of the participants believed that their communities do not have enough resources and facilities to help them and their children with learning difficulties. This perception mainly came from parents who were not happy about taking their children to special schools as the only viable solution for helping children with reading impairment. Other parents believed that the government is not providing enough skilled professionals and the means of helping learners who have reading problems. In order to confirm these findings Geldenhuys and Wevers (2013) articulate that South African schools lack the capacity for the early identification of learners who experience barriers to learning, proper assessment and limited collaboration and cooperation between microsystems. Furthermore, some parents were found to lack knowledge and understanding regarding the services and professionals they needed to

contact in order to help their children. Reid (2007) and Du Plessis (2012) add that parents actually need sufficient information regarding their children's difficulties in order to take them for assessment and suitable interventions if they can afford. Thus some parents were found to lack information on the conditions of their children and where to find relevant help. Moala (2011) concurs that although policy emphasizes accommodation of children with learning barriers in ordinary schools, no additional financing has been allocated to support this, so children with learning barriers do not receive the necessary support.

A concern highlighted by this theme is that the Department of Education lacks resources and facilities for implementing inclusive education in mainstream schools. Although the South African Department of Health plays a significant role of offering psychological services to learners such services are very limited and consequently, learners in mainstream schools are deprived of psychoeducational interventions because of the lack of resources within the department. According to Grigg and Borman (2014), the lack of resources is mainly due to inadequate funding by the South African DoE to the provincial education departments, as well as vague guidelines given to officials. Hence the insufficient budget links with poor resources and employment of relevant professionals in the department.

5.4.2 Experiences about Consulting Helping Professionals to Help Learners and Parents affected by Dyslexia.

This study found that most of the parents who participated in the study have consulted a variety of professionals in helping their children with learning barriers. Bojuwoye, Moletsane, Stofile, Moolla and Sylvester (2014) emphasise that the provision of support for effective learning in schools ought to extend beyond the institution and that the aim of providing support services is to serve as a capacity building strategy in addressing learning difficulties. Continued community of support is needed to work with learners, parents and schools in order to facilitate early identification, diagnosis and maximum support for learners and parents who have been affected by learning disorders (Mohangi, 2015). Hence the results of the study indicate that some parents believed that it was not difficult for them to consult professionals such as psychologist, doctors and social workers to help their children. The local hospitals and schools seem to be playing a critical role in assisting parents and their children who have reading problems.

This study also found that as part of the parent's experience of consulting multiple professionals, some parents felt confused by the professional's contradicting perspective. As

parents were referred to different professionals, some of them were advised to follow different interventions plans which were sometimes reported to be in contradiction and confusing to parents. Likewise, Reid and Valle (2004) and Reid (2007) found that some parents do not have a positive experience of working with professionals like psychologists and medical doctors because they have consulted them to seek advice, but find themselves more confused and frustrated when they did not receive straightforward answers or clear solutions. These findings suggest that there is a need for cooperative working relationship amongst multiple professionals that are involved in supporting and helping learners with learning barriers and affected parents.

In this theme, it was noted that the lack of resources and relevant service providers within the Department of Education seem to compromise the education of learners with learning barriers such as reading difficulties. More confusion seems to be created by multiple interventions that are outside the department. This supports the findings of Donohue and Borman (2014) who stated that the general lack of support and resources largely contributes towards the general bewilderment and difficulty implementing inclusive education in South African schools.

5.4.3 Inclusive Education and Specific Learning Disorder with Impairment in Reading.

The findings of this study indicate that most of the local mainstream schools do not seem to be implementing the policy of inclusive education. The main objective of the Education White Paper 6: Special Needs Education (DoE, 2001) is to promote inclusive education where learners with special needs are included in the South African mainstream and full service schools. This policy encourages accommodation of learners with a variety of learning barriers and availing maximum support to enable all learners to develop their potential (DoE, 2001; Davidoff & Lazarus as cited in Mehangi & Berger, 2015). The outcome of this study proves that inclusive education is not practised by many schools as most of the learners whose parents participated were later placed in special schools due to their learning difficulties. Most parents accepted placement of their children in special schools because they were told that special schools and prevocational schools are the only ones that could assist their children, not mainstream where they initially enrolled.

The study outcomes also suggest that parents did not know about other options and interventions that can be employed to assist their children while in mainstream schools. According to DoE (2014) learners with barriers to learning and assessment may qualify for an array of concessions which addresses their individual barriers. Dyslexia or impairment in reading is listed as one of the recognized learning barriers and learners diagnosed with SLD

with impairment in reading/writing are considered as lawful potential recipients of the variety of accommodations. According to DoE (2014) learners with reading, writing impairment or dyslexia are entitled to a variety of concessions. The following concessions were made available for learners with dyslexia: “getting a scribe/reader/extra time, amanuensis, computer, typewriter, spelling and handwriting flag, sign language interpreter, oral assessment (for internal assessment only) and being exempted from certain compulsory subject offerings” (DoE, 2014, p.7). The study found that none of the participants knew about the above accommodation. Parents reported that they were never told about such concessions, but placement in special school has been granted as the only available condition for learners with SLD as they do not cope in mainstream schools. Moala (2011) argues that while substantial physical and structural access to schooling has been achieved in South Africa, learners do not have equal opportunities or experience equal access to quality education. This implies that learners who are excluded or denied a learning opportunity in mainstream schools due to reading difficulties are actually denied a right to quality education that they are legally entitled to.

Unsuccessful implementation of inclusive education in selected Pietermaritzburg schools was also established in the study by Mayaba (2008) who found that teachers felt ill-equipped and had negative perceptions towards implementing inclusive education. The main concern reported by teachers who participated in that study was that sometimes they had a negative attitude towards learners with barriers to learning and they do not seem to know how to respond to them. Similarly, findings by Savolainen, Engelbrecht, Nel and Malinen (2012) indicate that South African teachers scored low on self-efficacy and confidence in accommodating and teaching with learning barriers. The findings of these previous studies concur with the results of the current study because after so many years post introduction of inclusive education, learners with learning barriers are still excluded and not accommodated in mainstream schools. According to Norwich (as cited in Mayaba, 2008) and Donohue and Borman (2014), one of the things that causes teachers’ negative attitudes and reluctance to implement inclusive education policies is mainly the lack of training and necessary equipment for in inclusive education. Furthermore, Pillay and Terlizzi (2009) argued that although inclusive education may be a way forward to access equality for all, it can be contended that the current South African socioeconomic environment does not necessarily allow for its successful implementation as more access to resources and facilities need to be made available.

Therefore, in the absence of relevant information and resources, teachers tend to see special schools as the only viable solution for learners with barriers, including reading impairment. Thus successful implementation of inclusive education requires multi-disciplinary teamwork, as well as an integrated effort of all relevant spheres in order to support learners with learning disorders as suggested by Epstein's (2002) model.

5.4.4 Assessment and Placement Learners with Dyslexia.

The findings of the current study suggest that a variety of professionals have been 'assessing' and recommending placement of learners in special schools. According to the participant's responses, professionals such as social workers, medical doctors, clinical and educational psychologists have been 'assessing' and recommending placement of learners in special schools. Although a child with learning barriers might require different interventions from different professionals, overlapping roles done by these professionals could be confusing to parents as they may not know who is eligible for which types of services. Nonetheless, Reid (2007) and Du Plessis (2012) argue that parents need to be informed and advised about available services and professionals who can be contacted to help their children who have learning barriers. According to Lam (as cited by Dreyer, 2015), some parents choose to send their children for assessments by professionals from the medical, psychological and educational disciplines. Although multiple professionals may be involved in providing professional services to learners with learning difficulties, there are specific professionals who are qualified and allowed to provide psychoeducational assessment and recommend suitable interventions.

Educational psychologists in South Africa are mainly responsible for assessing and supporting children with special educational needs (Farrell as cited in Mohangi & Archer, 2015), and the scope of their practice is formally defined in the Health Professions Act (No. 54 of 1974) as inter alia "assessing, diagnosing, and intervening in order to optimize human functioning in the learning and development", as well as "applying psychological interventions to enhance, promote and facilitate optimal learning and development" (Department of Health, 2011, p.8). A full psychoeducational assessment and psychological report are compulsory requirements for students to receive concessions that are available for learners with a variety of learning disorders, including specific learning disorder (DoE, 2014). Institutions of higher learning also require psychoeducational assessment to be administered in order to determine if the student qualifies for dyslexia-related concessions (Harkin, Doyle & Mc Guckin, 2015). The above provisions clearly show that the principal job of educational psychologists is to assist in

optimising children's learning and development as explained above. Hence, even though other professionals also have a critical role to play, psychoeducational assessment and placement of learners are for designated professionals.

According to Donald, Lazarus and Lolwana, (2010), as well as Mohangi and Archer (2015), educational psychologists and other champions in the field of education need to engage and collaborate with teachers, families and communities in overcoming challenges associated with the presentation of a specific learning disorder, and helping to prevent and address other barriers to learning. However, Mohangi and Archer (2015) agreed that there is a great need for educational research that will focus specifically on the way that specific learning disorder intersects the home, classroom, and professional support from an educational psychologist. Seabi and Economou (2012) reported that South Africa lacks empirical knowledge on the potentially supportive role of the educational psychology field within inclusive settings. This shortcoming is particularly evident in this theme where professional roles are intertwined and professionals are working in silos to help children with reading difficulties. Thus there is still room of improvement for parents, teachers, multiple professionals, as well as the community at large to work collectively in order to help children with learning difficulties. This further emphasizes Epstein's (2002) theory which outlines the significance of careful interaction of different spheres (school, parent and community) in assisting children with learning difficulties such as SLD.

5.5 Conclusion

This chapter presented the analysis and discussion of the findings of the current study. The study outcomes were discussed in relation to the contemporary literature on parent's experiences in terms of parenting children with dyslexia, interacting with schools in assisting their children diagnosed with dyslexia, as well as the use of community resources in assisting children with dyslexia. The next chapter will consist of the conclusion and recommendations.

CHAPTER SIX: CONCLUSION AND RECOMMENDATION

6.1 Introduction

The study was undertaken in an attempt to explore the experiences of parents who have children who have been diagnosed with dyslexia in secondary schools of Msunduzi municipality. The study intended to find out about parents' experiences in terms of parenting children with dyslexia, interaction with their schools and making use of community resources in order to try and help their children overcome reading impairment. The focus of this chapter will be the presentation of significant conclusions and the formulation of relevant implications.

6.2 Conclusions Regarding the Research Questions

The study was carried out in order to find out about experiences of parents who have children who have been diagnosed with dyslexia in secondary schools of Msunduzi municipality. Findings of this study lead to a few conclusions.

The first question was concerned with how parents understand dyslexia and how they experience parenting children diagnosed with dyslexia. The findings of the study indicate that many parents seem to lack an understanding of the meaning of SLD and its aetiology. Parents suggested their own causal factors that they thought could have predisposed their children in this condition. However, what they believed to be the aetiology did not reflect the causal factors suggested by relevant studies. Hence, this clearly shows that participants of the study did not understand the condition that their children are presenting with, and this brings a serious concern of how do they intervene and appropriately assist their children if they lack understanding of the problem and its underlying roots or causes.

The study found that all participants were experiencing emotional difficulties in parenting children with reading impairment. These emotional responses ranged from anger, guilt, frustration, depression, hopelessness and fear for the future. Parents experienced difficulties in dealing with their children's behavioural problems which presented as secondary problems associated with SLD. It appeared that parents' lives are holistically affected when their children are diagnosed or identified as having SLD with impairment in reading, it was very clear that parent's finances, emotional and psychosocial wellbeing and family function was impacted. Hence, it can be concluded that the diagnosis of dyslexia/SLD with reading impairment does not only affect the child concerned, but parents are hugely affected and they also need equal support to deal with challenges so they can be able to assist accordingly.

The second research question explored parents' experiences regarding their interaction with schools in assisting their children diagnosed with dyslexia. The study suggests that although some schools were making effort to communicate with parents, most schools did not involve them in the education of their learners. Some parents believed that some of their children were receiving sufficient support from schools but most of them felt like their needs were ignored and they were not considered part of the system. Although policies and theories fully support equal involvement of parents in the education system, it does not seem to be practised effectively in schools. The study indicates that the absence of the flawless flow of information between parents and teachers does not benefit the child concerned and or any of the parties involved because each of them keep their frustrations within them. Hence it can be concluded that the Pietermaritzburg schools studied need to improve their interaction with parents, and also involve them in the education process and decision making that pertains to their children's education.

The third question tapped into parents' experiences regarding the use of resources in their community to assist children with dyslexia. The study established that the KwaZulu-Natal Department of Education appears to lack resources and relevant professionals that can help learners with learning difficulties, including dyslexia. Although the Department of Health seems to be playing a critical role in providing psychological services, these services do not seem sufficient as they lack the educational aspect. Hence, it came out strongly that there is a need for improving availability of relevant and appropriate service providers and facilities in order to facilitate the implementation of inclusive education. The study shows that the absence of resources within the Department has left teachers with no option other than removing learners with reading impairment from mainstream schools to special schools so they can be supported. Although this is very much in contrary with the education policies, teachers seem to feel overwhelmed and unable to help these children within mainstream schools. Moreover, the study indicates that parents did not know about any of the concessions that are offered by the Department to assist children with reading impairment. Information on accommodations was not made available to parents who participated in this study, rather they were told that referral to special schools was the only viable option to help their children as they could not read. This also speaks to the Department of Education itself and how much inconsistency exists between their policies and implementation thereof, especially at grassroots level.

The third research question yielded findings which suggest a need for improved working relationships between multi-disciplinary teams within the Department of Education and other

relevant departments. The study found that multiple professionals are involved in assisting parents and children with specific learning disorder, however, there seems to be a blurred line in the boundaries of the services provided by these professionals. Somehow their roles overlap while some are intertwined, hence it is important for these professionals and the department to review their guidelines and professionals' scope of practice so that parents can be advised and assisted accordingly. This is mainly important because parents find themselves confused when receiving conflicting advice from different professionals.

6.3 Conclusions Regarding the Research Problem

According to Du Plessis (2011), SLD with impairment in reading is the most common learning disorder that affects children and adults from all walks of life. Considering the underlying theoretical framework of overlapping spheres of influence, it is clear that the psychological and emotional difficulties experienced by these learners also greatly impact their parents and the entire family life.

In order to work against this challenge of SLD and its secondary symptoms, it is very important to strengthen working relationships between multiple spheres such as parents, teachers and professionals or community members. The onus lies with the Department of Education to improve the current education system and attend to the shortcomings that were indicated in the study. Therefore, the Department of Education needs to work on the current loop holes, further train and encourage teachers to implement the policy provisions on the importance of engaging parents as equal partners of their children's education. Moreover, the Department itself needs to make arrangements to cater for parents' needs by means of providing information and support platforms such as workshops, information sessions and allow for parents' individual consultation with professionals so that they can also feel capacitated, supported and enabled to help their children cope with the disorder. In a nutshell, it is the implementation of Epstein's theory that will allow integration of multiple spheres (parents, teachers and communities) that surrounds the child's world in order to assist him or her to deal with the problems that are associated with SLD.

6.4 Implications for theory

Bronfenbrenner's ecological systems model is significant in understanding inclusive education and supporting learners with special educational needs (Landsberg, Kruger & Nel, 2010). His multidimensional model illustrates the complexity of the interaction and interdependence of multiple systems that impact on the learners, their development and learning. Therefore, an

action on one level cannot be regarded as the cause of an action on another level as is the case in the medical model. Rather, it is only possible to understand why things are as they are at any stage by understanding the dynamic interaction and interplay between these multiple influences Cotterell (2015). In relation to the current study, Bronfenbrenner's theory helps us to understand that learning difficulty can not only be understood in terms of the child's biological being, but multiple systems are considered to impact learner wellness and academic performance. Similarly, interventions for supporting learners with learning difficulties cannot be facilitated by one party such as parents or teachers, but the involvement of multiple systems is necessary in order to achieve the desired optimal child development. Cotterell (2015) attests that the implications of Bronfenbrenner's theory are that when a learner with learning difficulties and their parents experience difficulties, the solution will not be found in one single system, but rather the interaction of all relevant systems. Therefore, Bronfenbrenner's ecological systems theory could be useful in inclusive education and understanding support required by parents and learners with learning difficulties as it depicts how individuals, professionals and groups at different levels within the social context are linked in dynamic, interdependent and interacting relationships.

Dreyer (2015) further states that Epstein's model of overlapping spheres can also be used to understand the implementation of support and interaction of different stakeholders in assisting children with reading impairment. Epstein's model of overlapping spheres originated from the above mentioned Bronfenbrenner's ecological theory of human development. The basic assumption of Epstein's model is that families, schools and communities play a significant role in facilitating the education of learners (Epstein, 2002). Dreyer (2015) argued that although Epstein's theory was not precisely developed on the basis of learning difficulties, most researchers contend that it has a substantial theoretical and conceptual significance for the study of and responding to the needs of parents of children diagnosed with impairment in reading. Epstein's model of overlapping spheres of influence acknowledged that children do not develop in isolation but do so inside and outside of the borders of their family, school, and their community at large (Du Plessis, 2011; Epstein, 2002). Such assumptions are applicable in children who have been identified as having impairment in reading, most of them find themselves separated to attend remedial classes and other stereotyped groups inside their schools and grouped in context that their non-challenged school mates do not experience. Therefore, the Department of Education should employ such theory which underlies the involvement of different stakeholders and spheres in addressing learner's and parent's needs.

6.5 Implications for Policy and Practice

Among the barriers to teaching and learning identified in Education White Paper 6, is the non-recognition and non-involvement of parents. This could be due to parents who maintain a passive role in the education of their children or that schools do not necessarily encourage parental involvement. Therefore, it is clear that responding effectively to the needs of all learners calls for a collaborative approach that involves parents as well. Collaborative relationship between parents, teachers and communities will facilitate the principle of inclusive education which is that of ‘enabling education structures, systems and learning methodologies to meet the needs of all’, as envisioned in Education White Paper 6 (DoE, 2001). However, the provisions of the policy might not materialise if there is lack of support, evaluation and enforcement of adherence to rules and guidelines. Therefore, the government needs to ensure that all schools, parents and communities are supported to implement the provided rules and guidelines.

The SIAS policy (DoE, 2014) was developed in response to the White Paper. The SIAS strategy not only offers a tool with which to respond systemically to the needs of learners but also promotes collaboration designed to provide holistic support (Dreyer 2015). At stage two of the SIAS process, two of the responsibilities of the teacher are to involve and consult with the parents and to review the impact of the support provided (DoE, 2014). According to this strategy, the teacher should involve both the school-based support team and the parents as well as the learner in developing a support plan. In this study, however, because of the lack of support from schools, parents felt isolated in their efforts to find adequate support for their child. The study also indicated that some parents were not consulted to discuss learner progress but were told about the school’s decision to remove children from mainstream schools and place them in special schools. Therefore, it is important for the DoE to evaluate and find ways of enforcing implementation of the policy or guidelines as required by the department. The findings of the study by Mayaba (2008) implies that the Department of Education does not take adequate cognisance of issues that educators regard as important or preventing them from implementing inclusive education. Hence the current study shows that inclusive education does not seem to be implemented in studied schools. Therefore, this calls for a holistic approach where teacher’s needs and opinions are also considered when making policies that will affect them so that they can be able to implement those policies.

The study also found that parents of learners with reading impairment were advised to consult professionals outside schools and outside the Department of Education in order to assess and

determine a need for placement in a special school. The study shows that parents with a low socio-economic status were compromised because they had to travel and sometimes pay for service providers. Although the above mentioned policies state that professionals should be consulted to further assess and assist learners with learning barriers, it does not state where to find those professionals because DoE does not provide such services. Therefore, there is an urgent need for the department to employ multi-disciplinary professionals so that psycho-educational services are available and accessed within the department and without adding any financial strain to disadvantaged parents and families. The availability of relevant professionals and services could make it possible for parents to also receive support and information about their children's condition when diagnosed or identified as having a learning disorder.

From the very beginning of democracy, the government has introduced various laws, policies and guidelines pertaining to the rights of South Africans with disabilities to achieve equality. Despite this, the DoE is aware that laws and policies are often not practised at the provincial and school level where new segregated special schools are being built leading to the exclusion of children with disabilities from their families and communities (DoE, 2010). Human rights lawyers agree with the DoE and maintain that learners are prevented from attending schools on the basis of the argument that "it is not reasonably practicable to support the learners in the mainstream" (DoE 2010, p. 6). Lawyers argue that legislation needs to be strengthened so that they can act against schools excluding learners on the basis of disability (Cotterell, 2015). Schoeman (2012) attests that many learners are failed by the policies because teachers are not positively inclined towards minimising the barriers that are experienced by learners. As per the findings of this study and preceding ones, a growing number of learners are being referred to segregated special education schools, and most of these children present with mild learning difficulties such as dyslexia and or ADHD (Cotterell, 2015). Therefore, it is about time that the DoE put some actions into practise regarding this unfair segregation and enforce the implementation of inclusive education and involvement of parents in the education system.

6.6 Limitations of the Study and Implications for Future Research

It is important to note that this study was conducted in few schools of Pietermaritzburg with a limited number of parents of learners with SLD. Therefore, it is important to note that one of the limitations of the results of this study is that it cannot be generalized to the general population due to the small sample size studied. This implies that future research can focus on a larger number of parents from different schools (former model C schools and previously disadvantaged).

Another limitation is that the study was only focusing on parents of children with reading impairment due to dyslexia, and excluding all other factors such as reading difficulty, poor sight or intellectual development disorder. Therefore, future research can study the same subject and include the factors that were not considered for this study. Furthermore, future research could also include other types of learning disorders such as SLD with impairment in mathematics (dyscalculia) or SLD with impairment in writing (dysgraphia).

It is also significant to note that the current study focused on studying parents whose learners have seen professionals and were diagnosed with SLD with impairment in reading. This could be considered as a limitation of this study because the findings are mainly applicable to the types of the group studied. Therefore, it is necessary for future research to study learners who have been identified as having reading impairment although they have not been assessed and diagnosed. This is important because there are many learners who present with dyslexia-related symptoms but have not been able to access psychoeducational assessment and interventions. Hence, studying the experiences of those learners and their parents could further add valuable information on the body of knowledge.

6.7 Recommendations

Based on the findings of this study, it is recommended that the DoE, especially in provincial, district and circuit levels, plan and offer special programmes and services such as workshops, information sessions, support groups and counselling for parents of learners with learning disorders, especially reading impairment. Such services could be a basis for support for these parents who seem to lack knowledge and ways of supporting their children with learning disorders such as SLD.

Additional training and evaluation need to be considered in order reinforce to teachers the necessity of involving parents as equal participants in the education of their children. It is also recommended that possible enforcement is also considered for teachers to start implementing the of policies by involving of parents in decision making, giving them enough information about the child's academic progress and considering parents as equal participants to the education of their children.

One of the main prominent findings of the study is the fact that the Department of Education seems to lack multi-disciplinary teams of professionals who are needed to assist learners with

dyslexia and their parents. Therefore, it is strongly recommended that the Department of Education reviews their policies and sees to the achievement of the objectives of inclusive education the midst of the shortage of professionals such as educational psychologists, speech therapists, and the like, within the Department. Thus, the recommended solution is the employment of sufficient multi-disciplinary professionals and other resources that are required by the Department of Education to assist learners and parents with special educational needs.

6.8 Concluding Remarks

The aim of this study was to explore and discuss experiences of parents whose children have been diagnosed with dyslexia (specific learning disorder, with impairment in reading). It was aimed at understanding how parents have experienced parenting a child with dyslexia, interacting with schools and communities in their attempt to help their children who have been diagnosed with dyslexia. The study was undertaken using the qualitative research methodology to explore and delve deep into the participant's understanding of their subjective experiences. The research design used was inclusive of interpretive research paradigm, purposive sampling method and thematic data analysis method.

The study mainly found that parents do not have a clear understanding of dyslexia and its underlying causes. The study established that parents often experience emotional difficulties, parenting challenges, financial difficulties and they tend to find themselves lonely due to the lack of support from significant others. With regards to parent's interaction with schools, it was found that there is insufficient communication between teachers and parents of learners with dyslexia. Hence parents find themselves uninformed and excluded from the education system. The study also found that the studied community is believed to lack resources that are required to assist learners with dyslexia and their parents. Thus it was recommended that the DoE needs to take essential measures in enforcing policies that are pertinent to parental involvement in the education system. DoE is also recommended to also provide relevant personnel and essential resources in order to assist learners with dyslexia and the parents concerned.

References

- American Psychiatric Association (APA). (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Washington, DC: Author.
- Anney, V.N. (2014). Ensuring the quality of the findings of qualitative research: Looking at trustworthiness criteria. *Journal of Emerging Trends in Education and Policy Studies*, 5(2), 272-281.
- Baker, L. (2003). The role of parents in motivating struggling readers. *Reading and Writing Quarterly*, 19(2), 87-106.
- Birsh, J. R. (2005). *Multisensory teaching of basic language skills*. Baltimore, MD: Paul H. Brookes Publishing co.
- Bojuwoye, O., Moletsane, M., Stofile, S., Moolla, N., & Sylvester, F. (2014). Learners' experiences of learning support in selected Western Cape schools. *South African Journal of Education*, 34(1), 715-750.
- Bonifacci, P., Montuschi, M., Lama, L., & Snowling, M. (2014). Parents of children with dyslexia: Cognitive, emotional and behavioural profile. *Dyslexia*, 20(4), 175-190.
- Bonifacci, P., Storti, M., Tobia, V. & Suardi, A. (2016). Specific learning disorders: A look inside children's and parents psychological well-being and relationships. *Journal of Learning Disabilities*, 49(5) 532-545.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77-101.
- Bull, L. (2003). The use of support groups by parents of children with dyslexia. *Early Child Development and Care*, 173(3), 341-347.
- Byrne, M. (2011). The dyslexia-SpLD trust: Collaborative work and changing times. *Patoss Bulletin*, 24(2), 31-33.
- Cameron, H., & Billington, T. (2015). The discursive construction of dyslexia by students in higher education as a moral and intellectual good. *Disability & Society*, 30(8), 1225-1240.
- Cotterell, E.M. (2015). *The perspective of parents of learners with learning disabilities regarding the implementation of inclusive education in independent schools in the Western Cape: a case study*. (Master's thesis). University of South Africa, Pretoria.
- Creswell J. (2009). *Research design: Qualitative, quantitative and mixed method approaches* (3rd ed.). London: Sage publications.
- Dabokowski, D. (2004). Encouraging active parent participation in IEP team meetings. *Teaching Exceptional Children*, 36(3), 34 -39.

- Dahle, A. E., & Knivsberg, A. M. (2013). Internalizing, externalizing and attention problems in dyslexia. *Scandinavian Journal of Disability Research*, 16(2), 179-193.
- Dammak, A. (2013). *Research paradigms: Methodologies and compatible methods*. *The Academic Journal of St Clements Education Group*, 6(2), 1-14.
- Davidson, C. (2009). Transcription: Imperatives for qualitative research. *International journal of qualitative methods*, 8(2), 1-18.
- Decaires-Wagner, A., & Picton, H. (2009). *Teaching and ADHD in the Southern African classrooms*. Northlands: Macmillan.
- Delany, K. (2017). The Experience of parenting a child with dyslexia: an Australian perspective. *Journal of Student Engagement: Education Matters*, 7(1), 97-123.
- Department of Basic Education. (2014) *Report on the annual national assessment of grades 1 to 6 & 9*. Pretoria: Department of Basic Education.
- Department of Education. (2014). *Concessions for learners with barriers to learning and assessment*. Pietermaritzburg: KZN Department of Education.
- Department of Education. (2010) a. *Guidelines for Inclusive Teaching and Learning*. Pretoria: Government Printer.
- Department of Education. (2001) *Education white paper 6. Special needs education. Building an inclusive education and training system*. Pretoria: Department of Education.
- Department of Education. (2011). *Report on the annual national assessment of 2011*. Pretoria: Department of Basic Education.
- Donald, D., Lazarus, S., & Lolwana, P. (2010). *Educational psychology in social context: Ecosystemic applications in southern Africa* (4th ed.). Cape Town: Oxford University Press.
- Donohue, D., & Borman, J. (2014). The challenges of realising inclusive education in South Africa. *South African Journal of Education*, 34(2), 1-38.
- Dreyer, L.M. (2015). Experiences of parents with children diagnosed with reading difficulties. *Southern African Review of Education*, 21(1), 94-111.
- Du Plessis, A. (2011). *The experiences of parents of children with reading difficulties* (Doctoral dissertation, Stellenbosch: Stellenbosch University).
- Earey, A. (2013). Parental experiences of support for pupils with dyslexia: Ignoring the effect on parents. *Support for Learning*, 28(1), 35-40.
- Engelbrecht, P., Oswald, M., Swart, E., & Eloff, I. (2005). Parents' experiences of their rights in the implementation of inclusive education in South Africa. *School Psychology International*, 26(4), 459- 478.

- Epstein, J.L. (2002). School, family and community partnerships: Caring for children we share. In J.L. Epstein, M.G. Sanders, B.S. Simons, K.C. Salinas, & N.R. Jansorn (Eds.), *School, family and community partnerships: Tour handbook for action* (2nd ed.) (pp. 7-29). Thousand Oaks: Corwin Press.
- Flick, U. (2009). *An Introduction to qualitative research*. Thousand Oaks: Sage Publications.
- Forlin, C. (2010). Developing and implementing quality inclusive education in Hong Kong: Implications for teacher education. *Journal of Research in Special Educational Needs*, 10, 177-184.
- Galaburda, A.M., LoTurco J., Ramus F., Fitch R.H., & Rosen, G.D (2006). From genes to behaviour in developmental dyslexia. *Nat Neuroscience*, 9(10), 1213-1217.
- Geldenhuys, J.L., & Wevers, N.E. (2013). Ecological aspects influencing the implementation of inclusive education in mainstream primary schools in the Eastern Cape, South Africa. *South African Journal of Education*, 33(3), 550-688.
- Grabe, W. P., & Stoller, F. L. (2013). *Teaching and researching*: Reading. New York: Routledge.
- Green, K.K., Tonnessen, F.E., Tambs, K.K., Thoresen, M.M., & Bjertness, E.E. (2009). *Dyslexia: Group screening among 15–16-year-olds in Oslo, Norway*.
- Grigg, J., & Borman, G. D. (2014). Impacts and alternatives: Evidence from an elementary charter school evaluation. *Journal of School Choice*, 8(1), 69-93.
- Haji, M. (2006). *Knowledge sharing: improving the central component of knowledge management*. (Unpublished master's thesis). United Kingdom: Cranfield University,
- Hancock, B., Ockleford, E., & Windridge, K. (2009). *An introduction to qualitative research*. National institute for health research. Johannesburg: Midlands's publishers.
- Harkin, E., Doyle, A., & Mc Guckin, C. (2015). Screening and assessment of specific learning disabilities in higher education institutes in the Republic of Ireland. *Journal of Psychologists and Counsellors in Schools*, 25(1), 13-23.
- Hassal, R., Rose, J., & McDonald, J. (2005). Parenting stress in mothers of children with an intellectual disability: The effects of parental cognitions in relation to child characteristics and family support. *Journal of Intellectual Disability Research*, 49(11), 405-418.
- Higgs, P., & Smith, J. (2008). *Rethinking Truth*. Cape Town: Juta.
- Howie-Davies, R., & McKenzie, K. (2007). Diagnosis, information and stress in parents of children with a learning disability. *Learning Disability Practice*, 10(8), 28-33.

- Johnston, C., & Mash, E.J. (2001). Families of children with attention deficit/hyperactivity disorder: Review and recommendations of future research. *Clinical Child and Family Psychology Review*, 4(3), 183-207.
- Karande, S., & Kuril, S. (2011). Impact of parenting practices on parent–child relationships in children with specific learning disability. *Journal of Postgraduate Medicine*, 57(1), 20-30.
- Karande, S., Kumbhare, N., Kulkarni, M., & Shah, N. (2009). Anxiety levels in mothers of children with specific learning disability. *Journal of Postgraduate Medicine*, 55(3), 165-70.
- Landsberg, E., Kruger, D., & Nel, N.M. (2010). *Addressing barriers to learning: A South African perspective*. Pretoria: Van Schaik.
- Marmot, M., & Wilkinson, R. G. (2006). *Social determinants of health* 2nd edition. Oxford, Oxford University Press.
- Maxwell, J.A. (2005). *Qualitative research design*. An interactive approach (2nd Ed.). Thousand Oaks: Sage Publications.
- Mayaba, P. L. (2008). *The educators' perceptions and experiences of inclusive education in selected Pietermaritzburg schools* (unpublished master's thesis). University of KwaZulu-Natal, Pietermaritzburg.
- McIntyre, R., & Hennessy, E. (2012). 'He's just enthusiastic. Is that such a bad thing?' Experiences of parents of children with Attention Deficit Hyperactivity Disorder. *Emotional and Behavioural Difficulties*, 17(1), 65-82.
- Mackenzie, M., Cologon, K., & Fenech, M. (2016). 'Embracing everybody': Approaching the inclusive early childhood education of a child labelled with autism from a social relational understanding of disability. *Australasian Journal of Early Childhood*, 41(2), 4.
- Mehangi, K., & Berger, M. (2015). Inclusive education and educational psychology: forging alliances for support of inclusion at school level in South Africa. *Journal of Educational Studies*, 14(1), 67-85.
- Meier, C., & Lemmer, E. (2015). What do parents really want? Parents' perceptions of their children's schooling. *South African Journal of Education*, 35(2), 1-11.
- Merriam, S.B. (2009). *Qualitative research: A guide to design and implementation*. San Francisco: Jossey-Bass Publishers.
- Michail, K. (2010). *Dyslexia: The experiences of university students with dyslexia*. (Doctoral dissertation). University of Birmingham, Birmingham.

- Mohangi, K., & Archer, K. (2015). Mothers' perceptions of the role of the educational psychologist in supporting their children with attention deficit hyperactivity disorder. *Journal of Psychology in Education*, 35(1), 01-09.
- Mohangi, K. (2015). *Educational psychology perspectives in inclusive educational settings*, In S Moonsamy and H Kathard (Eds.), *Speech-language therapy in a school context: Principles and practices* (pp 295-314). Pretoria: Van Schaik.
- Moala, S. (2011). Educational access in South Africa. *Journal of Educational Studies*, (Special issue 1), 84-103.
- Mugumbate, J., & Nyanguru, A. (2013). Exploring African philosophy: The value of Ubuntu in Social Work. *African Journal of Social Work*, 3(1), 82-100.
- 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), 191-198.
- 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(1), 58-74.
- Ngcobo, J., & Muthukrishna, N. (2011). The geographies of inclusion of students with disabilities in an ordinary school. *South African Journal of Education*, 31(3), 357-368.
- Nowell, L. S., Norris, J. M., White, D. E., & Moules, N. J. (2017). Thematic analysis: Striving to meet the trustworthiness criteria. *International Journal of Qualitative Methods*, 16(1), 1-13.
- Pillay, M., & Terlizzi, M. (2009). A case study of learner's transition from mainstream schooling to a school for learners with special education needs (LSEN): lessons for mainstream education. *South African Journal of Education*, 29(4), 492-509.
- Poon-McBrayer, K.F., & McBrayer, P.A. (2014). Plotting Confucian and disability rights paradigms on the advocacy–activism continuum: Experiences of Chinese parents of children with dyslexia in Hong Kong. *Cambridge Journal of Education*, 44(1), 93-111.
- Rashid, F. L., Morris, R. D., & Sevcik, R. A. (2005). Relationship between home literacy environment and reading achievement in children with reading disabilities. *Journal of learning disabilities*, 38(1), 2-11.
- Reid, D., & Valle, J. (2004). *Learning disability as the intersection of competing discourses: Implications for classrooms, parents, and research*. In B. Wong, (Ed.), *Learning about learning disabilities* (3rd Ed.). San Diego: Elsevier Academic Press.
- Reid, G. (2007). Importance and the role of parents in specific learning disabilities. *Indian Journal of Medical Science*, 61(7), 379-380.
- Riddick, B. (2010) *Living with Dyslexia* (2nd ed.). London: Routledge.

- Ritchie, J., Lewis, J., Nicholls, C.M., & Ormston, R. (Eds.). (2013). *Qualitative research practice: A guide for social science students and researchers*. Los Angeles: Sage.
- Savolainen, H., Engelbrecht, P., Nel, M., & Malinen, O. P. (2012). Understanding teachers' attitudes and self-efficacy in inclusive education: Implications for pre-service and in-service teacher education. *European Journal of Special Needs Education*, 27(1), 51-68.
- Scott, R. (2004). *Dyslexia and counselling*. Philadelphia: Whurr.
- Seabi, J., & Economou, N.A (2012). *Understanding the distracted and the disinhibited: Experiences of adolescents diagnosed with ADHD within the South African context*. In J.M Norvilit (Ed). Contemporary trends in ADHD research. InTech.
- Seals, L.J. (2010). *The experiences of parents with adolescents identified as having a specific learning disorder*. (Unpublished doctoral dissertation). Walden University, Washington.
- Sekaran, U., & Bougie, R., (2010). *Research Methods for Business: A Skill building approach*. United Kingdom: John Wiley.
- Shaywitz, S. E., & Shaywitz, B., A. (2005). Dyslexia (specific reading disability). *Biological Psychiatry*, 57(11), 1301-1309.
- Shenton, A. (2004). Strategies for ensuring trustworthiness in qualitative research projects. *Education for Information*. 22(5), 63-75.
- Snowling, M.J. (2013). Early identification and interventions for dyslexia: A contemporary view. *Journal of Research in Special Educational Needs*, 13(1), 7-14.
- Smith-Bonahue, T., Larmore, A., Harman, J., & Castillo, M. (2009). Perceptions of parents and teachers of the social and behaviour characteristics of children with reading problems. *Learning Disabilities: A Contemporary Journal*, 7(2), 19-34.
- Terre Blanche, M., Durrheim, K., & Painter, D. (Eds). (2006). *Research in Practice: Applied methods for the social sciences*. Cape Town: University of Cape Town Press.
- Torppa, M., Eklund, K., Van Bergen, E., & Lyytinen, H. (2011). Parental literacy predicts children's literacy: A longitudinal family-risk study. *Dyslexia*, 17(4), 339-345.
- Turner III, D. W. (2010). Qualitative interview design: A practical guide for novice investigators. *The qualitative report*, 15(3), 754-760.
- Urquhart, A. H., & Weir, C. J. (2014). *Reading in a second language: Process, product and practice*. London: Routledge.
- Van Wyk M. M. (2013) *Towards an Afrocentric Indigenous Pedagogy: Schooling, society and inclusive Education*. Cape Town: Oxford University Press.
- Wagner, C., Kawulich, B., & Garner, M. (2012) *Doing Social Science research: a global context*. McGraw -Hill education. Maidenhead.

- Walczyk, J., & Griffith, R. (2007). How important is reading skill fluency for comprehension? *International Reading Association*, 3(1), 560-569.
- Woolfson, L., & Grant, E. (2006). Authoritative parenting and parental stress in parents of preschool and older children with developmental disabilities. *Child: Care, Health and Development*, 32(2), 137-256.

APPENDIX A

UKZN HUMANITIES AND SOCIAL SCIENCES RESEARCH ETHICS COMMITTEE (HSSREC)

APPLICATION FOR ETHICS APPROVAL
For research with human participants

INFORMED CONSENT RESOURCE TEMPLATE

Information Sheet and Consent to Participate in Research

Researcher: Nosipho Mkhwanazi (073 859 4768) email address: nosipho40@yahoo.com

Supervisor: Miss Phindile Mayaba (033 260 5364) email address: mayabap@ukzn.ac.za

Date: 25 March 2017

Dear Parent

My name is Nosipho Mkhwanazi (student Educational Psychologist). I am Master's student in the Discipline of Psychology, at the School of Applied Human Sciences of the University of KwaZulu-Natal (Pietermaritzburg Campus).

You are invited to participate in a study that involves studying experiences of parents whose children have been diagnosed with reading difficulties or reading impairment (dyslexia). The aim of the study is to find out about the experiences of parents whose children have been diagnosed with reading difficulties. The study is expected to enroll five parents who have children that have been diagnosed with reading difficulties. Participant's children should be going to secondary schools which are located in Msunduzi Municipality, Pietermaritzburg. The procedure involves signing the informed consent form and scheduling 60-90 minutes interview at a convenient place. The duration of your participation, if you choose to participate and remain in the study, is expected to be a maximum of 60-90 minutes only, which is the expected duration for the interview.

There are no anticipated risks involved in the study. We hope that the study will contribute to the current body of knowledge and also assist in the future development of learner support strategies, with parent's experiences being taken into consideration. If the study triggers a need for psychological intervention in you (participant), the researcher will refer you to the relevant

professionals or center such as UKZN child and family center (tel: 033 2605166) or relevant government service providers.

Your participation in this project is voluntary. You may refuse to participate or withdraw from the project at any time with no negative consequence. There will be no monetary gain from participating in this research project and you will not be required to pay for participation in the study. Anonymity will be maintained as no identifying details will be revealed as each participant is given a different name to protect his or her identity. Confidentiality will be adhered to as all records and documents used during the study will be maintained by the School of Applied Human Sciences. However, should you share any information that can potentially harm you or others, confidentiality will be breached and relevant people will be contacted in an attempt to prevent harm. In case this happens you will be informed before a breach of confidentiality

This study has been ethically reviewed and approved by the UKZN Humanities and Social Sciences Research Ethics Committee (approval number_____).

In the event of any problems or concerns/questions you may contact the researcher at the above details or the UKZN Humanities & Social Sciences Research Ethics Committee, contact details as follows:

HUMANITIES & SOCIAL SCIENCES RESEARCH ETHICS ADMINISTRATION

Research Office, Westville Campus

Govan Mbeki Building

Private Bag X 54001

Durban

4000

KwaZulu-Natal, SOUTH AFRICA

Tel: 27 31 2604557- Fax: 27 31 2604609

Email: HSSREC@ukzn.ac.za

Thank you in advance for your help with this research exercise.

Sincerely

Researcher signature: _____

Date: _____

CONSENT LETTER

I _____ (Name of the participant) have been informed about the study entitled experiences of parents with children who have been diagnosed with dyslexia, by Nosipho Mkhwanazi (Researcher).

I understand the purpose and procedures of the study. I have been given an opportunity to answer questions about the study and have had answers to my satisfaction. I declare that my participation in this study is entirely voluntary and that I may withdraw at any time without affecting any of the benefits that I usually am entitled to. I have been informed about any available psychosocial intervention if the need arises. If I have any further questions/concerns or queries related to the study, I understand that I may contact the researcher at (073 8594768 or nosipho40@yahoo.com).

If I have any questions or concerns about my rights as a study participant, or if I am concerned about an aspect of the study or the researchers then I may contact:

HUMANITIES & SOCIAL SCIENCES RESEARCH ETHICS ADMINISTRATION

Research Office, Westville Campus
Govan Mbeki Building
Private Bag X 54001
Durban
4000
KwaZulu-Natal, SOUTH AFRICA
Tel: 27 31 2604557 - Fax: 27 31 2604609
Email: HSSREC@ukzn.ac.za

I hereby provide consent to:

Audio-record my interview YES / NO

Signature of Participant

Date

**Signature of Witness
(Where applicable)**

Date

APPENDIX B

(Screening tool or Letter for inviting parents who are interested in the study)

Mzali

Uyamenywa ukuba ube yinxenye yocwaningo olwenziwa ezikoleni saseMgungundlovu. Inhloso yalolu cwaningo ukuthola ulwazi mayelana nezinqinamba abazali ababhekananazo uma izingane zabo zitholakala zinenkinga yokufunda. Sifisa ukwazi ukuthi uzinqobe kanjani izinkinga obenazo ngomntwana wakho, nokuthi usizakale kanjani ngokuthola uziso kodokotela benqondo (psychologist), uma ulutholile. Sidinga umbono wakho ukuthi yini engenziwa uhulumeni ukuze kusizakale abazali nabantwana abanenkinga yokufunda.

Lolucwaningo luqukethe imibuzo eyishumi ephendulwa umzali (ngomlomo), bexoxisana nodokotela wenqondo (Intern Psychologist). Uyaziswa ukuthi uma uvuma futhi uphumelela ukubayinxenye yalolu cwaningo, uzonikwa UR100 wokubhekelela izindleko zokugibela (usuka ekhaya uza E- DUT-Riverside campus).

Uma ufisa ukuba yinxenye yalolu cwaningo uyacelwa ukuba ubhale imininingwane yakho emigqeni engezansi ukuze sikuthinte sihlele ukukubona, nokukunika imininingwane ongafisa ukuyithola ngalolu cwaningo.

Igama nesibongo (somzali): _____

Inombolo Yocingo: _____

Indawo ohlala kuyo: _____

Ukusayina: _____

Yimina Ozithobayo

Nosipho Mkhwanazi

Intern Psychologist (DUT)

NB: Lokucwaningo lugunyazwe uMnyango wezeMfundo KwaZulu Natal Kanye nekomidi lomthetho wezocwaningo eNyuvani ya KwaZulu-Natal (UKZN research ethics committee).

APPENDIX C

IN-DEPTH INTERVIEW GUIDE

INTERVIEW

Questions to be asked for compiling a biographical profile and background information.

1. How old is your child (the one with reading impairment) and what grade is she or he doing?
2. When was the reading impairment identified and how?
3. How long has the child been struggling with reading?

Questions focusing on the topic of my research

4. What is your understanding of dyslexia?
5. What do you consider to be the underlying causes of your child's reading difficulty (dyslexia)?
6. How have you experienced parenting a child with reading difficulties?
7. What have you experienced in your attempt to assist your child with homework and other tasks that require him or her to read?
8. How do you cope with parenting a child with reading difficulties?
9. Do you interact with the school or teachers in an attempt to assist your child?
 - a) If yes, how can you describe your experience of interacting with the school in an attempt to help your child?
 - b) If no, what do you think is the reason and what do you think should be done about it?
10. What do you think about teacher's / schools effort in assisting your child to deal with his /her reading difficulty?
11. What do you think about the available community resources that can assist your child to deal with his or her reading difficulty, if any? (E.g. library, reading clubs, support groups recreational facilities etc.)
12. Have you ever consulted other professionals such as educational psychologist and others in an attempt to assist your child?
 - a) If yes, what was your experience in your interaction with such professionals?
 - b) If no what do you think about consulting them to gain an insight and advice in your child's problem?

13. What are government provisions/remedies/concessions that you are aware of that are made to assist children with learning barriers such as dyslexia? (E.g. oral assessment, getting a scribe/reader during assessment/use of electric devices during assessment etc.)