Abstract

Children with dyslexia often face challenges beyond academic performance, which can lead to negative self-perceptions and reduced self-esteem. The association between self-image and self-esteem was assessed in the current study of sixty children with dyslexia (boys = 36, girls = 24). It was assumed that the self-image and self-esteem of children with dyslexia were directly associated with dyslexia. It was also hypothesized that children with dyslexia would have a negative self-image and low self-esteem. Children of 7-12 years (M = 9.7 SD = 1.66) were recruited from English medium schools of Faisalabad for the study. The Bangor Dyslexia Test was used as a quick screening device for finding out whether the subject’s difficulties were or were not typically dyslexic. Urdu version of Self Image Profile (Butler, 1998) was administered to children to find their self-image (positive and negative) and self-esteem (low and high). The results suggested that most children with dyslexia had a negative self-image and low self-esteem. Results depicted that 63% of the sample had a negative self-image and 60% of the sample had low self-esteem. Boys showed more negative self-image than girls; on the contrary, girls showed lower self-esteem than boys. It was concluded that children with dyslexia showed a negative self-image and low self-esteem. The findings of the current study might be helpful for the parents and the school teachers to get acquainted with the issue of dyslexia in the school population and its impact on their academic performance.

Keywords: Dyslexia, Self-Image, Self-Esteem, Children, Academic
INTRODUCTION

Dyslexia, a common reading disorder affecting reading and writing skills, often accompanies challenges in academic performance, leading to potential negative self-perceptions and low self-esteem (Gibby-Leversuch, 2018). Dyslexia often manifests during childhood and can significantly impact academic performance and psychosocial development (Schulte-Körne, 2010). Understanding self-image and self-esteem in children with dyslexia is vital for mitigating the psychological impact of dyslexia and improving overall well-being. By identifying factors contributing to low self-esteem, such as academic struggles or societal misconceptions, tailored interventions can be developed to support children with dyslexia in building confidence and resilience. This research not only empowers children to embrace their unique abilities but also informs educational policies and practices, fostering a more inclusive environment where every child can thrive academically and emotionally.

When it comes to the development of their self-image and self-esteem, children with dyslexia confront difficulties. Despite possessing normal to above-average intellect, people with dyslexia struggle with reading, writing, and spelling (Leitao et al., 2017). Dyslexia is a neurological disease. Dyslexic children have challenges that might affect their general feeling of self-worth, social interactions, academic achievement, and other areas of their lives. The term "self-image" describes how a person views oneself, including their identity, skills, and attitudes towards themselves. Self-esteem, on the other hand, is the evaluation or appraisal of one's worth and capabilities (Alsaker & Kroger, 2020). In the context of dyslexia, these constructs play a crucial role in shaping a child's psychological well-being and influencing their academic and social experiences (Humphrey, 2001).

The International Dyslexia Association (IDA, 2002) defines dyslexia as a language impairment that is exhibited in word decoding and especially inappropriate phonological processing. The primary characteristic of dyslexia, according to the DSM-V, is reading achievement (accuracy, speed, and comprehension) that significantly falls short of expectations based on individual standardized tests, given the person's age, chronological age, and level of education for their age.

Two commonly occurring childhood developmental disorders are dyslexia and ADHD, which frequently co-occur, and the rate of this comorbidity is significantly above the chance levels (Boada et al., 2012). Some features of dyslexia overlap with another developmental disorder, dyspraxia. In adolescence, the majority of those with dyslexia are often associated with depressive disorders and disorders of social behavior (Eissa, 2010). Significant comorbidity was reported by Masi et al. (2000) in learning-disordered adolescents with anxiety disorders.
According to the theory of phonological deficit, a unique impairment in the representation, storing, and retrieval of speech sounds is evident in people with reading disorders (Brady et al., 1991). For rapid auditory processing theory problem lies in perceiving the rapidly or short varying sounds (Tallal et al., 1993). It is suggested that this auditory disability may be the direct cause of the phonological deficit during development, and thus the problem in learning the skill of how to read. The visual theory considered dyslexia as a visual impairment that can lead to unstable binocular fixations or increased visual crowding, two symptoms of poor vergence (Livingstone et al., 1991). According to biological theory, individuals with dyslexia have a somewhat malfunctioning cerebellum and several cognitive difficulties arise (Nicolson et al., 2001).

Self-image is the set of values, abilities, attributes, and attitudes that a person believes defines who he or she is. Purkey (1988) defines self-image as the thinking or cognitive aspect of self and refers to the totality of an organized, dynamic, and complex system of learned beliefs, opinions, and attitudes that every individual assumes to be true about his or her existence.

Humphrey and Mullins (2002) examined self-esteem and self-image in children with dyslexia. Children with dyslexia and children without learning impairment (control group) were included in the research. Questionnaires and interviews were used, giving a mix of quantitative and qualitative data. The findings of the study indicated that dyslexia had noticeable adverse effects on the self-esteem and self-image of children. It was indicated by qualitative data that in schools dyslexic children felt isolated and up to half were regularly bullied or teased. Ryan's (2004) findings also supported these results.

Marsh (1990) indicated that children with specific learning disorders, such as dyslexia, had lower academic self-image than the children without learning difficulties, the other areas/domains of self-image did not differ significantly. The dyslexic children's weaker academic self-image compared to their classmates was revealed by the results; nevertheless, no changes were observed in other domains of the profile, such as athletic ability. According to several studies, students with specific learning disabilities, such as dyslexia, who attend mainstream classrooms as opposed to special courses, have much lower levels of self-perception and more negative opinions of themselves. (Baker & Zigmond, 1990).

Terras et al. (2009) assessed levels of psycho-social adjustment and self-esteem in children with dyslexia and analyzed child and parent attitudes, understanding, and the perceived effect of reading disability on everyday life. Sixty-eight dyslexics and their parents participated. The average score on both parent and child-rated scholastic competence was considerably lower than that of the general population. Emotional/behavioral and social problems were significantly elevated than in the general population and were associated with self-esteem. The relationship between emotional symptoms and academic self-esteem was significant and it proposed that
individuals with dyslexia exhibited more emotional and behavioral problems and might have lower self-esteem than those without reading problems.

Children with rigorous and constant reading impairments, specifically dyslexia, typically experience significant academic failure and therefore, these children hold negative self-images and feel poor about themselves. Research conducted with dyslexic children suggests that negative self-image and low or poor self-esteem are commonly encountered (Alexander-Passe, 2006; Humphrey & Mullins, 2002).

Ingrsson, (2007) working on the same lines, examined the school experiences of youth with dyslexia about their sense of self-worth, happiness, academic success, relationships with peers, and optimism about the future. Many interviews were conducted with the individuals. According to the interviewees, the first six years of school were filled with hardship and disappointment. Of all the participants, forty percent said that their self-esteem had suffered because of their dyslexia. Because of their low academic self-esteem in secondary school, most of the subjects opted against going to college and instead selected vocational programs. Peer relationships were generally positive, however, several respondents reported having been bullied. As one grew older, there were fewer issues with reading and writing. The students who had completed their education and had steady jobs were the most upbeat.

In wealthy nations like the United States, dyslexia is a well-researched topic; in developing countries like Pakistan, it is uncommon. In Pakistan, parents are completely unaware even about the existence of such disorders in children. Educational and psychological problems like the negative self-image and low self-esteem of children with dyslexia become an issue for the children, and the parents and even teachers are not much more aware of this problem unless it takes severe form. When it is reported to the parents, they often blame the teachers and the school. Parents show their dissatisfaction with the performance, efficiency, and ability of the teacher and school, and often try to change the school of the children with reading disorders. The present study is designed to explore the relationships among dyslexia, self-image, and self-esteem in children with dyslexia to better understand the psychological experiences of those with dyslexia. By understanding how dyslexia negatively affects children's self-image, and self-esteem, educators, and psychologists can develop more effective strategies to empower children with dyslexia, fostering a sense of self-worth despite the challenges posed by the condition. Ultimately, the study seeks to contribute to a more holistic understanding of dyslexia, highlighting the importance of addressing its academic implications.

Hypotheses

1. Children with dyslexia will have a negative self-image.
2. There will be a significant relationship between a child’s self-image and self-esteem in children with dyslexia.

3. Self-image in children with dyslexia will be associated with the gender of the children with dyslexia.

**Method**

**Sample**

A purposive sample of 60 children with dyslexia in the age range of 7-12 (\(M = 9.7\ SD = 1.66\)) included 24 girls and 36 boys. The sample was drawn from different private English medium schools in Faisalabad.

**Instruments**

**Bangor Dyslexia Test: Screening Measure**

The Bangor Dyslexia Test (Miles, 1983) was used as a quick screening device for finding out whether the subject’s difficulties are or are not typically dyslexic. BDT is intended to operationalize the concept of dyslexia by indicating who dyslexic is, by definition (Van-Daal & Miles, 2001). It is also suitable for use by educational and clinical psychologists as a part of wider assessment. It is offered as a contribution towards further understanding of the subject’s difficulties in reading. The author suggested not to be used with subjects aged less than 7 (Miles, 1983).

**The Self-Image Profile for Children (Butler, 2006)**

The Butler Self-Image Profiles are brief self-report measures that provide a visual display of both self-esteem and self-image. There are two forms: One for children aged 7-11 years (SIP-C) and the other for adolescents aged 12-16 (SIP-A). SIP-C was used for the present study. SIP-C is composed of 25 common and familiar self-descriptions; 12 of a negative nature, 12 with a positive nature, and one neutral item. The SIP can be administered in groups as well as individually. The approximate administration time is 9-17 minutes. To take the sketch of the children’s view of self, children are asked to rate 25 self-descriptions according to how they think he is using a 0-6 scale where ‘0’ means ‘not at all’ like the description and ‘6’ means ‘very much’ like the description. To take the sketch of the children’s view of self-esteem, children are asked to rate 25 self-descriptions according to’ how he would like to use 0-6 scale. The child’s positive self-image is obtained from the sum of scores on items 1-12 and negative self-image from the sum of scores on items 14-25. On an item-by-item level, the pattern of SI-SE discrepancy scores provides the scores for self-esteem. A high self-esteem scale score is indicative of low self-esteem. The alpha coefficient reported by the author for both positive and negative self-image was .69 while intercorrelations of SIP-C with the Self Perception Profile by Harter (1985) were found as high, indicating high construct validity. This scale was translated while using a standardized procedure.
and its reliability and validity were determined which be significantly high that is .96 (Malik & Gul, 2007).

**Procedure**

Formal permission was sought from the school authorities for data collection. Informed consent both from parents and children was taken with the help of school authorities. Participants and their parents provided information regarding confidentiality and data use in the future. They were assured that their participation completely on a volunteer basis, it would not include any monetary reward and they could quit at any stage of the study.

**Stage I: Screening of Children with Dyslexia**

At the first stage, a screening procedure was carried out. After getting permission from the principal of the schools the class teachers having at least one year of contact with students were requested to refer the children having reading problems. Then a brief interview with children (having reading problems) and their teachers was conducted to identify the symptoms of dyslexia as per DSM-V criteria (confusion with right/left, before/after, mixing up sounds, difficulty learning the alphabet, transpose letters, confusion with combinations of words). These referred were then administered the Bangor Dyslexia Test and scored accordingly. A score of 6 ‘pluses’ for the age group 7-9, 5 ‘pluses’ for the age group 10-11, and 4 ‘pluses for the age group 12-14 was taken as criteria of selection.

**Stage II: Data Collection from Children**

Selected children for this study were administered the Butler Self Image Profiles (SIP-C) to measure both self-image and self-esteem. First, the researcher asked the child for the list of 25 self-descriptions and asked them to shade/tick/mark the box according to how they thought they were using a 0-4 scale. After all, 25 items had been rated, the children were suggested to go through the items one more time and this time shade/tick/mark the box according to how they would like to be.

**Results**

The data were analyzed with the help of SPSS (version 23). The data/results are presented in two parts. In the first part, by finding Pearson correlation and conducting Regression analysis for different measures, association/relationship, prediction, and reciprocal effects between main variables are found. In the second part of the result, a relationship of demographic variables with maternal stress, behavioral problems, and self-image of children with dyslexia is presented.

**Table I**

Demographic Characteristics of Mothers and Children Sample
Table 1 indicates the demographic characteristics of the current study, children with dyslexia themselves. 60 children with dyslexia age range of 7-12 ($M = 9.7, SD = 1.66$) including 24 girls and 36 boys participated in the sample. 15 % belonged to the low SES group, 62 % belonged to the middle class and 14% belonged to upper SES group.

Table 2
Reliability Analysis and Descriptive of Subscales of Self-Image Profile (SIP)

<table>
<thead>
<tr>
<th>Scales</th>
<th>No. of Items</th>
<th>$\alpha$</th>
<th>$M (SD)$</th>
<th>Cut-off Scores</th>
<th>$f$ (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive Self Image</td>
<td>12</td>
<td>.68</td>
<td>28.47(3.45)</td>
<td>28</td>
<td>22(36.67)</td>
</tr>
<tr>
<td>Negative self-Image</td>
<td>12</td>
<td>.67</td>
<td>36.53(4.51)</td>
<td>36</td>
<td>38(63.33)</td>
</tr>
<tr>
<td>Self Esteem</td>
<td>25</td>
<td>.66</td>
<td>27.00(5.32)</td>
<td>26</td>
<td>36(60.00) LSE</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>24(40.00) HSE</td>
<td></td>
</tr>
</tbody>
</table>

LSE= Low Self Esteem, HSE= High Self Esteem

Table 2 shows the reliability, mean scores, and standard deviation of the Self-Image Profile (SIP) of children with dyslexia. The Higher average score of negative self-images ($M = 36.53, SD$...
= 4.51) indicates that children with dyslexia were having a negative self-image. The median was taken as the cut-off score for the current sample to find the self-image (positive and negative), and self-esteem. **Table 2 shows that 63% of the sample had a negative self-image 37% had a positive self-image. 60% of the sample had low self-esteem and 40% had high self-esteem.** A high score on self-esteem reflects a wide discrepancy between ‘How I Am’ and ‘How I Would Like To Be’ and is therefore indicative of low self-esteem.

**Table 3**  
Pearson Product Moment Correlation among Self-image (Positive & negative) and Self-esteem (n=60).

<table>
<thead>
<tr>
<th>Variables</th>
<th>Positive Self-Concept</th>
<th>Negative Self-image</th>
<th>Self-Esteem</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive Self-Concept</td>
<td>-</td>
<td>-.35*</td>
<td>-.34*</td>
</tr>
<tr>
<td>Negative Self-image</td>
<td></td>
<td></td>
<td>.60**</td>
</tr>
<tr>
<td>Self-esteem</td>
<td></td>
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</tbody>
</table>

*p < .05, **p < .01,

Table 3 shows that positive self-image has a significant negative association with negative self-image \( r = -.35, p < .05 \) and self-esteem \( r = -.34, p < .05 \), as a high score on self-esteem is indicative of low self-esteem. So, this negative relationship between positive self-image and self-esteem indicates that children with dyslexia having positive self-image also have high self-esteem and vice versa. The result shows that Negative self-image has significantly positively associated with self-esteem \( r = .60, p < .01 \), indicating that children having negative self-image also have low self-esteem.

**Table 4**  
t-test for Dyslexic Boys (n=36) and Dyslexic Girls (n=24) for their scores on Negative self-image, Positive Self-Concept, and self-esteem

<table>
<thead>
<tr>
<th>Variable</th>
<th>Boys (n=36)</th>
<th>Girls (n=24)</th>
<th>t (58)</th>
<th>p</th>
<th>Cohen’s d</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
<td>SD</td>
<td></td>
</tr>
</tbody>
</table>
Table 4 shows differences in the mean scores of dyslexic boys and girls for Positive self-image, Negative self-image, and self-esteem.

A significant difference was found between boys and girls on Negative Self-image, $t(58) = 2.9, p < .001$. Dyslexic boys had ($M = 37.83, SD = 4.07$) more Negative Self Image than girls ($M = 34.58, SD = 4.15$). There was also a significant difference found between boys and girls on Self-esteem, $t(58) = -8.39, p < .0001$. Dyslexic girls had ($M = 33.88, SD = 3.92$) lower Self-esteem than boys ($M = 23.94, SD = 4.12$).

**DISCUSSION**

The present study was designed to investigate the relationship of a child’s reading disorder (dyslexia) with self-image (negative and positive self-image) and the self-esteem, of children with dyslexia. Difficulty in phonological awareness, mixing up sounds in multiple-syllabic words, transposing letters, and difficulty learning alphabets contribute a lot to producing negative self-image (Piers, 1984) and low self-esteem (Humphrey & Patricia, 2002). Leitao, at. al. (2017) documented that the experience of dyslexia is indicative of far broader challenges in their lives.

The present study hypothesized that children with dyslexia would have a negative self-image. Results of the current study showed that almost 63% of children with dyslexia of present study had negative self-images suggesting that children with dyslexia experience academic failure and as a result these children have low self-images and badly feel about themselves as noted by Yahyazadeh et al. (2016) that educational problems of dyslexic students have a negative impact on their self-image. According to results, 60% of the present sample also had low self-esteem indicating that failure to keep up at school and academic failure results in lowering their self-esteem and they begin to question their abilities specifically their academic abilities is consistent with Humphrey & Mullins (2002) who documented that the presence of dyslexia produced marked effects on the self-image and self-esteem of children with dyslexia. The finding that a significant portion of the sample had negative self-image and low self-esteem underscores the psychological challenges faced by children with dyslexia, aligning with previous research highlighting the impact of learning disabilities on self-image and self-esteem (Humphrey & Mullins, 2002). These findings
complement the study of Gilroy (2013) who noted that experience of failure left a deep scar and that many students with dyslexia had a poor self-image and suffered from low self-esteem. The study’s findings suggest that male students with dyslexia tend to have a more negative self-image, while female students with dyslexia tend to have lower self-esteem. Gender differences in self-esteem and self-image have been found in various studies, with males often reporting higher self-esteem and self-image than females (Kling & Hyde, 2001).

The gender differences observed in self-esteem are particularly noteworthy, with dyslexic girls exhibiting significantly lower self-esteem compared to boys. This finding resonates with previous research indicating that females with dyslexia may experience greater psychosocial difficulties and lower self-esteem compared to their male counterparts (Mugnaini et al., 2009). The disparity in self-esteem between boys and girls with dyslexia could be attributed to various factors, including societal gender norms and expectations, differential coping strategies, and varying levels of social support (Reynolds & Nicolson, 2007). According to Smith and Leaper (2006) cultural and societal factors, such as gender roles and expectations, can influence self-esteem and self-image. In Pakistani culture, traditional gender roles and expectations may contribute to these differences. In a culture where academic success is often closely tied to notions of masculinity, male students with dyslexia may face heightened pressure and internalize negative perceptions, leading to a more pronounced negative self-image. Female students, on the other hand, may feel they are not meeting societal expectations of being supportive and nurturing, leading to lower self-esteem.

Implications of the study

The current findings contribute to what is known as the self-image and self-esteem of children with dyslexia and have implications for children with dyslexia and the teachers and parents interacting with them. The present study has provided a basic understanding of the very common learning disorder dyslexia that can help teachers and parents prevent the other related problems of dyslexia especially those that were studied in this study. Furthermore, it is suggested that professional and parental awareness about the disorder and their support can reduce the negative impacts of any disorder, teachers and parents must be well aware of dyslexia to deal with it effectively.

Limitations and Suggestions

The present study had several notable limitations. Firstly, it exclusively focused on an urban sample, potentially overlooking the unique experiences of rural populations. Secondly, by restricting its scope to the age group of 7-12 years, it may have missed valuable insights into dyslexia across different developmental stages. Moreover, the study was geographically confined to one city, Faisalabad, which could limit the broader applicability of its findings. Additionally,
the absence of a control group diminishes the study's ability to make comprehensive conclusions and calls for future research to incorporate such controls. Finally, while the study sheds light on dyslexia, further investigation into the coping mechanisms of children with dyslexia is recommended to provide a more holistic understanding of the condition and improve intervention strategies.

**CONCLUSION**

In conclusion, the findings of this study offer valuable insights into the complex interplay between dyslexia, self-image, and self-esteem, particularly concerning gender differences among children. The present study suggests that dyslexia have a far greater impact on the self and self-esteem beyond reading. These reading difficulties adversely affect the self-image and self-esteem of children with dyslexia. The present analysis strongly suggests that children with dyslexia have negative low self-esteem and negative self-image.

**References**


make? Exploring the perceptions and experiences of young people (Doctoral dissertation, University of Southampton).


