

Research Article



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# Awareness Regarding Dyslexia Among Primary School Teachers: A Study in the Context of Social Work

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Dyslexia is a condition that is covered under the specific learning disabilities (SLD) in the Rights of Persons with Disabilities Act 2016 (RPwD Act, 2016). Dyslexia is characterised by inaccurate reading, poor spelling and slow reading. **Objective:** The objective of the study was to ascertain the awareness regarding various aspects of dyslexia among primary school teachers employed in Government schools in Himachal Pradesh and Punjab. **Method:** A descriptive research design was used for the present study. Respondents were selected by multistage sampling technique. A total of 128 primary school teachers from government schools in HP and Punjab were included in the study by using simple random sampling. The structured interview schedule was used as a tool for the study. The tool was also converted into an online survey form using Google Forms. Collected data was then entered in MS Excel and univariate analysis was done. **Findings:** The study found that 89.84% of respondents have heard about the term 'SLD' and 91.40% of respondents have heard about the term 'dyslexia'. The study also found that only 11.97% of the respondents were aware about the RPwD Act 2016, the legislation in which SLD is covered. The major source of the information of the respondents regarding dyslexia was mass media (42.59%) which also included movies like 'Taare Zameen Par'. Respondents considered genetic factors, environmental factors, brain injury as causes of dyslexia. Few teachers also believed that it was a communicable disease. Awareness about all the 'warning signs of dyslexia' and 'signs and symptoms of dyslexia' was reported by 72.65% and 71.79% of the respondents, respectively. 86.32% of the respondents stated that they can identify a child with this condition and according to 35.90% of the respondents, at least one child with this condition was present in their school. 78.63% of the respondents could identify the various strategies associated with the management of this condition. The study also found that 64.71% of respondents were aware of the full form of 'UDID'. Based on these findings the study makes an attempt to highlight ways in which a social worker can create awareness regarding this condition and play a pivotal role in the holistic development of these children. This will also ensure the fulfilment of the objectives of National Education Policy 2020.

## Keywords

Specific learning disabilities, dyslexia, disability, education

## INTRODUCTION

Specific learning disabilities (SLD) have been recognised as disability in The Rights of Persons with Disabilities Act, 2016 (RPwD Act, 2016). As per Clause (zc) section 2 of RPwD Act 2016, SLD is defined as follows:

“specific learning disabilities” means a heterogeneous group of conditions wherein there is a deficit in processing language, spoken or written, that may manifest itself as a difficulty to comprehend, speak, read, write, spell or to do

mathematical calculations and includes such conditions as perceptual disabilities, dyslexia, dysgraphia, dyscalculia, dyspraxia and developmental aphasia.

Dyslexia is the most common SLD (Thambirajah and Ramanujan, 2016). It is a 'hidden disability' showing no sensory or bodily symptoms (Oberoi, 2017). In 1887, Rudolf Berlin introduced the neurological concept of acquired dyslexia. He introduced the term 'dyslexia' for stroke patients who had selectively lost the capacity to read

while maintaining most other cognitive abilities, especially speaking language (Stein, 2017). The International Dyslexia Association (2002) has defined dyslexia as follows:

Dyslexia is a specific learning disability which is neurobiological in origin. It is characterized by poor spelling and difficulties with accurate and/or fluent word recognition and poor decoding abilities. These difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede growth of vocabulary and background knowledge.

The Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act 1995 (PwD Act, 1995) covered only seven types of disabilities namely, blindness, low vision, leprosy, hearing impairment, locomotor disability, mental retardation and mental illness. SLD was not covered under this legislation. RPwD Act 2016 replaced the earlier legislation for Persons with Disability. Twenty-one disabilities were included in this legislation as compared to the seven disabilities that found place in the earlier legislation. SLD was also included in the list of disabilities under 'Intellectual Disability'. According to the 'Dyslexia in India Statistics 2020', between 5% and 20% of persons in Bharat have dyslexia (Parveen and Baig, 2021).

### Understanding Dyslexia

There are two types of dyslexia, developmental dyslexia and acquired dyslexia. Acquired dyslexia is due to some brain injury and developmental dyslexia occurs due to issues associated with the foetus during developmental period (Thambirajah & Ramanujan, 2016). Based on the findings of functional MRI (fMRI) scans, they have further stated that out of the three areas of the brain associated with reading namely – Broca's region in the frontal lobes, middle parieto-temporal area, and occipito-temporal region, the parieto-temporal and occipito-temporal regions are not fully activated in dyslexic children. It has been also found that both hemispheres of the frontal language regions of the brain become overactive (Olulade et al., 2015). According to Thambirajah and Ramanujan (2016), dyslexia, dyscalculia and dysgraphia occur with one another, and specific language impairment may also occur

with dyslexia. According to them, dyslexia is also associated with dyspraxia, attention deficit hyperactivity disorder, behaviour and psychological issues like low self-esteem, anxiety and oppositional behaviour.

Identification of warning signs related to dyslexia during early childhood can aid its timely management. In dyslexia, preschool children show difficulty in learning alphabets, mispronouncing words, difficulty in naming colours, objects and also in grasping nursery rhymes. Such children prefer oral tests instead of written tests and show slow progress or laboured reading, poor spelling at the level of primary school (Thambirajah & Ramanujan, 2016).

### Society and Dyslexia

It has been found that children with SLD are subject to humiliation and ridicule. Words like 'tube light', 'dumb' and 'introvert' are used for them and people make fun of them (Rana, 2021). Some people also refer to them as 'person with low intelligence' (कम बुद्धि वाला व्यक्ति), 'stupid' (बेवकूफ) and 'mentally imbalanced person' (मानसिक रूप से असंतुलित व्यक्ति) (Mangain, 2022). Children with SLD need special care and attention both at home and school. Teachers play an important role in the overall development of the children (UNICEF, 2016). It has been reported that there is a lack of knowledge among teachers regarding SLD (Kaur & Padmanabhan, 2017; Arifa & Siraj, 2019). Awareness among teachers is also low for dyslexia (Oberoi, 2017). He further adds that providing the teachers information about the condition and enabling them to identify the early warning signs is one of the simplest and most efficient methods to increase awareness.

School teachers can play a vital role in the early identification of children with dyslexia. Lack of early identification and wrong perception of teachers regarding dyslexia may affect the academic growth of the child (Hada & Vats, 2022). The negative effects of dyslexia can be substantially mitigated by early detection and subsequent therapy for children at risk (Schelbe et al., 2021). It has been found that early identification of conditions like SLD is very helpful for the remedial measures (Muthusamy & Sahu, 2020). For early identification of dyslexia government of Bharat has launched a mobile application named PRASHAST (Pre-Assessment Holistic Screening Tool) developed by The National Council of Educational Research and Training (NCERT).

### The RPwD Act 2016 and Dyslexia

The RPwD Act 2016 provides nationwide empowerment to students with SLD, which includes conditions like dyslexia (RPwD Act, 2016). The main features of this law include the prohibition of discrimination, inclusive education in regular schools or institutions, access to occupational therapy, remedial education, and reservations for government jobs and places in higher education. The legislation also focuses on (i) early identification and routine screening once a year; (ii) enough resource centres to support school education at all levels; (iii) enough training facilities to create special educators or remedial teachers; (iv) including SLD as a component in all education courses in Schools, Colleges, and Universities; and (v) University professors, medical professionals, paramedics, social workers, rural development officers, Anganwadi officers and certified Social Health Activists (Karande, 2022).

### Statement of the Problem

Primary school teachers can play an important role in the early detection of children with dyslexia. In the context of social work, understanding the awareness levels of primary school teachers about dyslexia is essential because school social workers perform their duties along with teachers to ensure that children, including those with learning disabilities, are able to attain the desired learning outcomes. Therefore, ascertaining the awareness levels of primary school teachers regarding dyslexia can lead to significant improvement in the support system for children with dyslexia.

This study aims to assess the awareness about dyslexia among primary school teachers. It intends to explore their awareness regarding the causes, warning signs, and symptoms of dyslexia. It also aims to ascertain whether these teachers are aware about the manner in which they should handle such children in the classroom. This research seeks to provide suggestions for social work intervention in an attempt to ensure that the children with dyslexia get adequate support in the school and their learning outcomes are improved.

### Objectives of the Study

1. To assess the awareness regarding dyslexia among primary school teachers.

2. To assess the awareness regarding management of dyslexia among the primary school teachers.
3. To suggest social work interventions for the improvement in condition of children with dyslexia.

### REVIEW OF LITERATURE

Yurdakal & Kirmizi (2015) undertook a study to ascertain the level of knowledge regarding dyslexia among elementary teacher candidates in Turkey. The case study was used as a research design for the study. Convenient sampling was used for selecting 226 respondents. The study found that elementary teacher candidates were aware about the common signs of dyslexia, but were not aware of how to manage the problems of dyslexic learners.

Charan & Kaur (2017) conducted a descriptive cross-sectional survey to check the knowledge and attitude of 110 school teachers in Phagwara and Jalandhar (Punjab) on dyslexia using convenient sampling method. A structured knowledge questionnaire and structured attitude scale on dyslexia with a five-point Likert scale were used as research tools. Results showed that 35.5% teachers had average knowledge, 29.1% teachers had below-average knowledge, 27.3% had good knowledge and 8.2% teachers showed very little knowledge regarding dyslexia.

Hemadharshini et al. (2020) conducted a cross-sectional study on knowledge about dyslexia among school teachers. 279 teachers were selected from 10 schools using a convenient sampling technique. The results showed that 52.3% of the school teachers had little knowledge, 43.7% had moderate and 3.6% had poor knowledge about dyslexia.

Bajaj & Bhatia (2019) conducted a qualitative study in Delhi to understand the issues and challenges faced by various stakeholders including teachers, parents and counsellors working with children with dyslexia. Using snowball sampling technique 20 teachers, counsellors and children were selected. A semi-structured interview schedule was used as a tool. The findings showed that there is a lack of awareness and acceptance among parents of dyslexia. Counsellors told that parents ignore the symptoms and also lack of support which leads to delay in assessment and remediation. Teachers mentioned that there is a lack of training for them to deal with dyslexic learners. It was also found that the teachers were not aware of policies, or concessions for such students.

Soni et al. (2022) assessed the attitude and awareness of teachers regarding learning disabilities in primary schools in Himachal Pradesh. A descriptive research design was used for the study. They selected 100 school teachers using non-probability convenient sampling technique and the respondents were interviewed using a self-structured knowledge questionnaire. The findings of the study showed that 61% teachers had a good understanding of learning disabilities and the remaining 39% had a fair knowledge of learning disabilities.

Sathyamurthi & Johney (2022) in their quantitative research study explored the public awareness among respondents about dyslexia. Both male and female respondents in the age group of 15 years and above were selected through snowball sampling. With the use of the scale of 'Knowledge and Beliefs about Developmental Dyslexia', it was observed that 51.6% respondents had moderate knowledge about dyslexia. The knowledge level of dyslexia is semantic (54.8%) for over half of the respondents. This comprised of concepts, facts, ideas and beliefs. It was also found that almost half (49.5%) of the respondents had specific beliefs about dyslexia.

Rakshit & Mete (2022) explored the awareness in teachers regarding the identification of dyslexia. In their descriptive study, 50 teachers and 500 students enrolled in the primary classes were selected by stratified random method. A questionnaire and open-ended interview were used as a tool. The results showed that 4% of the children showed signs of dyslexia. While only 12% of the teachers were aware about the condition, there was no awareness among the parents. School teachers mentioned that they transfer these children to special schools, and inform the parents and education officials in the Block Level about dyslexic children. Teachers rarely gave special attention to these children.

Makgato et al. (2022) conducted a study to assess the awareness regarding dyslexia among government primary school teachers in South Africa. As part of the study, 30 school teachers were selected using purposive sampling technique. A questionnaire and 5-point Likert scale were used as the tool for the study. Qualitative data was also collected by the researchers. They found that teachers had basic knowledge regarding the dyslexia and possessed limited skills to cope with the learners with dyslexia in the classrooms. The teachers were willing to attend more training related to dyslexia so that they could acquire

knowledge and help the children with dyslexia.

Wahab et al. (2023) undertook a study to examine the skills of social workers in dealing with children who have learning difficulties in Shivamogga, Karnataka, India. A total of 61 samples were chosen with purposeful sampling technique. Primary data was collected with the help of Academic Stress Scale and questionnaire. The study highlighted the importance of social work professionals in schools, as teachers were unable to recognise children with learning disabilities and the need for providing teacher training and implementation of customised interventions for the students with learning disabilities.

### RESEARCH METHODOLOGY

**Research Design:** Descriptive research design was used for this study. This research design aided the fulfilment of the objectives of the study.

**Locale of the Study:** Two states of North Bharat namely HP and Punjab were purposely selected for the study.

**Universe:** The universe of the study included all the government primary school teachers in Himachal Pradesh and Punjab.

**Sample Design:** A multistage non-probability purposive sampling technique was used by the researcher for the selection of respondents for the study.

- *Stage I:* Four districts of Himachal Pradesh and also four districts from Punjab were selected by simple random sampling. The names of the districts are as follows in Table 1.

**Table 1: List of selected districts**

State	District
Himachal Pradesh	Una
	Kangra
	Bilaspur
	Shimla
Punjab	Hoshiarpur
	Jalandhar
	Amritsar
	Ludhiana

- *Stage II:* From each selected district of Himachal Pradesh and Punjab, a list of government primary schools was obtained and from this list, eight schools were selected by simple random sampling. The total number of schools selected from both the states was 64.

- *Stage III:* From each selected government primary school two teachers were selected by using simple random sampling. The total number of teachers selected for the study was 128. Primary data was collected from all the respondents for the study.

**METHOD AND TOOL OF DATA COLLECTION**

A structured interview schedule was designed and used for the study. The tool was finalised after pre-testing. The tool was then translated into Hindi and Punjabi. The tool in all three languages was converted into an online survey form using Google Forms. According to Raju & Harinarayana (2016), Google Forms is a method with which online surveys are conducted by creating and developing online surveys. The link to the online form was sent to the respondents selected for the study.

**Data Analysis:** Data was entered in MS Excel and univariate analysis was done.

**RESULTS**

**Profile of Respondents**

Table 2 shows that out of the total respondents 79.68% were female and the remaining 20.31% were male. An equal number of school teachers interviewed for this study were above and below 35 years old (50%). It was found that the majority of the respondents (64.06%) held a post-graduate degree. 28.13% of the respondents were graduates. Of the respondents, 7.81% had educational

**Table 2: Profile of respondents**

Characteristic	Frequency (n=128)	Percentage (%)
<b>Sex</b>		
Female	102	79.68
Male	26	20.31
<b>Age (years)</b>		
20-25 Years	21	16.41
25-30 Years	02	1.56
30-35 Years	41	32.03
35-40 Years	31	24.22
40-45 Years	33	25.78
<b>Educational Qualification</b>		
Graduation	36	28.13
Post-Graduation	82	64.06
Other	10	7.81

Source: Primary Data

qualifications below graduation like Junior Basic Training (JBT) which is a two-year diploma-level teacher training programme and Diploma in Art and Craft course.

**Awareness about Specific Learning Disabilities and Dyslexia**

Table 3 shows that 89.84 per cent of the respondents were aware of the term ‘SLD’. However, it is important to note that in spite of the efforts of make the teacher aware about SLD, 10.16 per cent of the respondents had not heard about the term. The distribution of respondents regarding ‘Awareness about the term Dyslexia’ was similar to the distribution regarding ‘Awareness about the term Specific Learning Disability’. While 10.16 per cent of the respondents had not heard about SLD, the percentage of respondents who had never heard about dyslexia was 8.59 per cent.

**Table 3: Distribution of respondents based on awareness about the terms specific learning disability and dyslexia**

Condition	Frequency (n=128)	Percentage (%)
Awareness about the term SLD	115	89.84
Awareness about the term Dyslexia	117	91.40

Source: Primary Data

Legislations play a significant role in empowering Persons with Disability. As shown in Table 4, most respondents (41.88%) were aware of two legislations namely Mental Health Care Act 2017 and PwD Act 1995. While 33.33% of the school teachers had heard only about the PwD Act 1995, only 12.82% respondents had heard about the Mental Health Care Act 2017. It is important to note that only 11.97% of the respondents were aware of the RPwD Act 2016, the legislation in which ‘SLD’ is covered.

**Table 4: Distribution of respondents based on knowledge of the nomenclature of the legislation concerning persons with Dyslexia**

Legislation	Frequency (n=117)	Percentage (%)
Mental Health Care Act 2017	15	12.82
PwD Act 1995	39	33.33
RPwD Act 2016	14	11.97
Mental Health Care Act 2017 & PwD Act 1995	49	41.88

Source: Primary Data

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As shown in Table 5, it was found that the most common source of information regarding dyslexia was mass media (42.59%). This includes respondents whose source of information on dyslexia was movies like ‘Taare Zameen Par’. Many respondents stated that this movie played a significant role in making people aware about this condition. This was followed by books (27.34%) and in-service education programmes (19.53%). It is important to note that only very few respondents received information about dyslexia from print media (3.12%) and social media (2.34%).

**Table 5: Distribution of respondents based on source of information about Dyslexia**

Source of information	Frequency (n=117)	Percentage (%)
Mass media	60	42.59
Books	35	27.34
In-Service Education Programme	25	19.53
Print Media	4	3.12
Social Media	3	2.34

Source: Primary Data

**Identification and Management of Dyslexia**

There could be several causes of dyslexia (Ikediashi, 2012). To ascertain the awareness of respondents regarding the causes of this condition, the school teachers were asked an open-ended question about ‘what according to them was the cause of dyslexia?’ Most respondents (68.38%) stated that the only cause of dyslexia was ‘genetic factors’. The respondents who stated that only ‘environmental factors’ or ‘brain Injury’ was the cause of dyslexia were 13.68% and 8.55%, respectively. The study found that 2.56% of the school teachers who were aware of dyslexia believed that it can be transmitted from one child to another (Table 6).

As noted by Thambirajah and Ramanujan (2016), there are several warning signs of dyslexia depending of the age of the child. An attempt was made to ascertain the awareness about warning signs of dyslexia in children studying in primary classes among the respondents. Most respondents (72.65%) stated that if a child shows any one of the signs given as option for this question, this should be considered as a possible warning sign of dyslexia. 7.69% of the respondents were of the opinion that ‘only slow progress in reading’ and ‘only poor spelling’ were the possible warning signs of this condition. ‘Only difficulty

**Table 6: Identification and Management of Dyslexia**

Dyslexia	Frequency (n=117)	Percentage (%)
<b>Awareness about Causes of Dyslexia</b>		
Genetic Factors	80	68.38
Environmental Factors	16	13.68
Brain Injury	10	8.55
Genetic & Environmental Factors	5	4.27
Communicable	2	1.71
Genetic Factors & Brain Injury	2	1.71
Genetic Conditions & Communicable	1	0.85
All of the Above	1	0.85
<b>Awareness about Warning Signs of Dyslexia</b>		
Slow progress in reading	9	7.69
Difficulty in reading from board	7	5.98
Difficulty in reading unknown words	2	1.71
Making numerous reading errors	2	1.71
Only poor spelling	9	7.69
Any of the above signs	85	72.65
Unaware	3	2.56
<b>Awareness about Signs and Symptoms of Dyslexia</b>		
Inaccurate reading	9	7.69
Poor spelling	9	7.69
Slow reading	12	10.26
Any of the above signs	84	71.79
Unaware	3	2.56
<b>Ability to Identify Child with Dyslexia</b>		
Yes	101	86.32
<b>Presence of Child with Dyslexia in the School</b>		
Yes	42	35.90
<b>Awareness about Management of Dyslexia</b>		
Awareness among parents and teachers	2	1.71
Presence of special education teacher	3	2.56
Educational interventions	3	2.56
Creation of proper environment	4	3.42
Curriculum support	3	2.56
Remedial classes	4	3.42
Different evaluation parameters	1	0.85
Counselling	2	1.71
All of the above	92	78.63
Not aware	3	2.56

Source: Primary Data

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in reading from board' was considered as a warning sign by 5.98% of the respondents. While 2.56% were unaware of any warning signs, an equal percentage of respondents of this study (1.71%) stated that 'only difficulty in reading unknown words' and 'only making numerous reading errors' were the possible warning signs of dyslexia, respectively (Table 6).

The study also made an attempt to gauge the awareness among the respondents regarding the signs and symptoms of dyslexia. 71.79% of the respondents stated that if a child shows any one of the signs given as options for this question, this should be considered as a possible sign of dyslexia. 'Only slow reading' was considered as a sign of dyslexia by 10.26% of the respondents. 'Only inaccurate reading' and 'only poor spelling', respectively, were the signs of dyslexia according to 7.69% of the respondents. 2.56% of the respondents were not aware of any sign of the condition (Table 6).

In total, 86.32% of the respondents stated that they can identify a child with dyslexia. This is 14.53% and 13.67% higher than the respondents who could correctly answer the questions assessing the awareness of the respondents regarding the warning signs and symptoms of dyslexia, respectively. It was reported by 35.90% of the respondents that child/children with dyslexia was/were enrolled in their school (Table 6).

The study also assessed the awareness of respondents regarding the management of dyslexia. Doyle (2008) has discussed several ways of management of dyslexia among children. Of the respondents, 78.63% stated that all the options for this question should be considered for the management of dyslexia in children; 2.56% of the respondents stated that they were unaware of how to manage this condition in children. The remaining 18.80% of the respondents selected only one of the given options as a possible way of management of dyslexia (Table 6).

The researchers also tried to assess the awareness among the respondents regarding the Unique Disability Identity (UDID) Card. 92.97% of the respondents had heard about the card which intends to empower Persons with Disability in Bharat. Among these respondents, 64.71% of the respondents could correctly state the full form of UDID.

## DISCUSSION AND CONCLUSION

The present study found that 89.84% and 91.40% of the respondents were aware of the terms 'specific learning

disorder' and 'dyslexia', respectively. In a previous study, 52.3% had mild knowledge, 43.7% had moderate and 3.6% had poor knowledge (Hemadharshini et al., 2020). The lack of awareness about these terms among the school teachers is a matter of concern as it is most likely that these teachers are not able to identify the warning signs of this condition in the children in their classrooms. The difference in the awareness regarding these two terms may be because the respondents were aware of the specific condition 'dyslexia' and had not heard about the category 'specific learning disorder' within which this condition is placed in the RPwD Act 2016.

It was found that most respondents were not aware of the nomenclature of the new legislation for the PwDs. The knowledge regarding the relevant legislation for dyslexia is important for school teachers and lack of it is most likely to prevent them from making children aware about the same. This is supported by previous research wherein it has been pointed out that there is a need to create awareness regarding RPwD Act 2016 (Chauhan et al., 2021). This awareness is important because RPwD Act 2016 has replaced the PwD Act 1995 and has a revised list of disabilities including SLD under which dyslexia has been added (Balakrishnan et al., 2019). The study found that only 19.53% of the respondents received information about dyslexia from their in-service education programmes. Such programmes play a major role in acquainting the teachers with new advances in their field including awareness about SLD. Previous researchers have also highlighted the need to design and conduct training programmes related to the dyslexia for school teachers in order to create awareness among teachers regarding dyslexia (Shetty & Rai, 2014). Based on the findings of this study it can be stated that the potential of print and social media has not been harnessed for spreading awareness regarding this condition. Social media has emerged as a major source of information in the last decade. School social workers can take the lead in creating and circulating social media content on this condition to ensure that teachers, parents and general public have access to correct information.

The study found that unscientific belief such as 'dyslexia is communicable' is still prevalent among school teachers. The presence of teachers with such beliefs will severely hinder the efforts for early identification of children with dyslexia. This finding is in congruence with the previous finding that there are various misconceptions

regarding dyslexia (Ramli et al., 2019). Further, very few respondents are aware that brain injury can also lead to dyslexia. While most respondents were aware of the warning signs of dyslexia and its signs and symptoms, it was found that 24.79% and 25.64% of the respondents were not fully aware about these two important aspects associated with dyslexia. These respondents could only identify one of the warning signs and symptoms of the condition. These respondents are most likely to miss these signs in the children in their classroom. Most respondents have stated that they can identify a child with dyslexia; however, in light of the findings that many are not fully aware of the signs and symptoms of this condition, it can be stated that many cases of children with dyslexia may go unnoticed in the classrooms where these respondents are teaching. Similarly, it can be stated that 18.80% of the respondents were not fully aware about the manner in which dyslexia has to be managed. The study supports the earlier finding that awareness regarding SLD (including dyslexia as a condition) will be helpful in early identification and management of this condition (Shetty & Rai, 2014).

At present there is no available cure for dyslexia. However, with proper management like remedial instructions, interventions and support of the parents, teacher the children may achieve success in their life (Thambirajah & Ramanujan, 2016). Early diagnosis of this condition can play a major role in its management and primary school teachers are a major stakeholder in the efforts towards early detection and management of this condition. Teachers spend most of the time with students and if they are aware about it, they will be able to inform the parents and take proper steps in the classroom for such children. Previous research also supports this argument that teachers should be capable of identifying children with dyslexia and should have knowledge regarding early sign and symptoms which help in designing early interventions for these children (Sunil et al., 2023).

The present study shows that there is ample scope of work to increase the awareness about various aspects of dyslexia among primary school teachers. Stress has been laid on undertaking steps to raise awareness about dyslexia (Sathyamurthi & Johnney, 2022). Social workers can play a significant role in this direction. Social workers across practice settings have duties to address dyslexia, including recognising, referring, educating, and advocating (Schelbe

et al., 2021). There is a need to create awareness regarding RPwD Act 2016 among school teachers. The social workers can design an innovative booklet for this purpose. Since mass media is the most common source of information about this condition, social work agencies should produce mass media content that can be shown to the teachers in the training programmes. Such contents are most likely to draw more attention of the participants in the training sessions on such important topics. The modules on specific learning disability used in the teachers' training programmes can be redesigned to make them more appealing to the participants. Social media is a powerful tool and social workers can work with animators to create graphics on various aspects of dyslexia and using a social media strategy it can be disseminated. Government can fund a study to ascertain the level of awareness among the primary teachers in all the schools and based on the findings create awareness generation modules on causes, warning signs, symptoms, and management of dyslexia. The school teachers should be also made aware of the latest technologies and teaching techniques for children with dyslexia. In addition, school social workers can undertake screening and design and execute suitable interventions. The study found that misconceptions about this condition are still prevalent. Social workers can work towards dispelling these myths (Yerriswamy & Alur, 2022). Hence, it can be argued on the basis of this study that while most Government school teachers in Himachal Pradesh and Punjab are aware about the terms 'SLD' and 'dyslexia', there is a need to ensure that all teachers are fully aware about the early signs, symptoms, and ways to manage such children. There must be no teacher with any misconception about this condition. Social workers can play a major role in achieving this objective by working with all the major stakeholders and taking the lead in undertaking baseline surveys, generating content including training material, and conducting sessions on these topics. Social workers can thereby play a key role in the achievement of the goals envisioned in the National Education Policy 2020.

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