



## Challenges experienced by migrant parents of children with dyslexia in Greece: A bioecological systems perspective

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### Abstract

*This qualitative study interview-based study explores how migrant parents in Greece understand their child's dyslexia and how they try to obtain support across home, school, and public services. The analysis is based on Bronfenbrenner's bioecological model, feminist care theory, and an intersectionality. Semi-structured interviews with eleven migrant parents were analyzed using reflexive thematic analysis. Participants described dyslexia first as a daily pattern at home which included constant effort that did not lead to stable improvement, repeated spelling and decoding breakdowns, long homework hours, avoidance behaviors, and children's self-doubt. Many families managed homework through bilingual "bridging" which increased both cognitive load and emotional strain. At school, parents reported that classroom practices such as public reading and strict written grading often travelled home and affected their evening routines. Participants also described unequal access to assessment and support. Public procedures were experienced as slow, unclear, and dependent on their persistence. Families spoke of long waiting lists, shortages of specialists, and unstable parallel support. Those who could pay for private assessment or tutoring gained earlier clarity and more help, while others waited and watched difficulties accumulate. Across contexts, participants encountered moralized interpretations of literacy struggle, comments implying the child should "try harder" or the parent should be "stricter." For participants, this felt tied to broader scrutiny and fear of being judged as inadequate outsiders. Over time, parents reported becoming more strategic: learning how the system works, keeping documents, insisting on rights, and adjusting home routines to protect the child's confidence. Yet uncertainty remained, especially around future school transitions and increasing written demands. Overall, the study shows dyslexia as biologically grounded but socially shaped through institutional delay, exam-driven expectations, and reliance on gendered, unpaid parental labor to compensate for gaps in provision.*

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## 1. Introduction

Dyslexia is widely recognized as a neurodevelopmental learning difference that primarily affects reading accuracy, spelling, and written fluency. While cognitive research has extensively examined its phonological and processing dimensions, increasing attention has turned toward the social contexts in which dyslexia is identified, interpreted, and supported (Hassan, 2023). Diagnosis does not occur in isolation from institutional systems, family dynamics, or broader cultural expectations. Instead, it unfolds within educational

environments structured by policy, resource allocation, and dominant beliefs about academic success (Thom Nevill & Forsey, 2023).

In national education systems characterized by high-stakes examinations and strong emphasis on written performance, literacy difficulties carry amplified consequences. In Greece, academic progression is closely tied to formal written assessment and examination performance. The panhellenic examination system functions as a central gateway to higher education which reinforces the importance of literacy accuracy and written competence (Lambropoulos, Panagiota, & Karatzia-Stavlioti, 2022). Within such a system, reading and writing difficulties are not simple challenges, they affect perceived academic trajectory and long-term opportunity.

For migrant families, these pressures intersect with additional layers of social meaning. Educational success in Greek-language schooling is frequently associated with integration, belonging, and upward mobility. Literacy proficiency becomes a visible indicator of adaptation within the host society. When a child struggles with reading or writing, parents may interpret this not only as a learning difficulty but also as a potential threat to future stability and social acceptance. Research in the Greek context has documented how migrant families often experience heightened scrutiny in relation to educational performance and language acquisition (Anagnostaki, Pavlopoulos, Obradović, Masten, & Motti-Stefanidi, 2016). Dyslexia, therefore, becomes entangled with broader questions of legitimacy and opportunity.

At the same time, the mechanisms responsible for recognizing and supporting dyslexia in Greece operate within structural constraints. Public assessment through KEDASY (Centres for Interdisciplinary Assessment, Counselling and Support) frequently involves extended waiting periods, particularly in rural areas. Parallel support which intends to provide in-class assistance through a special education teacher, depends on annual recruitment cycles, temporary contracts, and regional staffing availability. Recent findings have highlighted administrative instability in parallel support provision and structural barriers affecting inclusive implementation (Giavrimis, 2024; Koutsoklenis & Karagianni, 2024). While inclusive education is formally endorsed, practical support often depends on staffing continuity and institutional capacity (Koutsoklenis & Karagianni, 2024).

International research similarly demonstrates that dyslexia diagnosis and support are affected by structural and socioeconomic factors. Nevill, Savage, and Forsey (2023) describe diagnosis as unevenly accessible, with families possessing greater economic resources able to secure faster private assessment. Anthony and Gautam (2026) describe the emotional toll of prolonged assessment processes, while Leslie, Brown, and Larsen (2025) identify barriers in parent-school partnerships that complicate implementation of accommodations. These studies suggest that dyslexia is not experienced solely as an individual cognitive difference but as a relational and institutional process. Despite growing international scholarship, limited research has examined how migrant parents in Greece experience the recognition and management of dyslexia within this particular educational context. Existing studies on inclusive education in Greece tend to focus on policy frameworks or teacher perspectives. Less attention has been given to the lived experience of migrant families who try to navigate the Greek assessment system and examination-oriented schooling. Furthermore, little research has explored how parental advocacy evolves over time within these structural conditions.

To address this gap, the present study examines how migrant parents in Crete, Greece, experience and negotiate their child's dyslexia across home, school, and institutional settings. The analysis is guided by Bronfenbrenner's bioecological model, which views development as occurring within nested and interacting systems. This framework enables examination of dyslexia not only at the level of individual learning but also across family routines (Microsystem), home-school interaction (Mesosystem), institutional procedures (Exosystem), cultural expectations (Macrosystem), and temporal transitions (Chronosystem). Feminist care theory further informs analysis of parental labor, particularly the gendered distribution of emotional and administrative responsibility within families. By exploring parental experience through this multi-layered framework, the study aims to move beyond deficit-oriented interpretations of dyslexia and beyond individualized accounts of parental coping. More specifically, the two leading questions of this study are:

1. How do migrant parents in Crete experience their child's dyslexia across home, school, and institutional contexts?
2. How do educational structures, cultural expectations, and temporal transitions influence parental advocacy and support practices?

### *1.1. Bronfenbrenner's Bioecological Model, Intersectionality and Feminist Care*

To analyze how these layered realities interact within family life and schools, the study adopts Bronfenbrenner's bioecological model as its analytical lens (Bronfenbrenner, 2013). The bioecological model conceptualizes human development as occurring within systems that influence each other across time. Development results from reciprocal interactions between people and their environments. These interactions which are described as proximal processes are central to the model. They are sustained engagements that occur regularly and affect cognitive, emotional, and social development.

The microsystem refers to the immediate environments in which the child participates directly. In this study, the primary microsystems include the family and the classroom. Within the family, dyslexia is visible through daily literacy tasks. Homework routines often involve reading aloud, completing written exercises,

and preparing for assessments. Parents frequently assume instructional roles. They clarify vocabulary, repeat instructions, monitor progress, and provide emotional reassurance. These repeated interactions constitute proximal processes. The emotional tone of these interactions influences both literacy development and the child's self-perception. When homework is associated with frustration and conflict, anxiety may increase. When support is structured and patient, confidence may develop.

In migrant households, microsystem dynamics are related bilingual environments. Parents may speak a heritage language at home while children receive instruction in Greek (Mattheoudakis, Chatzidaki, & Maligkoudi, 2020). Homework support may therefore involve translation between languages. Parents may explain concepts in one language while children attempt to express understanding in another. This linguistic mediation adds cognitive and emotional complexity. Parents' own proficiency in L1, in this case Greek is related to their ability to support written tasks. A parent who is fluent in Greek may directly engage with spelling patterns and grammatical rules. A parent with limited proficiency may focus on conceptual understanding and rely on external tutoring for technical support. These variations affect the quality and nature of proximal processes within the family microsystem. The classroom constitutes another central microsystem. Teachers' strategies influence how dyslexia is experienced. Classrooms that offer differentiated instruction, oral responses and extended time may reduce performance anxiety. Classrooms that emphasize reading aloud and strict written assessment may intensify difficulty (Seiradakis, 2023). The child's experience of the classroom microsystem interacts with the family microsystem. A supportive teacher may reduce parental stress at home. A dismissive teacher may increase advocacy demands (Nevill et al., 2023).

The mesosystem refers to the connections between microsystems. The relationship between home and school is central in the identification and management of dyslexia. Parent-teacher communication determines whether concerns are acknowledged and whether referrals for assessment are initiated. For migrant parents, this interface may involve asymmetry. Teachers work within professional discourse and institutional authority (Schwartz, Dror, & Dor, 2026). Parents may lack familiarity with assessment procedures or educational terminology. Language barriers may limit clarity of communication (Seiradakis, 2024). These factors affect whether parental concerns are interpreted as legitimate or as expressions of anxiety. Mesosystem quality influences trust. When teachers provide clear explanations and collaborative planning, parents report increased confidence. When communication is opaque or dismissive, mistrust develops. Migrant parents may feel that their concerns are attributed to cultural misunderstanding or limited language exposure (Martin, Horgan, & Looney, 2025). The mesosystem thus becomes a site where dyslexia is either recognized as a learning difference or reframed as a temporary language issue.

The exosystem includes settings that indirectly influence the child. In Greece, public diagnostic services operate within structured bureaucratic systems. Access to assessment may require documentation, formal referrals, and waiting periods. Migrant parents may encounter limited translation support or unclear procedural guidance. Employment conditions influence availability for appointments and school meetings. Families experiencing economic precarity may struggle to afford private assessments or tutoring. These exosystem conditions affect family stress and decision-making. Language policy also operates at the exosystem level. Educational assessment tools are typically standardized for monolingual Greek speakers (Stathopoulou et al., 2025). Distinguishing between dyslexia and second-language acquisition requires careful evaluation. If assessment practices do not adequately account for bilingual development, misidentification may occur (Jørgensen, Dobson, & Perry, 2021). This structural issue influences both diagnosis rates and parental confidence in institutional fairness.

The macrosystem includes broader cultural values and social ideologies. In Greece, educational achievement and literacy proficiency are closely linked to social mobility (Leontopoulou & Chletsos, 2023). Success in Greek-language schooling is often associated with integration and belonging for migrant families. Within this ideological framework, literacy difficulties may be interpreted as indicators of insufficient adaptation rather than as neurodevelopmental differences. Cultural narratives about parental responsibility intensify scrutiny. Migrant parents may feel evaluated not only on their child's performance but also on their perceived commitment to integration (Anthony & Gautam, 2026). This macrosystem context shapes both institutional interpretation and parental self-perception.

The chronosystem introduces temporal dynamics. Development unfolds across life stages and historical conditions. Migrant families experience settlement trajectories that intersect with children's educational progression. Early years may focus on language acquisition and social adjustment. Later stages introduce increased academic demands. Parental understanding of dyslexia evolves across these transitions. Initial confusion may shift toward informed advocacy. Stress may accumulate during examination periods or decrease when support is stabilized (López-Zamora, Porcar-Gozalbo, López-Chicheri, & Cano-Villagrana, 2025). The chronosystem perspective allows examination of cumulative patterns rather than isolated episodes.

While the bioecological model provides a useful cultural lens, feminist care theory contributes a critical perspective on parental labor. Care work includes teaching support, emotional reassurance, administrative coordination, and advocacy (Schraml-Block & Ostrosky, 2022). In many societies, including Greece, mothers assume primary responsibility for communication with schools and management of learning difficulties (Armao & Anagnostaki, 2024; Rentzou & Ekine, 2017). This distribution reflects broader gendered

expectations embedded within teaching practice. Schools frequently contact mothers by default. Mothers attend meetings, organize documentation, and monitor homework. For migrant mothers, this labor may include translation between languages and interpretation of bureaucratic language. Emotional labour involves regulating personal anxiety while maintaining stability for children (Chan & Mo, 2023). This regulation is ongoing and often unrecognized (Xhaho, Bailey, & Çaro, 2022). Feminist care theory situates these practices within structural expectations rather than presenting them as individual dispositions. Schools and systems often rely implicitly on parental advocacy to compensate for systemic gaps (Kibria & Becerra, 2021). When support is inconsistent, parents intensify involvement. This dynamic reflects structural reliance on unpaid labor.

Intersectionality Collins and Bilge (2020) is incorporated as an analytical sensitivity that recognises variation within migrant populations. Gender intersects with class, language proficiency, migration history, and legal status. Migrant parents with higher educational backgrounds may manage to cope institutional systems more effectively. Families with limited economic resources may face greater constraints. Racialized assumptions may also influence teacher expectations and institutional responses.

The integration of bioecological systems theory feminist care theory, and intersectional sensitivity provides a coherent theoretical foundation. Dyslexia is conceptualised as biologically grounded yet socially mediated. Institutional recognition and support are shaped by communication patterns, policy structures, and cultural ideologies. Parental advocacy emerges as a response to structural conditions rather than as an individual trait. Migrant parents operate within nested systems that both constrain and enable action. This framework supports a multi-layered explanation of how migrant parents in Greece negotiate dyslexia within a monolingual educational system characterized by strong achievement norms. It recognizes the material reality of learning differences while situating parental experience within structured inequality. It accounts for relational dynamics across home and school while incorporating broader socio-political conditions. By grounding analysis in this theoretical architecture, the study provides a structured account of how dyslexia intersects with migration, language, gender, and institutional power over time.

## **2. Method**

### *2.1. Research Design*

This study employed a qualitative interpretive design to explore how migrant parents in Crete, Greece, experience and cope with their child's dyslexia within mainstream schooling. The study sought to understand lived experience, meaning-making processes, and institutional encounters rather than to measure prevalence or intervention outcomes. A qualitative approach was therefore appropriate because it enabled in-depth examination of parental narratives across home life, school interaction, and engagement with public services.

The study was informed by Bronfenbrenner's bioecological model, which conceptualises development as occurring within interacting systems over time. The model provided a structured lens for interpreting how daily family routines, school communication, institutional procedures, and broader sociocultural conditions intersect in the recognition and management of dyslexia. Feminist care theory informed attention to parental labour, particularly maternal emotional and administrative work. An intersectional sensitivity guided analysis of how gender, socioeconomic position, linguistic capital, and migration history intersected within these systems. The research adopted a contextualist epistemological stance. Dyslexia was understood as a neurodevelopmental difference whose identification and management occur within structured educational and institutional contexts.

### *2.2. Participants and Context*

Participants were migrant parents residing in Crete, Greece, whose child had received or was in the process of receiving a formal diagnosis of dyslexia within the Greek public education system. All children attended mainstream primary or lower secondary schools. Crete was selected as the research setting because it includes both urban and semi-urban areas and reflects regional disparities in access to specialist services frequently discussed in Greek educational research. A purposive sampling strategy was used to recruit parents with variation in country of origin, length of residence in Greece, employment conditions, and stage of schooling. Snowball sampling supplemented recruitment in order to access families who might otherwise hesitate to participate due to the sensitivity of discussing diagnosis and migration status.

The final sample consisted of 11 parents, the majority of whom were mothers. This gender distribution reflects documented patterns of educational responsibility within Greek households, where mothers typically assume primary responsibility for homework supervision and communication with schools. Participants originated from diverse migration backgrounds and represented both long-established and more recent migrant communities in Crete. Employment conditions varied, including public-sector employment, private-sector work, and tourism-related seasonal labor, which influenced availability for school meetings and assessment appointments.

### **2.3. Data Collection**

Data were collected through semi-structured, in-depth interviews conducted between February 2025 to July 2025. Interviews lasted between 60 and 90 minutes. Most were conducted face-to-face in Crete in private settings; a small number were conducted online when scheduling required flexibility. Interviews were conducted primarily in Greek and English. Participants were informed that they could use their heritage language if preferred, and some moved between languages for clarification. The interview guide included open-ended questions covering early recognition of difficulty, daily homework routines, emotional responses within the family, interactions with teachers, experiences with referral and KEDASY assessment, access to parallel support, financial decisions regarding private assessment or tutoring, perceptions of stigma, and future concerns regarding secondary education and examinations. Interviews were audio-recorded with informed consent and transcribed verbatim. All identifying information was removed during transcription. Participants provided informed consent prior to participation and were informed of their right to withdraw at any time without consequence. All data were anonymized and stored securely. Pseudonyms were assigned to both parents and children, and potentially identifying contextual details were modified while preserving analytic meaning. Pseudonyms are used throughout the article to protect participant confidentiality. Given the relatively small regional context of Crete, additional care was taken to remove details that could indirectly identify families or schools.

### **2.4. Data Analysis**

Data were analyzed using reflexive thematic analysis following [Braun and Clarke \(2019\)](#) six-phase approach. Analysis began with repeated reading of transcripts to achieve familiarity with the data. During the initial coding phase, segments of text were coded inductively, focusing on concrete descriptions of experiences, emotional responses, institutional encounters, and practical strategies described by parents. Codes were then examined for patterns across interviews. Related codes were grouped into preliminary categories reflecting recurring experiences, such as homework strain, diagnostic delay, parallel support instability, moral judgement, and parental transformation over time. These categories were iteratively refined through constant comparison across cases.

Themes were derived through a process that combined inductive pattern recognition with theoretically informed interpretation. Initially, themes emerged directly from recurring parental narratives. In later stages, these themes were organized in relation to the ecological framework. For example, codes related to daily homework tension and emotional regulation were clustered into a theme reflecting microsystem processes. Codes concerning parent-teacher communication and referral procedures formed mesosystem themes. Patterns involving waiting lists, staffing instability, and financial access were interpreted at the exosystem level. Narratives referencing examination culture, meritocratic expectations, and integration pressure were analyzed at the macrosystem level. Temporal shifts in parental confidence and advocacy were organized within the chronosystem. The ecological framework was not imposed at the outset of coding but used during interpretive refinement to ensure conceptual coherence across levels. This approach allowed participants' voices to remain central while situating findings within a structured theoretical architecture. Analytic decisions were documented throughout the process. Theme boundaries were refined through iterative review to ensure internal coherence and distinction between ecological levels. Particular attention was paid to differentiating institutional structures (exosystem) from cultural ideology (macrosystem) in order to maintain theoretical clarity.

## **3. Findings**

### **3.1. Theme I: Daily Dyslexia Struggles**

#### **3.1.1. Sub-Theme I: The Oral-Written Mismatch**

Participants described how dyslexia entered their homes long before it entered any official document. It showed up in the ordinary parts of family life: homework after school, reading aloud at the kitchen table, copying sentences into notebooks, studying spelling lists for Friday tests, and trying to complete short written tasks sent home by teachers. It was in these repeated, ordinary evenings, not in formal meetings or diagnostic sessions, that parents began to recognize a stable and worrying pattern. Dyslexia was not first experienced as a medical label. It was experienced as something that disrupted dinner routines, changed how parents spoke to their children, and slowly affected how children spoke about themselves. Several participants described a slow realization. Their child could understand the lesson when it was explained aloud. They could retell a story clearly. They could answer questions correctly in conversation. Yet when the same child had to read or write, something broke down. This gap became the first strong signal inside the home. Elena described this mismatch clearly.

“He could tell me the story in his own words when I read it to him. He understood the meaning. But when he had to read the same paragraph, he stopped on every line. He guessed words. He mixed letters. It was like the text was moving.”

In this account, dyslexia is not described as laziness or lack of intelligence. The problem is specific and visible. The child understands the story. The difficulty appears when the child must decode the printed words.

Parents described watching this contradiction night after night. They began to notice that effort did not produce steady improvement. Practice did not “stick” in the way they expected. Fatima explained:

“We would practise the same words for days. I thought, tomorrow he will know them. But tomorrow came and it was the same again. I started feeling scared because it wasn’t normal forgetting. It was something else.”

The phrase “the same again” appeared across interviews. Parents were not describing random mistakes. They were describing repeated, predictable errors. The child reversed the same letters. Confused the same sounds. Lost their place in the same way. Skipped syllables. Guessed words based only on the first letter. Over time, parents stopped seeing these as isolated errors and started seeing them as a pattern. Noura described this shift:

“He always confused the same sounds. Always. Even when he tried so hard. It wasn’t like he didn’t care. He cared too much.”

This recognition was painful but important. Parents became careful observers. They tracked what happened each evening. They compared one week to the next. They began to understand that the issue was not effort. In fact, many described their child as trying harder than other children. The more the child tried and still struggled, the more frightening it became. Homework was not described as a simple academic task. It became an emotional space. Evenings often started with hope and ended with tension. Parents described raised voices, long silences, tears, and children shutting down. Maria explained:

“At first, I was correcting him all the time because I thought that’s how he will learn. Then I saw he was getting more anxious. So I changed. I stopped correcting every mistake. I started choosing only a few. Because otherwise he would collapse.”

Parents described learning through experience. They began to notice that too much correction increased anxiety. Too little correction increased guilt. They lived in a constant balancing act. They wanted to help. They did not want to break their child’s confidence. For many, the emotional turning point came when the child began to talk about themselves differently. Noura described this moment:

“He started saying, ‘I’m stupid.’ Not once. Many times. That was the moment I understood it’s not only reading. It’s his confidence.”

Dyslexia became visible not only in spelling errors but in the child’s self-talk. Parents described new avoidance behaviors. Children delayed homework. Hid notebooks in school bags. Suddenly needed water or the toilet the moment reading began. Complained of headaches or stomach aches. Elena said:

“When I brought the book, he would suddenly need water, suddenly need the toilet. Anything to postpone it.”

Participants did not interpret this as laziness. They described it as protection. The child was trying to avoid the feeling of failure that came with reading aloud. A cycle developed: difficulty created anxiety, anxiety created avoidance, avoidance reduced effective practice, and the difficulty continued. Across interviews, mothers were most often described as the person managing homework and communicating with teachers. Even in households where fathers were supportive, mothers described themselves as the main emotional manager. Maria said:

“If I show frustration, he shuts down. So I learned to control my face. Even when I’m exhausted, I act calm.”

This emotional control was described as daily and deliberate. Parents spoke about hiding their own fear so that the child would not absorb it. Fatima explained:

“Sometimes I went to the bathroom and cried quietly. Then I came back smiling, like everything is fine. Because if he sees me scared, he becomes scared.”

In this way, dyslexia reshaped emotional life at home. Parents were not only helping with reading. They were absorbing tension, fear, and uncertainty. They became both teacher and emotional anchor.

### *3.1.2. Sub-Theme II: Homework Strain*

For migrant families, homework involved another layer of effort: switching between languages. Parents described explaining tasks in their heritage language so the child could understand quickly, then asking the child to write in Greek because school required it. Fatima described this clearly:

“I explain in Arabic because that’s the language where he understands me fast. But the homework is in Greek. So he understands the idea, but he still cannot write it in Greek.”

Children could often answer orally in one language but freeze when asked to write in Greek. Elena explained:

“He knows the answer, but he cannot spell it. He says it to me perfectly. Then he tries to write and he freezes.”

Some parents began to question whether speaking their home language was causing the difficulty. Elena said:

“I thought maybe speaking Romanian at home makes it worse. I stopped for some months. But it didn’t change the reading.”

Parents experimented. They changed language practices. They tested reading in both languages. Fatima described trying this comparison:

“I asked him to read in Arabic too. And it was also difficult. Not the same letters, but the same problem with staying on the line, with mixing sounds.”

These moments show parents acting like investigators inside their own homes. They were not passively waiting for professionals. They were observing, comparing, testing, and drawing conclusions.

Many parents described how the rhythm of family life changed. Evenings were no longer relaxed. Homework took priority over leisure. Ahmed explained:

“Evenings were not free anymore. We didn’t relax. We were always catching up.”

Parents described guilt on both sides. If they skipped practice, they felt irresponsible. If they insisted every day, the child became exhausted and angry. Noura said:

“If we skip one day, I feel guilty. But if we do it every day, he is tired and angry. It’s always difficult.”

To reduce chaos, families created routines, such as same table, same hour, small breaks. Maria explained:

“If we do homework at different times, it becomes chaos. So, we made a routine. Same place, same time, small breaks.”

Siblings added another layer. When one child finished quickly and the other struggled for hours, the difference became visible and painful. Noura said:

“His sister finishes in twenty minutes. He needs two hours. And he sees that. He feels it.”

Parents sometimes had to protect the child from sibling correction or teasing. Elena explained:

“I had to tell the sister to stop helping because it made him angry. He doesn’t want help from her.”

Fathers appeared in different ways. Some supported homework actively. Others helped in subjects where they felt confident. Ahmed described this division:

“My wife does more homework because she is more patient. I help with maths. With Greek reading, it becomes tense.”

Where parents’ Greek proficiency was limited, families sometimes relied on older siblings, neighbors, or private tutors, if they could afford it. When tutoring was not possible, the entire burden remained at home.

### *3.1.3. Sub-Theme III: School Experiences Carried into the Home*

Parents described how what happened at school shaped the mood of the evening. Public reading in class, timed tasks, or correction in front of peers increased anxiety at home. Elena said:

“When he had to read in front of the class, he came home angry and silent. Then homework was impossible.”

Supportive teachers had the opposite effect. Maria explained:

“When the teacher told him ‘take your time,’ he came home calmer. It changed the whole evening.”

The child carried school experiences home. The emotional tone of the classroom traveled into the kitchen.

Sub-theme IV: Trial and error

Despite the strain, parents described adapting. They broke tasks into smaller parts. They practiced orally before writing. They reduced correction. They praised effort instead of accuracy. Fatima described her shift:

“Before, I was pushing him to finish like the others. Now I tell him, we go slowly. One page is enough today.”

Maria described choosing which mistakes to ignore:

“I realised if every line becomes correction, he will hate reading. So, I let some mistakes go.”

These were not official accommodations. They were practical solutions developed at the kitchen table. Taken together, these findings show dyslexia as something lived daily. It appeared in reading that did not stabilize, in writing that required disproportionate effort, in homework that became emotionally heavy, and in children who began to doubt themselves. It appeared in mothers controlling their facial expressions, in parents crying privately, in siblings being asked to step back, and in evenings that stretched long past dinner.

For migrant families in Greece, this experience included switching languages, questioning whether bilingualism was to blame, and managing outside judgment while trying to protect their child’s confidence. Thus, dyslexia first became real not as a diagnosis, but as exhausted evenings, repeated spelling lists, hidden notebooks, whispered tears in the bathroom, and parents learning, slowly and painfully, how to help without breaking the child’s spirit. It was not yet a category. It was a daily reality that demanded patience, endurance, and constant emotional work.

## *3.2. Theme II: Delays and Unequal Access*

### *3.2.1. Sub-Theme I: Pressure to “Work Harder”*

Parents described that dyslexia was never handled as “just” a learning issue. It unfolded inside a culture where school success is often treated as proof that a child is disciplined and that a family is doing things “right.” In this environment, academic performance becomes more than grades. It becomes a public signal of competence, responsibility, and worth. When a child struggles, people do not always ask what support the child needs or what the school can do differently. Instead, parents felt that the first question was often whether

the child is trying hard enough and whether the parent is strict enough. Several parents described hearing direct comments that framed reading difficulty as a matter of effort and discipline. Maria explained:

“Some people told me there was no dyslexia in their time. They said children simply worked harder. They said maybe he needs more discipline.”

This kind of comment did not explicitly insult the child, but it redirected the entire meaning of the struggle. Instead of recognising a persistent learning barrier, it implied that the issue would disappear if the child worked harder and if the parent imposed stricter routines. Parents described how such statements made them feel “watched,” as if their child’s difficulty was a reflection of what happens inside the home. The logic was simple but harsh: if effort is the answer, then ongoing difficulty suggests a personal failure—either the child is not trying, or the parents are not doing their job.

For migrant families, this pressure carried an extra layer: it was not only about school performance, but about social judgement and belonging. Elena described how academic struggle felt connected to scrutiny in everyday life.

“As migrants, we already feel that we have to prove ourselves. When your child struggles, it feels like people are watching more closely. Like maybe they think we don’t raise our children properly.”

Parents described that the fear was not only “my child is falling behind,” but also “people will use this as evidence against us.” Literacy became symbolic. It was tied to integration and legitimacy. If a child struggled in Greek literacy, parents feared it could be read as proof that the family does not fit, does not try enough, or does not “value education” in the right way. Fatima expressed this anxiety directly, in a way that shows how moral judgement and material inequality blended together:

“I worried that teachers might think the problem is our background. That maybe they think we don’t support him enough at home...Because you know, they will think we cannot help him at home and we cannot afford teachers at home like the other Greek parents...And teachers are also stressed right now. Here in Crete, there are no special education teachers. They are very few and they cannot focus on my child and they just look at me sometimes implying you know, you have to help your child at home like everybody else.”

Her concern shows how quickly dyslexia can be misread. The same reading difficulty could be interpreted as a learning issue in one family, and as “lack of support at home” in another. Parents were aware of stereotypes attached to migrant families, and they feared that dyslexia would be treated as evidence of parenting failure rather than a recognised difficulty. Parents described stigma as subtle rather than dramatic. Many said no one attacked them openly. Instead, it was the atmosphere, the small pauses, the assumptions, and the comparisons that made them feel exposed. Maria explained:

“No one said directly something bad. But you feel it. When other parents talk about grades, you stay quiet. You don’t want to explain why your child’s marks are so low...And it is not about dyslexia, other children also have dyslexia but the parents help and study with them together and they also pay a lot of money for teachers at home.”

What stands out here is not only shame, but calculation. Parents began to manage conversations. They avoided certain topics. They stayed quiet at school gates. They monitored what they revealed because they sensed that the social space around school is not neutral. Parents described feeling judged not only on whether their child had dyslexia, but on whether they could compensate for it through money, tutoring, and constant homework support. Diagnosis, therefore, became complicated. On one hand, it could validate what the parent already knew. On the other hand, it could become a permanent label in the community. Maria continued:

“I tell only close friends. I don’t tell everyone at school. I don’t want him to be labelled, he is already labelled as the little Albanian who is not a good student. I know other mothers think of him like this. If I tell them then he is going to have the stamp he is problematic for ever.”

Here, disclosure is not treated as simple honesty. It is treated as risk management. Parents described weighing who is safe and who is not safe. They also described thinking ahead: once a label circulates, it cannot be taken back. The child carries it. Inside the home, some parents described actively rebuilding the story around dyslexia to protect the child’s confidence. Katerina described how she spoke to her son:

“I tell him his brain works differently. I tell him this difference can also mean strengths. I am trying to make him strong, to believe in himself. He has to be strong to survive and yes dyslexia is a problem but it is not that serious. Other classmates of his have more serious problems.”

This quotation shows how parents were not simply coping with homework. They were shaping the meaning of the struggle, trying to prevent the child from absorbing the public message that dyslexia equals weakness or failure. But this protective reframing existed alongside parents’ awareness that outside the home, people may not share that interpretation. Parents also described how moral judgement entered their own thoughts. Even when they intellectually understood dyslexia, the constant “try harder” narrative still worked on them. Nikos reflected:

“Sometimes I asked myself if I did something wrong. If maybe I didn’t push enough when he was younger.”

This kind of self-questioning was not presented as a logical conclusion; it was described more as a reflex shaped by years of hearing that good parenting produces good grades. Parents described moments of guilt,

even when they knew dyslexia was not caused by effort. Integration anxiety intensified future-oriented worry. Elena said:

“For Greek families, maybe it’s only about school. For us, it’s also about belonging. When he struggles, I worry about his future more. How is he going to survive later? If he doesn’t do well at school? I don’t want him to work in difficult jobs for long hours like us.”

Here, the child’s literacy struggle is linked directly to class mobility and long-term survival. Parents described feeling that their child’s future options were already narrowed by migration. They feared dyslexia would narrow them further. Eva described this imagined future in very concrete terms—panhellenic exams, university, professions, and social respect:

“I think about the panhellenic exams, about university. I think about how hard it already is as migrants. I don’t want this to close doors. I had a dream my children will grow up here, get Greek education work hard and become something, study something...I have seen it with other Albanians here. Their children became doctors and lawyers and they are respected and have a good life. That was my dream, but now I know it is difficult.”

This kind of future-thinking shows why parents experienced dyslexia as emotionally heavy. It was not only “he struggles with reading.” It became “will he be able to access the kind of life we came here for?”

At the same time, some parents rejected the moral framing and insisted that the larger problem was the lack of support structures. Ahmed stated:

“I refuse to see this as weakness. Many successful people have dyslexia. The problem is not him. The problem is how the system sees him, there are no special education teachers for him at school, the teacher has twenty-five children in there and there is one extra teacher but strictly for one student with autism. If he had more help, of course he would do better.”

This quotation shows resistance, but also exhaustion: parents had to argue against a dominant story. They had to defend the child’s worth. They had to insist that the problem is not moral failure. Even resistance required work, explaining, correcting assumptions, and maintaining confidence in a context that often pushes the opposite message. Taken together, these accounts show that delays and unequal access begin even before the waiting list starts. They begin in how dyslexia is interpreted socially: as effort, discipline, and “good parenting.” For migrant parents, this moral framing was intensified by social scrutiny and the fear of being judged as inadequate outsiders.

### *3.2.2. Sub-Theme II: Long Waiting Lists and Slow Public Procedures*

Once a teacher suggested assessment, families entered the official route. Parents described this moment as a shift from confusion to hope: finally, there was a path. In Greece, this usually meant referral to KEDASY (Centres for Interdisciplinary Assessment, Counselling and Support). Parents often described the first phone call as a moment of relief. It felt like the situation might finally be taken seriously.

But that relief often lasted only minutes, until they were told about the waiting list.

Marios explained:

“When we first called, I felt relief. I thought now something will move. But they said there is a waiting list. When I asked how long, they said maybe six months. Then six months passed.”

This quotation captures how waiting was not only long, but uncertain. Parents described being given vague timelines that did not hold. “Maybe six months” became longer. They described unanswered calls, postponed appointments, and the sense that there was no clear timeline they could plan around. Elena, living outside a major city, emphasized that delays were shaped by geography and resources:

“They told us that in smaller regions there are fewer specialists. So, everything takes longer...We have nothing here. No specialists. I have to drive two hours to get to the city, the school has no general education teacher, let alone a special education teacher, in general I wish I could move.”

For families like Elena’s, delay was not only administrative—it was logistical. It meant travel, time off work, and the feeling of living “far” from support. Parents described how unfair it felt that access depended on where you live. Waiting was not neutral because the child remained in the same classroom, facing the same expectations, without official protection. Parents described that teachers might want to help but could not do much without documentation. Elena explained:

“The teacher tried to help, but she said officially she cannot change grading without the paper.”

This made the waiting period feel like wasted time. Parents described watching their child struggle while the system moved slowly. Noura reflected:

“Every month felt heavy. I was watching him try and fail again. And I kept thinking, if we had the diagnosis earlier, maybe it would be easier.”

Dina described how comparison with classmates intensified urgency:

“You see other children reading fluently, and you think, how many more months until we get help?”

The waiting list was experienced as a countdown with no end date. Parents described feeling trapped between what they already knew at home and what the school required on paper.

### *3.2.3. Sub-Theme III: Money as Shortcut*

Because public pathways were slow, some families used private assessment to speed up the process. Maria explained:

“We paid for private testing because I could not sleep at night thinking about waiting. It was expensive. But at least we had answers.”

What this quote shows is not only financial capacity, but the emotional cost of delay. Parents described private payment as a way to regain control, answers, clarity, and a document that could unlock accommodations. At the same time, Maria acknowledged inequality clearly:

“Not everyone can do that. I know families who just wait.”

This created two timelines. Some children were assessed early and began receiving support sooner. Others waited months or longer, not because their needs were less urgent, but because their families could not pay. Even after diagnosis, money still mattered. Recommendations often included therapy or specialised support that was mostly private. Magia explained:

“The report suggested weekly therapy. But it costs extra money. If you don’t pay, there is no extra support.”

Parents described that diagnosis did not automatically bring intervention. It brought recommendations, but families had to fund many of them. This made dyslexia support partly market-based: those with financial stability could add tutoring, therapy, and specialised help; those without had to rely on limited school adjustments or none at all.

### *3.2.4. Sub-Theme IV: Bureaucracy and Administrative Fatigue*

Parents described the process as repetitive, confusing, and emotionally draining. Arben said:

“It felt like a maze. First you need referral from school. Then you need to bring reports. Then you wait. Then they call you. Then maybe they cancel. It never feels simple, meanwhile they use all these difficult words we don’t understand, they never have time for questions and they always make you feel bad when you ask something... I use AI now for everything, so that I don’t have to ask them things.”

This quote captures multiple layers: paperwork, delays, unclear communication, and humiliation. Parents described feeling that the system expected them to understand complex procedures without explaining them properly. They also described emotional discomfort: not wanting to appear ignorant, not wanting to “bother” professionals, yet needing help urgently. Work conditions intensified the burden. Natalia described how appointments collided with real-life employment constraints:

“I had to take time off work for appointments. It’s not easy, I don’t work in the public sector. I work in tourism and it is impossible to leave work or take the day off. They don’t understand this and they don’t care but this is very stressful for me.”

For parents in unstable or demanding jobs, navigating the system meant lost income, conflict at work, and constant stress. Formal language added another barrier. Nikoleta explained:

“When they speak in formal Greek, sometimes I don’t understand everything. I don’t want to look ignorant, I pretend I understand, then I go home, I google or ask ChatGPT. I also have a very nice friend who is a speech therapist and she explains everything to me.”

This quote shows how parents filled the gaps themselves, through online searches, AI tools, and informal networks. Help came not from the system, but from outside it. Parents repeatedly emphasised that the process required insistence. Ahmed said:

“At first, I waited for them to call. Later, I understood that if I don’t call, nothing moves.”

Arben reinforced this:

“If you don’t push, your file stays at the bottom.”

Parents described learning that progress was not automatic. Those who stayed quiet waited longer. Those who called and pushed sometimes moved forward. Mariza described how she changed over time:

“In the beginning I was shy. I thought I should wait my turn. Later I realised everyone is waiting. If you don’t speak, you disappear. Other Greek mothers told me what to do, they helped me a lot to get courage and speak up. My child has the same rights like every body else and it is my job to defend his rights.”

Here, bureaucratic struggle produced a shift in identity: from polite waiting to active advocacy. Parents described becoming “trained” by necessity. Maria described how she became organised:

“In the beginning it was chaotic and very difficult for me. But now I am trained. I wasted a lot of time to understand the system, to learn what I have to do, where to go. Now I keep copies of everything. I learned that papers matter.”

Even after diagnosis, paperwork continued. Ahmed explained:

“Every year they ask again for papers for exams. It feels like repeating the same story.”

Elena reflected on her change:

“Now I know the names of departments. I know who to call. Before, I felt lost.”

And Noura captured the limit of individual skill:

“Even if you learn the system, you cannot change the waiting list.”

This closing quote matters because it shows the boundary between personal adaptation and structural delay. Parents can learn procedures, keep folders, push, call, and advocate, yet they still cannot create specialists where none exist, or shorten waiting lists on their own.

### *3.3. Theme III: From Passive Waiting to Advocacy*

#### *3.3.1. Sub-Theme I: From Waiting to Acting*

Over time, parents described clear transformation. They did not remain in the same emotional or practical position. Years of dealing with schools, diagnostic services, paperwork, and classroom transitions changed how they saw themselves and how they acted. However, this transformation did not remove vulnerability. It created preparedness within an environment that remained unstable. Parents became more confident, more strategic, and more knowledgeable, but they still had to operate inside systems that were slow, uneven, and unpredictable. At the beginning of the journey, many parents described feeling unsure and deferential. They waited for teachers to guide them. They trusted that the system would respond in due time. They assumed that if they followed procedures, things would move forward. With experience, that changed. Mariza articulated this shift clearly:

“Now I know how to cope with this system. Before, I waited. Now I don’t wait. I ask directly.”

This statement captures more than procedural learning. It reflects a change in orientation. Waiting was replaced by action. Parents described learning that if they did not call, ask, remind, and insist, delays extended. Over time, they stopped expecting automatic follow-up and began actively monitoring progress. Noura described this transformation as necessity rather than empowerment:

“We became strong because we had no choice. If we stayed quiet, nothing changed.”

Her phrase “no choice” is critical. Strength did not emerge from ideal conditions. It emerged from repeated experiences of inaction, postponement, and institutional delay. Parents learned that silence came at a cost. They therefore adopted a more assertive stance, not because they were naturally confrontational, but because experience taught them that advocacy was required. This shift also involved growing confidence in their own observations. Early on, several parents described doubting themselves. They wondered if they were exaggerating or misinterpreting normal variation in development. With time, this changed. Maria explained:

“In the beginning, I thought maybe I was exaggerating. Now I trust my instinct. If something feels wrong, I speak.”

Trust in personal judgement strengthened through repeated confirmation. What they saw at home, persistent reading difficulty, emotional distress, inconsistent progress proved reliable. Over time, parents no longer needed institutional validation to believe what they were witnessing. They became more willing to question teachers, request meetings, and challenge explanations that reduced the problem to effort. Parents also described accumulating practical knowledge. They learned what documentation was required. They learned which offices handled which processes. They learned how often accommodations had to be renewed and what language was effective in formal requests. This knowledge did not come from structured guidance. It came from trial, error, and repetition. They described themselves as becoming “trained” by the system. Yet this competence was always reactive. It was built in response to obstacles. Parents did not feel empowered in a celebratory sense. They felt prepared because they had learned how easily things could stall.

#### *3.3.2. Sub-Theme 2: Anticipating the Future*

Even as parents became more capable in navigating present challenges, their anxiety shifted toward what comes next. Diagnosis did not close the story. It marked the beginning of a long trajectory across school stages.

Elena reflected:

“I worry about secondary school exams. In primary school, teachers are more flexible. Later, the system becomes stricter.”

Primary school was often described as relatively protective. Teachers could show flexibility informally. In later stages, parents anticipated standardised exams, heavier written demands, and stricter evaluation. They expected less room for individual adjustment. This anticipation shaped present anxiety. Ahmed expressed this forward-looking concern clearly:

“It’s not just about today. I think about high school, about university exams. I think about how hard it already is for migrant families. I don’t want this to close doors.”

For migrant families especially, dyslexia was evaluated not only in terms of homework or grades, but in terms of long-term opportunity. Parents thought about university entrance examinations, professional mobility, and social respect. They feared cumulative disadvantage that reading difficulty combined with migration status could narrow options further. Eva had previously expressed similar concern about panhellenic exams and university pathways. Over time, this anticipatory thinking intensified rather than disappeared. As children progressed through grades, the stakes felt higher. Parents also described time as cyclical. Each new academic year meant new teachers, new expectations, and renewed explanation. Elena noted:

“Even if I know the system better now, I still feel anxious. Because every year brings new teachers, new rules.”

Thus, experience reduced confusion but did not create stability. Parents had to retell the diagnosis, renegotiate accommodations, and re-establish understanding repeatedly. Preparedness had to be reactivated each year. Time also worked retrospectively. Korina described looking back:

“When I think about the first grade, I see signs. But at that time I didn’t know what they meant.”

Diagnosis reorganised memory. Early moments that once seemed minor took on new meaning. This backward-looking clarity brought understanding, but sometimes also regret. Parents described wishing they had recognised patterns sooner. Time did not erase those early uncertainties; it reframed them.

### *3.3.3. Sub-Theme III: Emotional Adjustment without Security*

Parents also described emotional change across the years. Early accounts were marked by intense fear, confusion, and self-doubt. Over time, emotions became more measured. Korina explained:

“At first I cried a lot. Now I am calmer. I know what we are dealing with.”

Calmness did not mean the situation was resolved. It meant that the unknown became familiar. Parents understood the pattern of difficulty. They understood the administrative processes. They understood their child’s emotional triggers. This familiarity reduced panic. However, beneath this calmness remained uncertainty. Elena’s earlier reflection illustrates that knowledge coexisted with fragility. Parents felt more capable, but not fully secure:

“Even if I know the system better now, I still feel anxious. Because every year brings new teachers, new rules.”

Several parents also described experiencing time in comparison to other children. Paris noted:

“When you see other children moving forward easily, you feel time differently.”

Progress was not measured in isolation. It was experienced relative to peers. When classmates advanced smoothly through literacy milestones, parents felt the weight of delay more intensely. Time felt heavier, more urgent, more charged.

Finally, parents extended their concerns beyond schooling into adulthood. Elena stated:

“I think about his future job. I wonder if the system will support him later.”

Dyslexia was not experienced as confined to childhood. Parents imagined adulthood, employment, independence, and long-term integration. Over the years, worry shifted from spelling tests to life outcomes. Time did not eliminate vulnerability. It moved it forward.

## **4. Discussion**

### *4.1. Microsystem*

At the microsystem level, dyslexia was visible through daily proximal processes — regular, sustained interactions between child and caregiver (Bronfenbrenner, 2013). Homework routines functioned as repeated developmental exchanges. Parents described reading aloud, correcting spelling, translating between languages, and managing frustration almost every evening. These were not occasional events but structured engagements that influenced both literacy development and emotional self-perception. Research on dyslexia confirms that emotional experiences surrounding literacy significantly influence self-concept and motivation (Braun & Clarke, 2019; Novita, 2016). The findings here align with that literature: when homework became conflictual, children’s anxiety increased; when support was patient and structured, confidence stabilized (Wilmot, Pizzey, Leitão, Hasking, & Boyes, 2023).

In migrant households, bilingual mediation intensified these proximal processes. Parents frequently translated from a heritage language into Greek and required written output in Greek. This aligns with research showing that bilingual children with dyslexia often require careful distinction between language acquisition and decoding difficulty (Jørgensen et al., 2021; Stathopoulou et al., 2025). Parental proficiency in Greek influenced the type of support provided such as conceptual explanation versus explicit spelling instruction thereby affecting the daily structure of literacy engagement. The classroom functioned as a parallel microsystem. Differentiated instruction, extended time, and oral responses reduced anxiety. Speed-based and public reading practices increased it. This supports evidence that instructional context directly influences dyslexic students’ academic self-perception (Alexander-Passe, 2015). The interaction between home and classroom microsystems was continuous as children carried classroom experiences into homework routines.

### *4.2. Macrosystem*

At the macrosystem level, dyslexia operates within a broader Greek educational culture that prioritises written performance, examination success, and academic ranking. The Greek system is strongly examination-oriented, with literacy accuracy and formal written assessment functioning as key gateways to progression, particularly through the panhellenic examination system (Kioupkis, 2023). Written competence is treated not just as a skill but as a marker of discipline, intelligence, and readiness for higher education. In this context, reading and writing difficulties carry amplified consequences. Meritocratic ideology reinforces this structure. Academic success is commonly interpreted as the outcome of hard work and personal responsibility. Within

such a framework, persistent literacy difficulty is often attributed to insufficient effort rather than structural constraints or neurodevelopmental differences. Parents in this study reported encountering narratives suggesting that “children worked harder in the past” or that increased discipline would solve the problem. These statements reflect a cultural logic in which academic performance becomes moralised. When dyslexia is interpreted through this lens, families may experience implicit blame (Leitão et al., 2017).

For migrant families, the stakes are even higher. Educational success in Greek-language schooling is frequently linked to integration and social belonging (Anagnostaki et al., 2016). Literacy proficiency becomes symbolic proof of adaptation. When a child struggles with reading or writing, parents may fear that this will be interpreted not only as academic weakness but also as insufficient integration. Thus, dyslexia becomes entangled with questions of legitimacy and social acceptance. At the same time, inclusion policies in Greece operate within broader neoliberal–neoconservative reform agendas that emphasise efficiency, accountability, and budget control (Koutsoklenis & Karagianni, 2024). While inclusive education is formally endorsed, implementation often depends on temporary staffing arrangements, delayed recruitment cycles, and limited allocation of parallel support. As Koutsoklenis and Karagianni (2024) demonstrate, the institution of the special assistant reflects these tensions: inclusion is recognised in policy but constrained in practice. Parallel support teachers are frequently hired on short-term contracts, placements may begin late, and continuity across school years is not guaranteed.

In such a system, diagnosis does not automatically result in stable classroom assistance. Staffing shortages and recruitment procedures influence whether support is present, delayed, or absent (Papadimitriou & Koutsoklenis, 2023). Thus, even when dyslexia is formally recognised, practical implementation depends on administrative timing and available personnel. When institutional provision is unstable, responsibility shifts toward families. Parents particularly mothers, increase their involvement to compensate. They extend homework supervision, organise documentation, attend repeated meetings, monitor accommodation implementation, and seek private tutoring when financially possible (Seiradakis, 2023). For migrant mothers, this responsibility is compounded by linguistic and cultural barriers. Limited familiarity with Greek grammatical norms or institutional terminology can restrict the type of academic support they are able to provide (Seiradakis, 2024).

Feminist care theory clarifies this redistribution of responsibility. Educational systems frequently rely on unpaid parental labour to fill structural gaps (Kibria & Becerra, 2021; Schraml-Block & Ostrosky, 2022). In the Greek context, where inclusion mechanisms such as parallel support remain uneven, parental advocacy becomes a functional requirement rather than an optional supplement. Families must monitor implementation, follow up on delays, and insist on rights that are formally guaranteed but inconsistently enacted.

#### *4.3. Exosystem*

At the exosystem level, parents’ experiences of dyslexia were strongly influenced by institutional structures that operate outside the child’s direct participation but determine when and how support becomes available. In the Greek context, these include public diagnostic services (KEDASY), recruitment procedures for parallel support, staffing allocation, assessment frameworks, and employment conditions. Participants described long waiting periods following referral. Marios explained that after calling KEDASY, he was told to wait six months and then waited longer. During this time, his child continued attending mainstream classes without formal accommodations. Elena similarly described watching her child “try and fail again” while waiting for assessment papers that would allow official flexibility. These accounts demonstrate how administrative delay translated directly into prolonged academic exposure without protection. This finding aligns with Anthony and Gautam (2026) who found that parents often experience the assessment process as lengthy and emotionally demanding. In both contexts, diagnosis was described as a relief once obtained, but the path toward it required persistence and repeated follow-up. In the present study, parents learned that files did not move automatically. Ahmed stated, “If I don’t call, nothing moves.”

Regional disparity intensified delay. Elena, living outside a major city, reported having to travel long distances for assessment because specialists were not locally available. Access to evaluation depended on staffing distribution rather than solely on documented need. Parents could not influence the timeline; it was determined by administrative capacity and regional resource allocation. Special education teachers, especially parallel support, represented another institutional barrier. In principle, it provides in-class assistance from a special education teacher. In practice, parents described delayed placements, limited availability, or reallocation of support to other students. Some reported that even after diagnosis, classroom support did not materialise immediately. These experiences reflect findings by Koutsoklenis and Karagianni (2024) and Papadimitriou and Koutsoklenis (2023) who show that recruitment procedures and temporary contracts create instability in parallel support provision. Teachers may be appointed late in the school year or assigned to multiple schools, reducing continuity.

Giavrimis (2024) further identifies structural barriers within the institution of parallel support, including insufficient staffing and weak coordination between general and special educators. Parents’ accounts of inconsistent classroom implementation directly reflect these institutional weaknesses. Although diagnosis formally entitled the child to accommodations, effective support depended on available personnel and

administrative timing. Economic inequality also appeared clearly in the results. Maria described paying privately for assessment because she “could not sleep at night thinking about waiting.” Other parents stated that private testing was financially impossible. This reflects what Thom Nevill and Forsey (2023) describe as the classed nature of diagnosis, where access to faster recognition becomes dependent on economic resources. In the Greek context, private assessment functioned as a shortcut through administrative delay.

Parents also described employment constraints. Natalia explained that taking time off work for appointments was extremely difficult in tourism employment. Thus, labour market structure indirectly influenced access to assessment and follow-up. Families with flexible or public-sector employment faced fewer obstacles. Assessment frameworks also influenced experience. Some parents expressed uncertainty regarding how bilingual development was considered during evaluation. Standardised tools in Greece are primarily designed for monolingual Greek speakers (Stathopoulou et al., 2025). For bilingual children, this introduces additional interpretive complexity.

Research on parent-school systems confirms similar patterns. Leslie et al. (2025) demonstrate that parents of dyslexic children frequently encounter procedural opacity and barriers to meaningful partnership. In the present study, parents described feeling that they had to “push” files forward and keep copies of all documentation because “papers matter.” Administrative systems did not operate transparently or predictably. Finally, Reraki (2022) shows that inclusive practices in Greek classrooms require structured pedagogical adaptation and sustained collaboration. However, when staffing is unstable or delayed, such practices are inconsistently implemented. Parents in this study observed that even after diagnosis, classroom adaptation varied depending on teacher availability and support presence.

#### *4.4. Implications*

The findings suggest that improving the experience of migrant families requires structural rather than individual solutions. Reducing waiting times for public assessment and ensuring timely placement of parallel support are critical. Diagnosis should not depend on parental persistence, geographical location, or financial capacity. Administrative transparency and multilingual guidance materials would reduce procedural opacity and emotional fatigue. At the classroom level, teacher practices have immediate emotional consequences. Speed-based instruction, public reading, and rigid grading intensify anxiety, whereas differentiated instruction and flexible pacing reduce strain. Teacher education should explicitly address dyslexia in bilingual contexts and avoid conflating language acquisition with decoding difficulty. The findings also demonstrate that inclusive policy must move beyond formal recognition toward stable implementation. When staffing is delayed or inconsistent, families compensate through intensified unpaid labour. Recognizing and reducing this structural reliance on parental advocacy, particularly maternal advocacy, is central to equitable inclusion.

#### *4.5. Limitations*

Several limitations should be acknowledged. First, the study is based on a small qualitative sample within a specific regional context. While this allowed for in-depth analysis, the findings are not statistically generalizable. Instead, they offer theoretically informed insights that may be transferable to similar examination-oriented and resource-constrained systems. Second, the majority of participants were mothers. Although this reflects the gendered distribution of educational responsibility in Greece, fathers’ perspectives were less visible. Future research could more explicitly explore intra-family gender dynamics in advocacy practices. Third, the analysis relies on parental narratives. These accounts provide essential insight into lived experience but represent one perspective. Including teachers, specialists, and children themselves could deepen multi-level understanding. Finally, while the bioecological framework provided conceptual clarity, ecological levels inevitably overlap in practice. The categorization of experiences into microsystem, exosystem, and macrosystem levels simplifies lived complexity for analytical purposes.

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