

A guide to Dyspraxia!

Dyspraxia at a glance...

What is Dyspraxia?

Dyspraxia is generally recognised to be an impairment or immaturity of the organisation of movement. Associated with this may be problems of language, perception and thought. Other names for dyspraxic include Clumsy Child Syndrome; Developmental Co-ordination Disorder (DCD); Minimal Brain Dysfunction; Motor learning Difficulty; and Perceptuo-motor Dysfunction.

What causes Dyspraxia?

For the majority of those with the condition, there is no known cause. Current research suggests that it is due to an immaturity of neurone development in the brain rather than to brain damage. People with dyspraxia have no clinical neurological abnormality to explain their condition.

How would I recognise a child with Dyspraxia?

The pre-school child

- Is late in reaching milestones e.g. rolling over, sitting, standing, walking, and speaking
- May not be able to run, hop, jump, or catch or kick a ball although their peers can do so
- Has difficulty in keeping friends; or judging how to behave in company
- Has little understanding of concepts such as 'in', 'on', 'in front of' etc
- Has difficulty in walking up and down stairs
- Poor at dressing
- Slow and hesitant in most actions
- Appears not to be able to learn anything instinctively but must be taught skills
- Falls over frequently
- Poor pencil grip
- Cannot do jigsaws or shape sorting games
- Artwork is very immature
- Often anxious and easily distracted

The school age child

- Probably has all the difficulties experienced by the pre-school child with dyspraxia, with little or no improvement
- Avoids PE and games
- Does badly in class but significantly better on a one-to-one basis
- Reacts to all stimuli without discrimination and attention span is poor
- May have trouble with maths and writing structured stories
- Experiences great difficulty in copying from the blackboard
- Writes laboriously and immaturely
- Unable to remember and /or follow instructions
- Is generally poorly organised

Although dyspraxia may be diagnosed at any stage of life, increasing numbers of children are identified as having the condition.

Early recognition of dyspraxia will enable early intervention and practical steps to help your child to achieve their potential. Children whose dyspraxia is identified at an early stage are less likely to have problems with acceptance by their peers and with lowered self-esteem.

When children become teenagers their problems may change as social and organisational difficulties become more pressing.

Reading and spelling

Children with dyspraxia may have difficulties with reading and spelling. Limited concentration and poor listening skills, and literal use of language may have an effect on reading and spelling ability. A child may read well, but not understand some of the concepts in the language. The child may also be reluctant to read aloud because of articulation difficulties or because they lack self-confidence.

Exercises may be beneficial for children with reading and spelling difficulties. *Take Time* by Mary Nash-Wortham and Jean Hunt provides a series of exercises for parents, teachers and therapists to do with children.

Computers can also help with reading and spelling: *Wordshark 2* is a widely used program, available from the Dyspraxia Foundation.

Research has shown that children with developmental verbal dyspraxia whose speech difficulties persist beyond the age of 5 & 6 years are at risk of having literacy difficulties. The risk is increased if there is a family history of speech, language or specific learning difficulties.

The child with developmental verbal dyspraxia has an impaired speech processing system, which affects their ability to make sound ñ letter links and to carry out phonological awareness tasks (e.g. segmenting, blending, rhyming etc) essential for literacy acquisition. Spelling is usually more affected than reading.

Handwriting

Poor handwriting is one of the most common symptoms of dyspraxia. Children who have poor handwriting don't need their parent or teacher to tell them about it. Every time they write, they can see that they are not as good as their friends.

Handwriting expert Dr Rosemary Sassoon believes that children with dyspraxia should be judged only against their own best efforts. They should be encouraged to progress in a relaxed way.

As the child progresses through the educational system, the requirement for written work increases. *Take Time* by Mary Nash-Wortham and Jean Hunt provides exercises that can help with handwriting.

Speech and Language

Speech may be immature or unintelligible in early years. Language may be impaired or late to develop.

For some children, the primary difficulty is in making and co-ordinating the precise movements, which are used in the production of spoken language, which results in severe and persisting speech production difficulties. The condition is termed developmental verbal dyspraxia: it may occur in isolation or in conjunction with general motor difficulties.

Children with speech and /or language difficulties should be referred to a Speech and Language Therapist as early as possible. A referral can be made by a GP (Family Doctor), Health Visitor, other professional or by parents themselves. Speech and language therapists carry out assessments, can identify a child's presenting difficulties and advise on management and support.

Parents and family

When your child is diagnosed as having developmental dyspraxia you may feel many emotions: shock, relief, isolation. You will want to know how best to help your child and how to plan for the years ahead. You may also wonder how your family is going to cope with the child who has dyspraxia - especially his or her brothers and sisters.

Many parents feel guilt and anger about their child's condition. It is important to recognise that dyspraxia is not anyone's fault. Although there is no cure there are many things that you can do to give practical help and support to your child.

Having a child who has dyspraxia affects the whole family. You may find that you gear all family life around the needs of that child. It is possible that brothers and sisters feel neglected.

To help everyone, you could

- Try activities which involve the whole family equally
- Encourage each child to develop their own hobbies and interests so that comparisons are irrelevant
- Talk to your partner about the problems and be open about how you both feel
- Try to arrange time each week to concentrate on each child, and your partner
- Take time for yourself and keep in touch with friends
- Join a local support group. Some groups run events which include siblings

Daily Life

Even the basics of everyday life can be a tremendous struggle for people who have Dyspraxia.

Often the simplest and most straightforward ideas will make a difference to their quality of life. For example:

Clothing:

- Lay out clothing layer by layer, underwear on top
- Avoid tight neck-holes
- Buy trousers with elasticated waist - saves fiddling with buttons and zips
- Trousers pleated at the front makes identifying 'the right way round' easier
- Shirt collars one size larger than fits are easier to fasten
- Baggy t-shirts and shorts are easy and comfy

Eating:

- Use a flexible straw with a drink to prevent spilling
- Don't fill cups too full
- Use a damp towel under plates to stop them moving
- Sit down to eat where possible
- Getting organised:

Keep to a daily routine

- Post-It[®] pads stuck at eye level on doors are useful reminders
- Transparent purses and pencil cases let you see the contents easily
- Keep keys and purses on a long chain which clips to clothing

Thanks to the Dyspraxia Foundation for all the above information! Find out more at <http://www.dyspraxiafoundation.org.uk>

As you can see, a great many children with Autism will also show clear signs of Dyspraxia! AS usual with all things Autism related, there is an immense 'grey' overlapping area between the two! But – as they say – knowledge is POWER! ☺