Dyspraxia: Beyond the Clumsy Child Syndrome

Compilation: Yvonne Tan, Photos: stock.xchange

Does your child often fumble in his movements, speech or writing? Don’t be too quick in dismissing him as clumsy, for he may have dyspraxia.

Developmental dyspraxia is a neurologically based disorder that is generally present from birth. Also known as developmental coordination difficulty, it is characterised by problems in planning and executing smooth, coordinated voluntary motor movements, and may involve deficits in sensory, perceptual, thought and language processes.

Maldevelopment in parts of the motor cortex in the brain results in the absence of certain neural connections or disruption of neural transmission, preventing ‘messages’ and ‘plans’ from being properly programmed before they are transmitted to the body.

Dyspraxic subjects may also have a poor understanding of the messages conveyed by their senses and have trouble relating these messages to appropriate actions. Hence, their movements appear clumsy and awkward.

There are primarily three types of developmental dyspraxia and a child can have one or a combination of these in varying degrees of severity:

- **Oral dyspraxia** – Difficulty executing mouth movements such as blowing, sucking or individual tongue/lip movements appropriately and consistently.
- **Verbal dyspraxia** – Difficulty producing sounds accurately and consistently in isolation, words and/or connected speech (for e.g., they may say “bip” when trying to say “ship”).
- **Motor dyspraxia** – This prevents them from moving in the way that they want, making physical activities hard to learn and remember.

Although dyspraxia does not impact the children’s intelligence, it affects their learning ability and can create a significant disruption to their way of life.

**Prevalence and Causes**

Up to 10% of the population is believed to suffer from some form of dyspraxia, with approximately 70% of those affected being boys (they are four times more likely to develop it than girls). Children with the condition usually have average or above average intelligence.

There may be an inherited tendency that predisposes them to dyspraxia. A history of dyspraxia on the mother’s side carries a one in three chance of it being passed on, while the likelihood is almost two in
three if it is on the father’s side.

Other causes include: an illness or lack of oxygen at birth or a crucial stage of foetal development, maternal stress during pregnancy and faulty connections between cells.

**Diagnosis and Symptoms**

Dyspraxia is a hidden handicap without any physical attributes. It is only when a skill is performed that the disability is noticeable.

Dyspraxia may exist in isolation or as a co-occurring condition of another disorder such as attention deficit hyperactivity disorder (ADHD), autism spectrum disorder and dyslexia. An overlap with these conditions makes symptoms heterogeneous and diagnoses difficult.

The basic criterion would be significant underdevelopment of motor and speech coordination. Besides paediatricians, allied health professionals like psychologists, speech therapists, physiotherapists and occupational therapists can perform tests to diagnose dyspraxia.

Generally, parents are the first to sense that something has gone awry at an early stage. Developmental milestones in the child may be compromised or bypassed – for example, the child may never crawl at all or show delays in learning to sit, stand or walk.

Other expected skills may not be mastered too. An early indication may be sucking and feeding problems. The child may not be able to coordinate swallowing efficiently and could later prove to be a messy eater who spills things all the time. The routine tasks of daily life, like dressing themselves and tying shoelaces, may prove daunting too.

Some other symptoms include:

- Difficulty in carrying out instructions
- Frequently falling and bumping into things
- Poor writing and drawing ability
- Lack of rhythm
- Short attention span
- Inability to stay still
- Sensory issues

In addition, dyspraxia has a profound impact on the child’s communication, social and emotional development. Strained conversations due to speech problems as well as academic setbacks arising from poor language and sequencing skills, spelling difficulties and laborious writing, can make him diffident and reclusive. He may also be ostracised or victimised by peers who perceive him as odd.

**Intervention Strategies**

Developmental dyspraxia is not an illness or disease from which one can recover. It is a disorder with which one must learn to cope.

The earlier a child is ‘treated’, the greater the chance of developing coping strategies. Effective ‘remedies’ are those that specifically address each child’s unique needs. A child should have an individual education plan drawn up so that he can receive suitable modifications, accommodations and services in school.

Parents and teachers alike can provide structure and order, support in planning and organising (especially during transitions), as well as reassurance and security for the child. It is important to help the child form ideas, plan actions and carry them out. There is a need for considerable repetition and reinforcement.

Specialist intervention is beneficial too. Speech and language therapists can help the child gain control over speech muscles, whereas psychologists can address social and self-esteem issues. The occupational therapist and physiotherapist can assist him in improving his life skills and motor development, including balance, fine and gross motor coordination, visual-motor skills and perception.

Dyspraxic children are often accused of not trying hard enough when, in fact, they are. Therefore, refrain from labelling them as clumsy, lazy or slow, as this creates further strain. Always take heart in the fact that they can learn, improve and achieve.

Sources: Geoff Brookes (2007) Dyspraxia, Continuum and National Health Service (www.nhs.uk)
Sports @ Public Libraries: Disability Sports Showcase 2010

Disability Sports Showcase 2010 complements the range of ongoing activities held at the Public Libraries in celebration of the Singapore 2010 Youth Olympic Games.

Aimed at providing an uplifting learning experience for everyone through the theme of disability sports, it is an engaging event for people with disabilities and their family members to experience how library resources can enrich and empower them as part of their lifelong learning.

Event details
Date: 3 July 2010 (Saturday)
Time: 10.00 am – 3.00 pm
Venue: Woodlands Regional Library
Organiser: Public Libraries Singapore

Highlights:
• Disability Sports & Library Services Quiz with attractive lucky draw prizes
• Library Services and Programmes for people with disabilities
• Children Story Telling Session on inclusiveness for people with disabilities
• Live Demonstrations and Participation in disability sports
• Sharing Session with Hanako Sawayama, International Global Messenger Special Olympics & Gold Medalist Special Olympics World Summer Games Dublin 2003, and family members of other athletes

Registration can be made from 1 June via:
• Library E-Kiosks located within all public libraries
• Go-Library website at http://golibrary.nlb.gov.sg/
• NLB Contact Centre at 6332 3255

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