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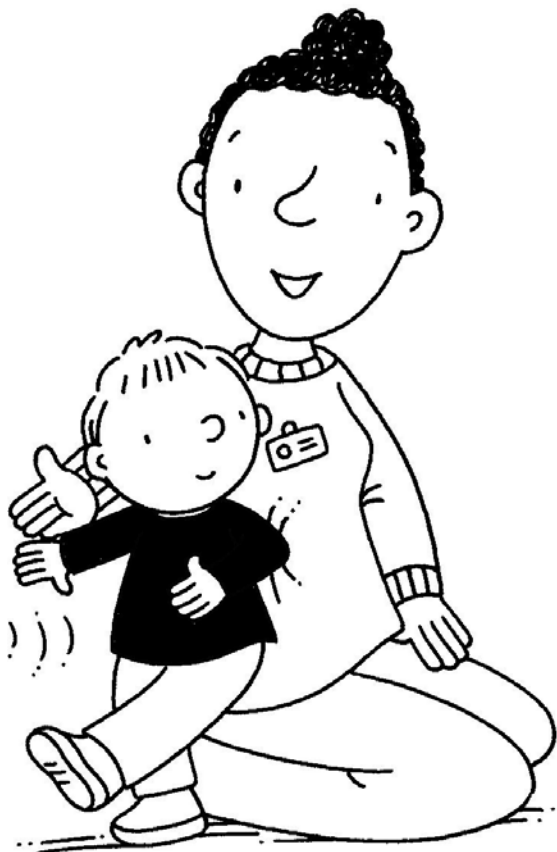
Introduction

Children who do not enjoy and achieve in their learning may, at some point, cease to engage with the learning process. When children are no longer motivated to want to learn this can, in the short term, lead to disruptive behaviour, even exclusion, and in the long-term will have an effect on their ability to achieve their full potential.

When a child seems to be falling behind others in their rate of early development, this can be a cause for worry and concern at home, at play and in early years' settings. In the pre-school setting, you may be working with a child who has problems with their movement, social interaction or play skills and you may be looking for reasons to explain this, and for advice on what you can do and how you can support both the child and his family.

Are you concerned about a child you know and observe who has a persistent combination or cluster of the difficulties below?

- Seems clumsy and bumps into others
- Stands too close to others or knocks over objects



- Is easily confused about finding their way
- Struggles with handling toys, balls etc
- Messy eater, often spilling things
- Poor concentration and abandons activities quickly
- Speech may be unclear or muddled with associated frustration
- Squinting, rubbing eyes, eyes running
- There is a mismatch between their innate skills and their fine and gross motor skills
- Prolonged behaviour problems such as extreme frustration, low self-esteem, social avoidance, fidgety and easily distracted
- Sometimes associated immune system weaknesses which can result in allergies, eczema, glue ear or year-round hay fever

Parents may be told that their child, who seems to be delayed in their development according to developmental milestones, will usually catch up in their own time. This is true in some cases; but we know that not every child moves forward at the same pace, or demonstrates new skills at the same time or rate as other children around them.

Development may be more advanced in some areas than others, and this can be confusing when trying to establish if there really is a problem. However, when a child seems to have a cluster of on-going challenges which are affecting their day to day living, steps need to be taken. It becomes increasingly important to identify the areas which are most in need of targeted support and to put into place strategies to support firm foundations for learning and living.

Helping Rosie

Rosie is four year's old and attends a Foundation Stage Unit. She has no diagnosis of dyspraxia, but there are concerns about how she is developing.

An adult might say:

'Rosie just can't stay on her chair and she's got more paint on her than on the paper!'

Rosie might say:

'Nobody wants to play with me'.

Her parent says:

'She's so slow, I still have to get her dressed or we'd never get here'.

The focus of this book is on helping you to identify what it is that Rosie, is finding hard to do and then using your observations and discussions to find ways of supporting her so that she can flourish and thrive to the best of her ability. If Rosie can be prevented from experiencing repeated failure, she is more likely to develop resilience and the self-confidence to try new activities. We know that the early years are a very important time for physical, emotional, intellectual and social development and those positive and negative experiences can have a profound influence on later learning and development. The earlier you can spot areas for concern and then intervene, the better the long-term prospects will be.

This book recognizes that children may have problems and difficulties but it also says that you can do something about it, not just wait in hope for change. Reading this book may be the first step you take in learning more about the importance of early identification of movement difficulties how they can be addressed.

Movement difficulties can be identified early; indeed they may be one of the first signs that extra support is required. And if identification is early, help, intervention, remediation, call it what you will, can be early too. (Macintyre, *Dyspraxia in the Early Years*, 2009)

If these difficulties are not addressed early, the child faces even more challenges when they start to write, maintain concentration, participate in physical activities as part of a group and organize themselves independently.

A problem which arises is the multiplicity of labels to describe difficulties of this type reflects the lack of agreement among professionals as to the specific causes and indicators or motor impairment. This can cause confusion for carers and others who are in contact with the child as there is such variability in the symptoms. Historically, many professionals have held the belief that developmental coordination problems may be outgrown as the children reach adolescence or adulthood. However, this is often not the case. While many clumsy children appear less affected as they become older, this is most likely the result of learning to adapt to their difficulties as well as learning to avoid situations where they have already experienced anxiety, frustration or failure.

A Word of Caution

Not every child who shows signs of the difficulties or delays above will have dyspraxia: some children will make up their progress, although more slowly than others. It is when there is a persistent cluster of difficulties observed over a period of time that further investigation needs to take place.

As a professional, you may feel you need appropriate training and specialist advice on how to differentiate for Rosie and how to include her in activities. Can you make sure that Rosie has successful experiences, and what can you do if you feel that she is not making adequate progress? This book is not intended to cover all aspects of this complex disorder, but I do hope it will give you a greater understanding of the condition, as well as offering guidelines for support and signposts to further reading, professional development and useful resources.

I am passionate about the role of movement and developmental movement programmes in particular, and I make no excuse for the emphasis on this throughout the book. Movement is a child's first language. It is the means by which children come to understand the world around them. It is the basis of communication, language, sensory integration, learning and living (Goddard Blythe, S. 2008: *What Babies and Children Really Need*).

Three Children: Three Stories

Three children will appear in the book to illustrate particular points. The age range extends beyond the early years in order to present a wider perspective of the implications of dyspraxia.

Callum attends a Day Nursery and is three years old.

Rosie is four years old and attends a Foundation Stage Unit.

Liam is eight years old and attends a primary school. Before starting school, he attended a Day Nursery.

How Can the Setting Support the Child?

Most children in pre-school with coordination difficulties are unlikely to have a diagnosis of dyspraxia as it is difficult to distinguish between dyspraxia and developmental delay at this early age. There may be a number of reasons why a child's motor skills appear to be delayed and these may improve with age and with increased opportunities to develop these skills in a range of activities.

Some children with coordination difficulties may be very unsettled by the changes in their routine that take place when they begin to attend the setting and they will need careful support to help them feel secure.

Children with Developmental Coordination Disorder (DCD) lack the motor coordination necessary to perform tasks considered appropriate for their age, given normal intellectual ability and the absence of other neurological disorders.

This means that movements, from the simple to the complex, will need to be built carefully so that firm foundations for later learning can take place. Just as in building a house: there's no point working on the bedrooms if the foundations are shaky!

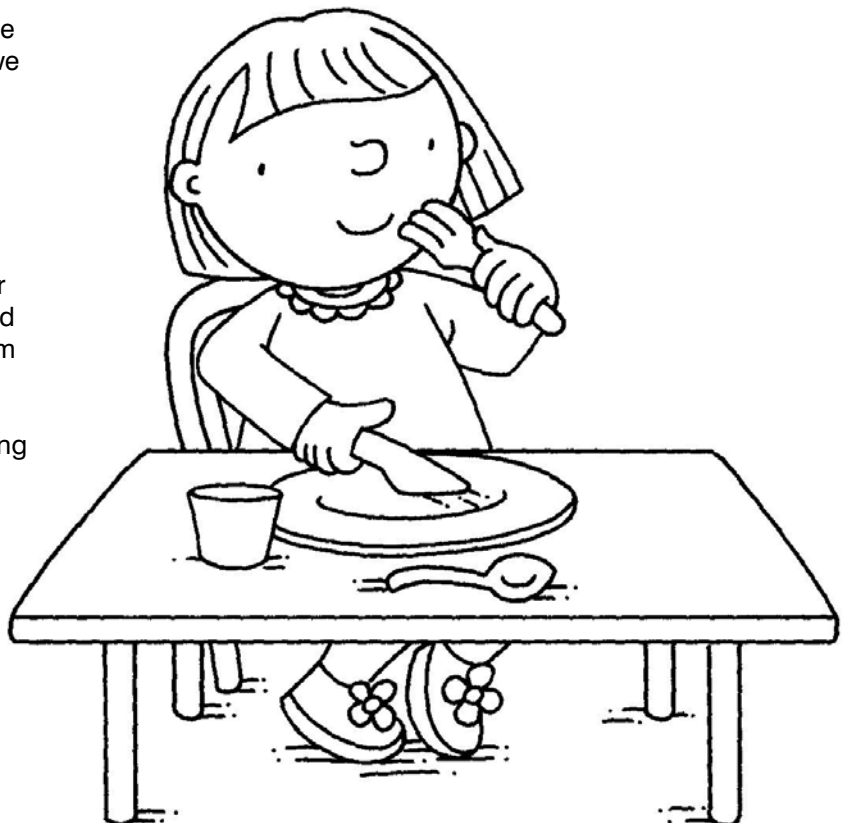
We need to offer challenges that are equal to the skills the child currently possesses; otherwise we are setting them up for failure, anxiety and an expectation that they will fail when faced with new experiences.

As the extent of the overlap and co-existence of developmental disorders begins to unfold, it becomes clear that there should be a greater emphasis on the importance of motor skills and developing competent movement patterns from the earliest days. The period of two to seven years of age is one of great change and there is an expectation that children will be developing good body control which supports their independence in play situations, self-help and social interaction. This means that children need wide and varied opportunities to develop body control for skills such as:

- Running
- Jumping
- Skipping

- Climbing
- Rolling
- Crawling
- Catching and throwing
- Balancing
- Eating
- Manipulating toys and mark making

Many children have poor quality of movement as a key element in their need for additional support. This means that it is important that a high value is placed on providing a setting which is rich in movement activities linked to other aspects of learning. Even with children with no specific 'label', movement is being found to be linked to learning, and educational professionals need to be confident in knowing how to support children who continue not to meet their motor milestones at the expected time.



Informal Assessment

At the initial stages, you may want to observe the child on a number of occasions with a particular focus in mind. You will of course be speaking to other practitioners, the SENCO and to the child's parents to develop a broader perspective of the difficulties and also, importantly, areas of strength.

Find out about the support your SENCO can give you in relation to the setting's SEN (Special Educational Needs) policy and how you can access support from an outside specialist.

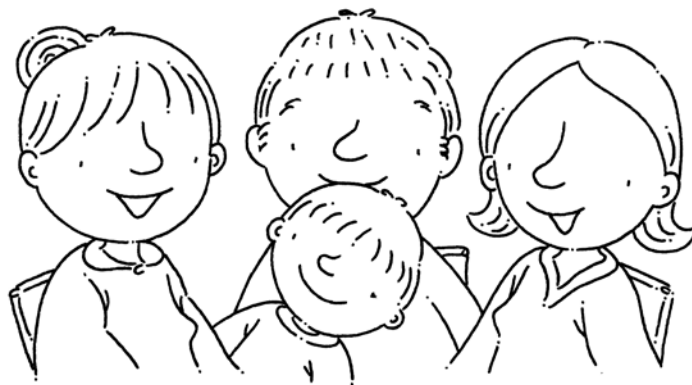
Children do things differently on different occasions depending on the time of day, whether they are tired, and many other factors. As a result, a series of observations is more likely to provide the evidence of the level of a child's movement difficulties. As their patterns of behaviour and movement can be variable, Macintyre recommends, for example, checking that other aspects of the child's development are not affecting performance such as poor vision or hearing loss. This is an important point as practitioners may not always be immediately aware (or have been told) of sight, hearing or speech difficulties which may result in slower responses which are then misinterpreted as signs of dyspraxia.

Children born with poor sight or hearing, may not even realize that they have an impairment. If they are used to following what others are doing around them their responses may be inaccurate or late, depending on whether the signals they are copying are themselves accurate or appropriate.

When you observe dyspraxic children closely, you may see that many of their difficulties appear to relate to working out how to carry out the movements they need to make in the appropriate sequence. As they hesitate, they may become fearful or anxious and become confused as they fail to complete the activity with success.

You may observe dyspraxic children engaging in 'mirror' movements. This means that parts of their body which are not directly involved in the activity also move. For example, when jumping or hopping they may use their arms unusually or when the right hand is doing something, the left hand is 'mirroring' the action. When sitting down, and playing at a table, the child's legs and feet may be tapping or swinging at the same time.

Talk to the child's parent(s) or carer(s) about the child's early development. The indicators of dyspraxia in babies can form a useful starting point. It is important to be sensitive to the way in which parents are approached about this as they may be unable or unwilling to discuss early parenting experiences if they feel they are being criticized.



Some parents may already be feeling some guilt or lack of confidence in how they have managed these early experiences. If you approach this with sensitivity and with an understanding of the basics of dyspraxia and its implications, you will have a good foundation to build on.

Infants, Movement and Learning

Over the years, researchers have looked into the relationship between movements that infants make and their developing minds. The importance of understanding the ways in which motor development takes place is linked to our understanding of how infants learn and develop in other ways. Since motor development generally occurs in a predictable order in typically developing infants, it can be used to recognize when an infant is not following this predictable pattern. The developmental milestones which parents and health professionals refer to are well-established: these are landmarks or turning points in an individual's development and are linked to one another in a relatively consistent sequence.

However, there are a number of factors which can influence when these developmental markers are reached. A cultural phenomenon identified in the United States is 'first child syndrome' where first time mothers may hold their infants for long periods and avoid putting them on their stomachs for a long time. There is the suggestion that these periods of prolonged holding result in the delayed onset of certain motor milestones such as crawling, as the infant is not given opportunities to strengthen neck muscles when lying prone (on their stomachs).

From this we can see that the development of movement skill may be influenced by:

- The parents' confidence and experience of handling infants
- Parental expectations of the infant
- The environment the infant is brought up in