

INFORMATION SHEET – WHAT IS DYSPRAXIA?

Dyspraxia – the facts

The Dyspraxia Foundation defines dyspraxia as:

“Dyspraxia, a form of developmental coordination disorder (DCD) is a common disorder affecting fine and/or gross motor coordination in children and adults. While DCD is often regarded as an umbrella term to cover motor coordination difficulties, dyspraxia refers to those people who have additional problems planning, organising and carrying out movements in the right order in everyday situations. Dyspraxia can also affect articulation and speech, perception and thought.”

(Dyspraxia Foundation 2013)

Although dyspraxia may be diagnosed at any stage of life, increasing numbers of children are identified as having the condition. In fact, 53% of dyslexics are also dyspraxic.

Early recognition of dyspraxia enables early intervention and practical steps to be taken to help your child to achieve his or her potential. Children in whom 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 enter the teenage years their problems may change as social and organisational difficulties become more obvious.

The Dyspraxia Foundation offers support to you and your child through its services and publications and can be reached through the following link:

<https://dyspraxiafoundation.org.uk/dyspraxia-children/>

How is dyspraxia diagnosed?

If you think your child may be dyspraxic or suffer any other type of DCD you should firstly discuss your concerns with your general practitioner (GP) who can refer you to appropriate professionals. Any diagnosis must be confirmed by more than one professional.

The *Diagnostic and Statistical Manual of Mental Disorders, 5th Edition: DSM-5 2013* (DSM-5) provides the following tests for a diagnosis:

1. The acquisition and execution of coordinated motor skills is substantially below that expected given to the individual's chronological age and opportunity for skill learning and use and that this significantly and persistently interferes with activities of daily living. This part of the diagnosis is carried out either by an occupational therapist or a physiotherapist. Where there are speech and language difficulties, your child may be referred to a speech and language therapist (SALT).
2. The motor skill difficulties are not better explained by visual impairment, neurological disorder or another medical condition. This element of the diagnosis is carried out by a paediatrician or paediatric neurologist.

What do dyslexia and dyspraxia have in common?

Dyslexic and dyspraxic children and adults tend to be holistic problem solvers and intuitive, creative thinkers. It's important to note that neither condition affects intelligence. Nonetheless, each impacts on learning style because organisation and memory are involved to varying degrees. People who are dyslexic and dyspraxic thus find that learning often takes longer and is more tiring than for those without these conditions.