

## Identifying and Diagnosing

Dyspraxia, also known as Developmental Coordination Disorder (DCD), is a neurological condition that affects a child’s motor coordination, making it challenging to perform everyday tasks. Early identification is important as symptoms often appear in early childhood and can impact academic achievement, self-esteem, and social development. Children with dyspraxia may exhibit difficulties with tasks requiring motor skills, such as holding a pencil, dressing, or using cutlery, as well as problems with balance and coordination (Sugden & Kirby, 2007).

Teachers and caregivers are often the first to notice these signs, which is why observational assessment in educational settings is essential for early detection (Blank et al., 2019). Diagnosing dyspraxia typically involves a multidisciplinary team, including paediatricians, occupational therapists, and educational psychologists. The process follows established diagnostic criteria, such as those outlined in the DSM-5, which require persistent motor coordination difficulties that interfere significantly with daily living and academic performance (Vahia, 2013).

Assessment tools like the Movement Assessment Battery for Children and the Developmental Coordination Disorder Questionnaire are commonly used to support diagnosis through objective evaluation (Wilson et al., 2009; Blank et al., 2019). These tools, combined with detailed developmental history and reports from teachers and parents, help professionals differentiate dyspraxia from other developmental disorders, such as ADHD or autism spectrum conditions.

Early diagnosis is key to implementing tailored interventions that support a child’s motor development, confidence, and engagement in learning. Without early support, children with dyspraxia may face long-term difficulties in academic and social settings. Therefore, raising awareness among educators and parents about the signs and referral processes is fundamental to improving outcomes for affected children (Portwood, 2018).

# Dyspraxia (DCD)

## Issues and Challenges

As discussed already, children with dyspraxia, or Developmental Coordination Disorder, face a range of issues that affect their motor, cognitive, and social development. One of the most significant challenges involves gross and fine motor skills, which impact activities like handwriting, dressing, using cutlery, and participating in sports. These motor delays can lead to poor academic performance and lower engagement in physical education, as children often struggle to keep up with peers (Blank et al., 2012; Camden et al., 2015).

In addition to motor skills, children with dyspraxia often experience executive functioning difficulties, such as challenges with planning, sequencing, and organisation. These issues can make classroom tasks such as following multi-step instructions or managing time particularly difficult, affecting both academic achievement and independence (Kirby et al., 2011; Portwood, 2018). These cognitive challenges can lead to emotional and behavioural difficulties, including anxiety, frustration, and lack of confidence. Children may be labelled as inattentive or lazy, which further worsens their sense of belonging.

Socially, dyspraxia can lead to peer relationship difficulties. Children may avoid group activities or be excluded due to clumsiness or slow response times in games and conversations. These difficulties can lead to social isolation and emotional distress (Lingam et al., 2012; Summer et al., 2016). The combination of motor, cognitive, and social challenges makes early identification and multi-disciplinary support important. This includes occupational therapy, tailored educational strategies, and strong communication between professionals and families to mitigate long-term impacts.

## Benefits of Support

Teachers and special educational needs coordinators are crucial in embedding inclusive practices within the classroom. By adapting the curriculum and using assistive technology, they help children access learning more effectively. Differentiated instruction, visual aids, and task sequencing enhance the child’s participation and reduce frustration, contributing to better academic outcomes (Missiuna, 2013). Parents and caregivers also play a vital role by reinforcing therapeutic strategies at home and fostering a supportive emotional environment.

The benefits of this collaborative support include enhanced motor and cognitive functioning, improved self-esteem, and better social participation. Early and consistent intervention helps children develop coping strategies, boosts their confidence, and reduces the risk of secondary issues such as anxiety or academic underachievement (Rihtman et al., 2022; Khairati et al., 2024). Ultimately, coordinated support enables children with dyspraxia to thrive in both educational and social contexts.

## Interventions for Dyspraxia

Children with dyspraxia, often face challenges with motor skills, spatial awareness, and coordination that can affect their participation in daily school activities. Early interventions are essential to support their physical, cognitive, and emotional development. One effective approach is occupational therapy, which targets the development of fine and gross motor skills through structured, play-based activities. Occupational therapists often use task-specific training and motor learning strategies to help children improve coordination and self-care skills (Blank et al., 2019; Camden et al., 2015). These interventions are typically individualised and goal-focused, ensuring that therapy is tailored to each child’s unique needs and developmental level.

Another key intervention involves integrating physical activity programs within the school setting. Structured physical education sessions and movement-based learning can enhance muscle tone, balance, and motor planning. Interactive movement games, obstacle courses, and dance-based exercises can support children with dyspraxia in improving their body awareness and coordination while also promoting social interaction (Wilson et al., 2017; Sit et al., 2019).

Additionally, using assistive technology and classroom tools such as pencil grips, typing tools, or additional time for tasks can help children access learning more independently and reduce frustration. Also, collaboration between educators, parents, and specialists is essential for a coordinated support system. Teachers can adapt classroom tasks to be more manageable and provide clear instructions, visual aids, and positive reinforcement to boost confidence and engagement (Wright 1998 & Sugden 1998). Regular communication ensures consistency in strategies between home and school, promoting progress and emotional resilience. Overall, a multidisciplinary, inclusive approach ensures that children with dyspraxia receive the comprehensive support they need to thrive.