



Developmental Coordination Disorder Information Sheet for Educators

What is Developmental Coordination Disorder (DCD)?

Developmental Coordination Disorder or DCD (sometimes referred to as dyspraxia) is a lifelong neurodevelopmental condition that causes problems with movement and coordination. People with DCD find it difficult to coordinate their bodies to perform everyday tasks, like dressing themselves, writing neatly, catching a ball or riding a bike.

While those who go on to receive a diagnosis of DCD may present with some movement delays or difficulties early in life (e.g., feeding, crawling and walking), these difficulties are often more noticeable when learning more complex movement tasks required for daily living, early education and playground activity.

What causes DCD?

The causes of DCD are not well understood. Like other neurodevelopmental conditions, the brain is thought to develop differently, with these differences impacting on a person's ability to learn and plan movement. Research indicates a strong genetic and heritable basis for the disorder, and early life factors such as complications during pregnancy and birth are also associated.

While DCD can present as an isolated disorder, movement difficulties often exist with difficulties in other domains (i.e., language, socialisation, behaviour). Within current diagnostic models, it is not uncommon for a diagnosis of DCD to be made in addition to other diagnoses aligned to other difficulties or behaviours they may display (e.g., autism spectrum disorder, attention deficit hyperactivity disorder, child apraxia of speech).

How prevalent is the disorder?

DCD is estimated to occur in ~5% of school-aged children, roughly 1-2 children in every classroom. The disorder is more common in boys than in girls (3:1).

Difficulties experienced in the classroom

Children with DCD can present with a range of movement difficulties, including fine motor (using the hands), gross motor (using the body), or both. Common skills that they can have trouble with at school may include:

- Drawing and writing
- Cutting with scissors
- Turning pages in a book
- Navigating desks in the classroom
- Opening their school bag, lunchbox and unwrapping lunch items
- Slower eating
- Dressing and putting on shoes
- Playground and sporting activities (i.e., climbing, catching, jumping, running)
- Walking up and down stairs
- Toileting

Children with DCD typically appear uncoordinated and awkward with their movement. Their movement can be disorganised, poorly timed, slow, unstable and sometimes rushed.

Children with movement difficulties like DCD must work very hard both physically and cognitively to move. It usually takes them longer to accomplish tasks and they fatigue performing tasks they find difficult.

Children with DCD will often show a lack of interest or avoid tasks they find difficult. They may be easily frustrated and may avoid engaging in activities with other children. They are also often excluded by their peers, particularly in the playground.



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How to support these difficulties

Like any child with a disability, the learning environment may need to be adapted to support the child's learning needs.

Meet with parents/caregivers and reach out to therapists the child may be seeing. This will assist in the development of an Individual Learning Plan (ILP).

Modifications that may be required for a child with DCD include:

- One-on-one support
- Additional working time on tasks impacted by their movement difficulties
- Rest breaks when fatigued
- Visual and tactile instruction
- Use of laptop or tablet device to complete written tasks
- Slant/slope boards
- Additional desk space
- Sit to stand desks
- Alternative activities at school play times

It is also important that other specialised teachers involved in the child's education are informed. Physical education, art and music are areas that are particularly challenging for children with DCD and they will require additional support in these discipline areas.

I am concerned about a child's movement, but they do not have a diagnosis

As educators, it is never easy to inform parents/caregivers about concerns you may have about their child's development and learning. Though, by doing so, you are providing that family with an opportunity to obtain additional support their child may need. Recommend that they talk to a doctor or paediatrician.

The diagnosis of DCD should involve a multidisciplinary team, including an occupational therapist or developmental neuropsychologist to assess motor skills, and a paediatrician to rule out neurological conditions (e.g., cerebral palsy) and other potential explanations for the movement difficulties (e.g., visual impairment).

Social and emotional health

DCD is often associated with secondary impacts on mental health. Children with DCD struggle to keep up with their peers in classroom and playground activities and can experience exclusion and bullying. DCD can therefore have substantial impacts on a child's confidence and self-esteem and can lead to mental health issues such as anxiety and depression.

Regular communication with the child and their parents/caregivers will ensure these impacts are considered. Children may require support from the school psychologist or an external provider.

For further information

DCD Australia Inc. is the national peak body supporting people with DCD and their families in Australia. Our mission is to raise awareness of DCD in the community and to provide support to individuals with DCD and their families.

We will accomplish this mission through advocacy, networking, provision of resources and educating the public about DCD; and providing families with the knowledge, skills and support they require.

Find out more at dcdaustralia.org.au