

# Dysgraphia

## What is dysgraphia?

Dysgraphia is a writing disability in which a person finds it difficult to form letters or write within a defined space. The demand of needing to combine the complex mixture of tasks needed for a satisfactory written result may be difficult.

## What are the common features of dysgraphia?

- Difficulties with spelling
- Poor handwriting
- Trouble putting thoughts on paper.
- Poor organisation of writing on the page.

## Common difficulties often (but not always) experienced by those with dysgraphia:

- Getting ideas on paper.
- Body awareness or feedback in the hands.
- Less than age appropriate written communication output.
- Poor endurance for handwriting.
- Limited motivation for written academic tasks due to their known difficulties with it.

## **Management strategies that help the child with dysgraphia (at preschool, school and/or home):**

- Additional time to complete written tasks.
- Alternative ways to express knowledge (e.g. verbal response rather than written, others scribing for them or voice activated computer software).
- An older student may use a computer to write long pieces of work.
- Adult awareness of the issues, the inherent challenges and the strategies that can help.

## **Occupational Therapy approaches and activities that can support the child with dysgraphia or their carers include:**

- **Providing specific physical supports** for pencil mechanics to make writing easier.
- **Using aids:** Trialing various pencil grips and/or a slant board.
- **Specific paper:** Trialing and using adapted paper to reduce the attention to detail from memory alone.
- **Developing visual processes/sequences** to assist with getting ideas on paper (e.g. 'mind maps').
- **Pre-organisation:** If getting started is a problem, encouraging pre-organisation strategies (e.g. sentence starters).
- **Fun games:** Completing sentence structure and word association games

## **Why should I seek therapy for my child with dysgraphia?**

Diagnosis alone is NOT the solution. It simply opens the door to getting the help that is needed by arming all involved with the relevant information.

The 'help' still needs to be provided. The help that is provided (at least from a therapy perspective) will reflect:

- First and foremost what medical intervention is needed.
- What the parents/teachers/carers biggest concerns are for the child (i.e. what are the most significant functional challenges).
- The specific areas that are problematic to the child (which will vary even within children with the same diagnosis).

- The capacity of the child's environments to meet the child's needs.

## **If left untreated the child with dysgraphia may have difficulties with:**

- Managing a full school day due to poor strength and endurance.
- Participating in sporting activities leading to an inactive lifestyle, increasing the risks of other health related issues such as obesity, diabetes, cardiovascular disease or similar conditions.
- Self esteem and confidence when they realise their skills do not match their peers.
- Fine motor skills (e.g. writing, drawing and cutting) due to poor core stability, meaning they do not have a strong base to support the use of their arms and hands.
- Completing self-care tasks (e.g. doing up shoelaces, buttons, zips, using cutlery).
- Accessing the curriculum because they are unable to attend to tasks long enough to complete assessment criteria.
- Academic performance: Developing literacy skills such as reading and writing and coping in the academic environment.
- Academic assessment: Completing tests, exams and academic tasks in higher education.

More specific implications of not seeking treatment will be influenced by the common difficulties that are most influencing your individual child

*For more information see the relevant fact sheets under areas of concern or refer to the other relevant resources section below.*

## **What does the diagnosis of dysgraphia really mean for the child?**

Diagnoses are used to label a specific set of symptoms that are being experienced by a child.

This label then helps to narrow down and specifically tailor what:

- Other issues commonly occur simultaneously.

- Medication might be appropriate.
- Therapies might help the child (e.g. Medical, Occupational Therapy, Speech Therapy, Psychology).
- Course of intervention (medical and/or allied health) might be and what outcome might be expected (prognosis).
- Can be done to help the child.

A diagnosis helps the child and their carers (parents, teachers, health professionals, carers) to:

- Access information about the relevant cluster of symptoms.
- Communicate the salient features of the child's challenges to all people involved in the child's care.
- Possibly interpret certain behaviours differently in light of the diagnosis.
- Obtain information about what can be done to help the child.
- Determine specifically where and how to help the child.
- Access funding or services that might not otherwise be accessible.

Contact us today to make an initial enquiry or book an assessment for your child  
on 1800 KID SENSE (1800 543 736)

