

Developmental Coordination Disorder (DCD): What Caregivers Need to Know



What is Developmental Coordination Disorder (DCD)?



DCD is a developmental disorder that becomes evident around five years of age and presents as a combination of four criteria:

1. Motor coordination below what would be expected when considering the child's chronological age and exposure to motor activities
2. Movement qualities including clumsiness, slowness, or inaccuracy which affect daily living skills, school productivity, leisure, and play
3. Symptoms which began in the early years of life
4. Symptoms that cannot be explained by other conditions such as an intellectual disability or other neurological conditions with motor impairments

How is DCD diagnosed?



Your child's physician or licensed psychologist is qualified to assign a diagnosis of DCD; however, the process of determining the diagnosis is informed by reports from many other sources, including physical therapists. These reports include a thorough medical history and skilled observation of your child's movement skills. The diagnosis of DCD requires that all four criteria mentioned above are met.

Who can help my child?



DCD is best addressed by collaborative teamwork among people who provide care for your child's health and physical development. This includes you and your family as keen observers of your child's abilities, your child's primary physician, teachers, coaches, or other healthcare professionals such as physical and occupational therapists, psychologists, or other medical specialists.

How can I help my child?



You have several critical roles in support of your child:

- Be patient and encouraging
- Provide many opportunities for practice
- Help reinforce the home exercise program
- Communicate with the PT and other healthcare providers about your child's progress and challenges

What can I expect from my physical therapist?



- A thorough medical and intervention history
- Collaboration with you and your child to set task-specific goals, which may differ depending on the context of school, clinic, or community settings
- Services may be individual or in small groups, no larger than six children
- Interventions that:
 - Are task-oriented and address motor impairments
 - May modify the environment
 - Provide strategies for improving independence
 - Teach you and your child strategies for breaking the tasks into easier components
- A home exercise program that reinforces learning strategies to address the direct therapy goals, and that will change as the child improves
- Recommendations for supplemental activities that support the therapy goals and lifelong fitness, including individual sports or recreation/teams supported by a skilled coach
- Periodic re-evaluations as the child develops
- Communication and collaboration with your child's primary physician, other specialists, and significant adults who may have a role in your child's health and physical development



What can I expect from physical therapy?



- Most children will improve their motor skills after about nine weeks of intervention
- Most children may continue to have motor coordination challenges throughout life; however, they can learn strategies to tackle new motor skill challenges
- Your child's motor skill confidence should increase, setting the stage for greater interest in activity and fitness
- Prevention of general deconditioning (loss of strength, endurance, flexibility, and unnecessary weight gain) as your child's confidence to participate in lifelong physical activity improves

For more information:

APTA–Pediatrics DCD Clinical Practice Guideline:
<https://pediatricapta.org/clinical-practice-guidelines/>

DCD Education Materials by CanChild:
<https://www.canchild.ca/en/diagnoses/developmental-coordination-disorder/>

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