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Dyspraxia, Neurodiversity and Inclusion

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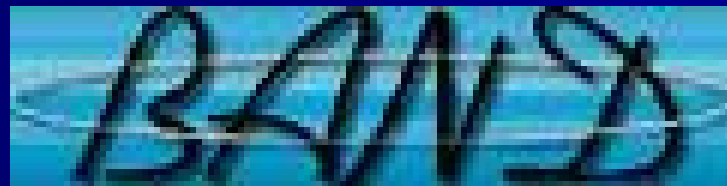


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## **Dyspraxia and Neurodiversity**

Removing Barriers to Inclusion and  
Recognising Strengths

# WHAT IS DYSPRAXIA?



“Dys” abnormal/ill

+ “Praxis” = not being able to carry out actions( Portwood 1999)

Label blames individual and not disabling barriers that cause this impairment to become a disability



This is a negative and self-fulfilling label that implies that we are not capable of taking action!

The name of the group

"Greater Manchester Dyspraxia Adult's Action!"

Challenges this negative notion!

# Challenging the Medical definition of dyspraxia

- Paulo Freire (2000)  
“ It is only when the oppressed find the oppressor out and become involved in the organised struggle for their liberation that they begin to believe in themselves. This discovery cannot be purely intellectual but must involve action; nor can it be limited to mere activism, but must include serious reflection: only then will it be praxis.”  
( Greater Manchester Dyspraxia Adult Action Website)

# According to the Dyspraxia Foundation:

- Dyspraxia is an impairment or immaturity of the organisation of movement. Associated with this there may be problems of language, perception and thought
- Between 7-10% of the population are affected by dyspraxia and 2-4% severely.



# Types of Dyspraxia



- **Acquired dyspraxia** from Head injury /Stroke (very pronounced)

Different from

- **Developmental Dyspraxia** (hidden disability acquired pre/perinatal).



# **DEVELOPMENTAL DYSPRAXIA & DEVELOPMENTAL CO-ORDINATION DISORDER (DCD)**

## **Dyspraxia**

Not knowing how to plan movements and tasks.

## **DCD**

Knowing how a movement or task should be planned but body finds it difficult to carry out.( Kirby 1999).

## Other labels used

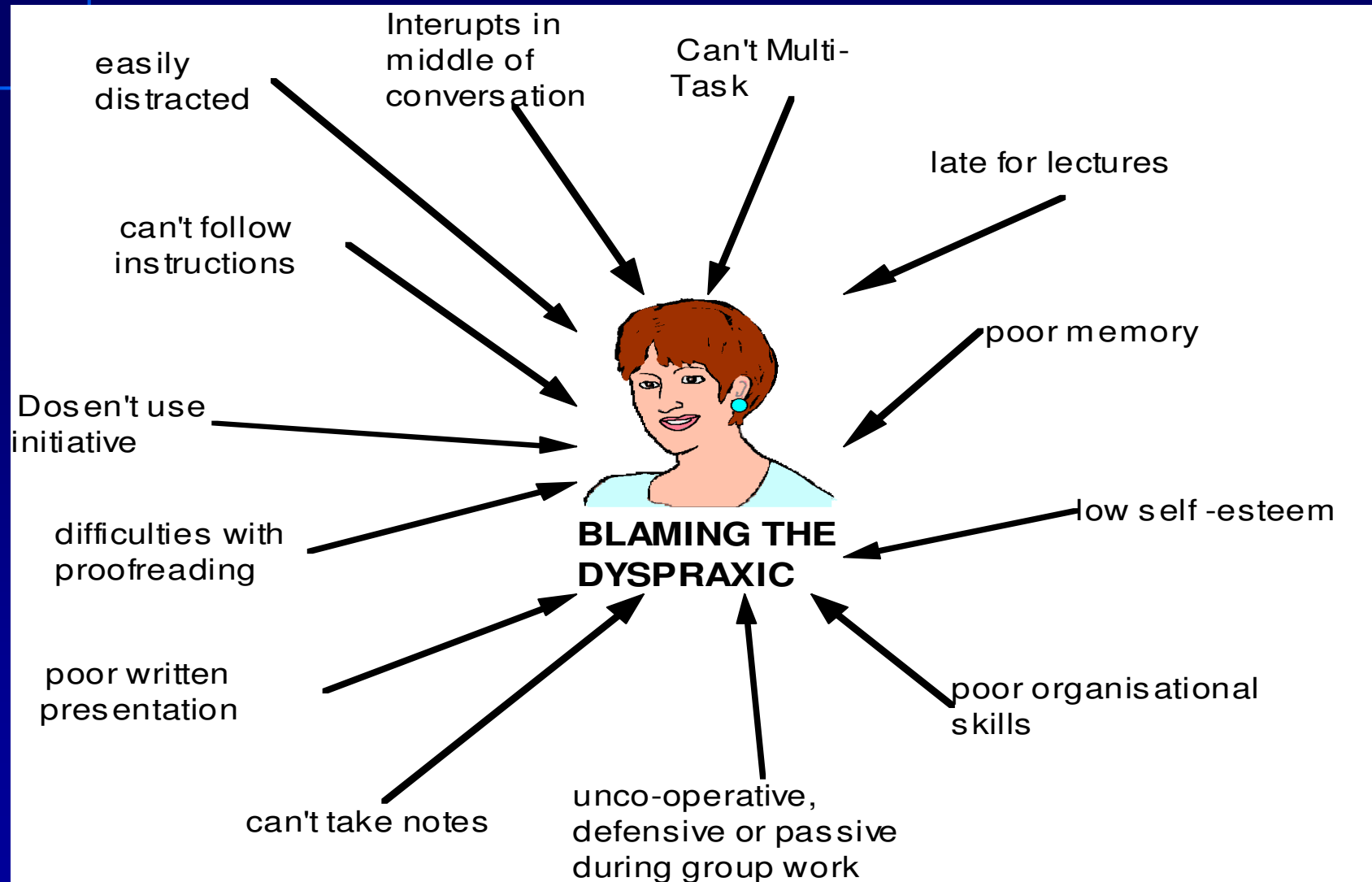
- Clumsy child syndrome
- Minimal brain damage
- DCD (Developmental Co-ordination Disorder)
- DAMP (Disorder of attention, motor control and perception)
- Motor learning difficulties
- Motor dysfunction
- Perceptuo-motor difficulties
- Non- Verbal Learning Difficulties



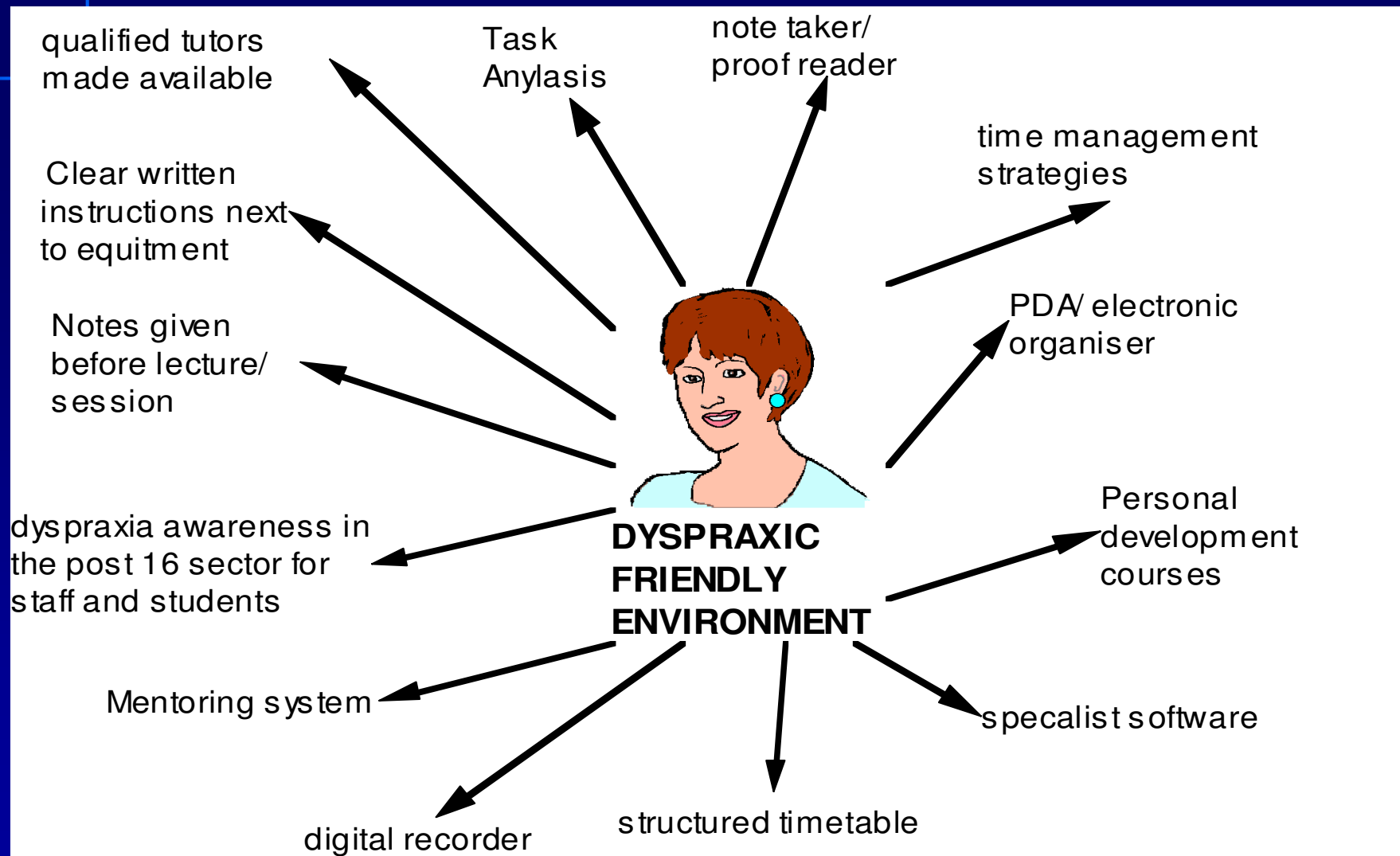
# CO- MORBIDITY

- Professor Amanda Kirby believes that 90% of dyspraxics have a co-morbidity with one or more neuro-diverse condition
- *Overlaps are on a continuum/part of a spectrum*
- *our brains are not colour coded!*
- *connections between the brain are not neatly separated*

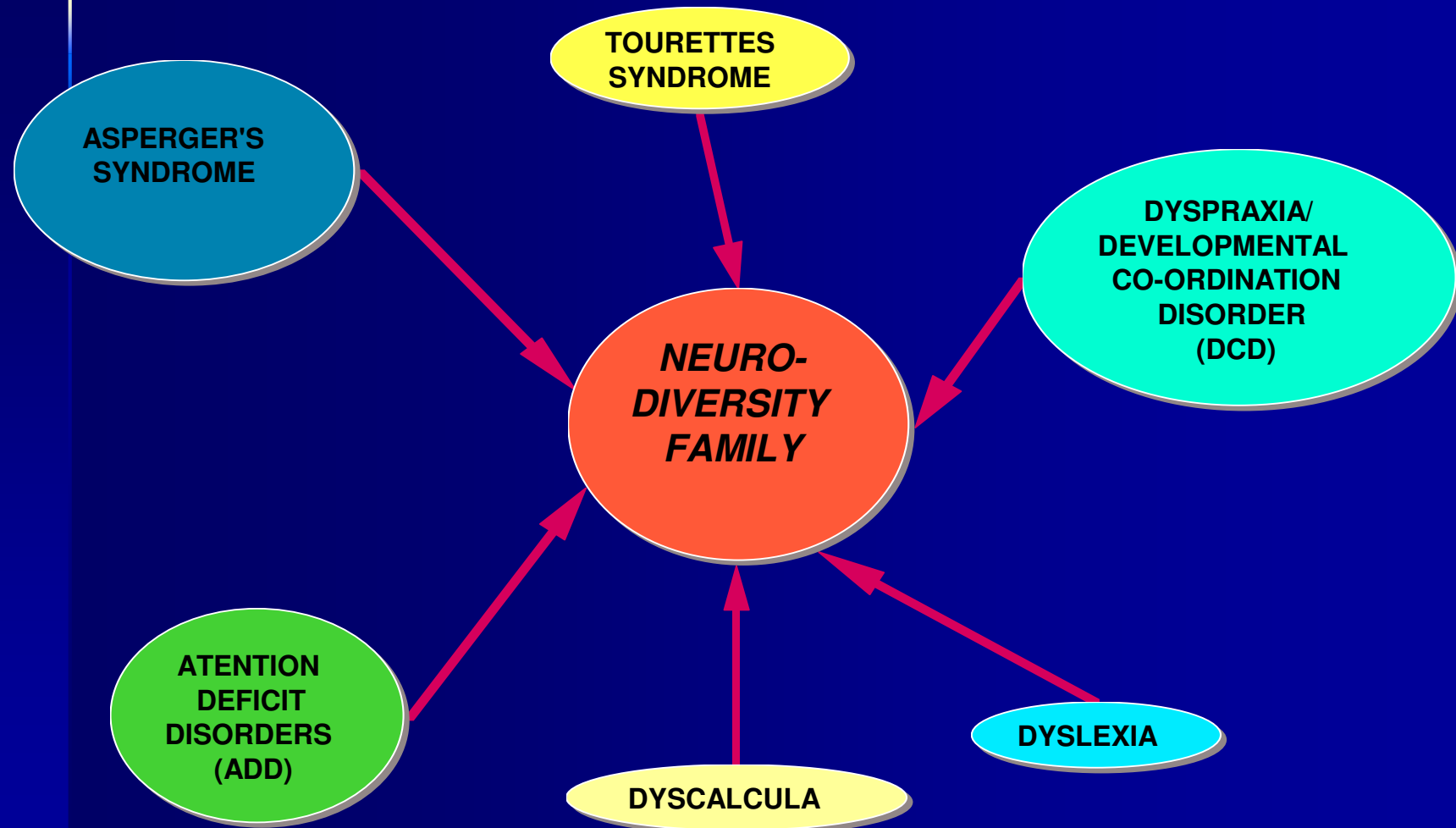
# The Medical Model of Dyspraxia in HE



# The Social Model of Dyspraxia in HE

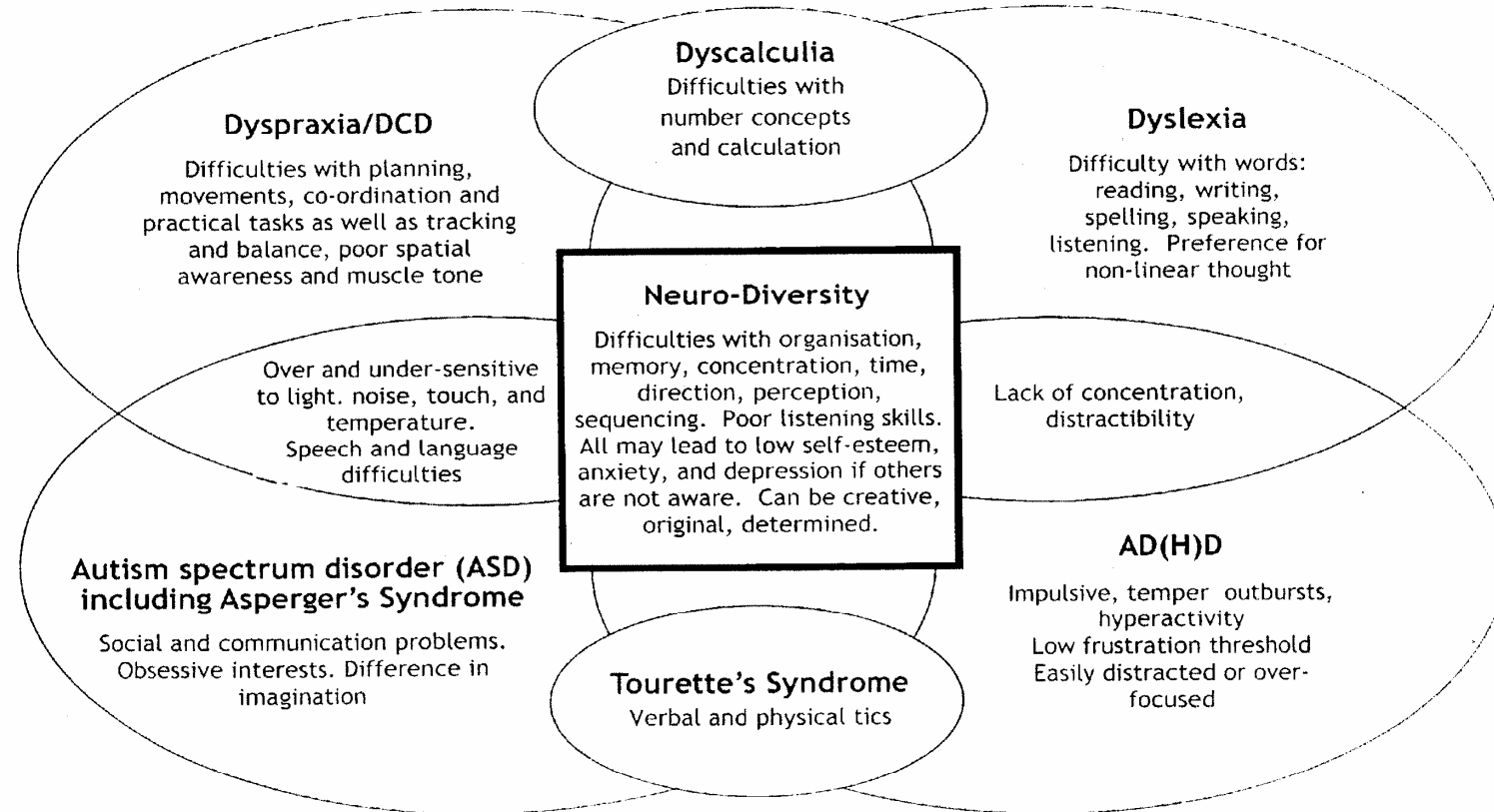


# Neuro-diversity (ND)/Specific Learning Difficulties



## The Make-up of Neuro-Diversity

This is a document for discussion, concentrating mainly on the difficulties of those with neuro-diversity. It must however be pointed out that many such people are excellent at maths, co-ordination, reading etc . We are people of extremes.



# OTHERS NAMES FOR ND

- Specific Learning Differences
- Specific Processing Disorders
- Specific Learning Difficulties (SpLD)
- Autistic Spectrum Disorders
- Neuro Developmental Differences
- Dyslexia



# The Great ND Pigeon Hole Debate



- DANDA include the Developmental Neuro-developmental differences Dyslexia, Dyspraxia, ADHD, ADD, Asperger Syndrome, dysclacula
- Brain HE at Demontfort University also include depression stroke, head injuries and acquired neuro-developmental differences.
- Many autistic adults consider ND to be Asperger's Syndrome and Autistic Spectrum disorders.
- Other disabilities are now jumping on the ND bandwagon

# WHAT IS NEURO-DIVERSITY?



- British Medical Journal (BMJ)
- “.....the variety of non-debilitating neurological behaviours and abilities exhibited by the human race.
- based on the belief that there is no such thing as "normal" when it comes to the human mental landscape.

# BMJ Definition Cont

It's a movement that wants tolerance for brain differences such as those found on the "autistic spectrum" of conditions (which cause behavioural quirks) as well as tolerance for the diagnoses themselves.

# What is ND? 2

- Term first invented by Judy Singer (2002)
- For most people, i.e. the Neuro-Typical (NT), the cognitive profile is relatively smooth, with little variation in effectiveness of information processing.
- This is in line with their general level of intellectual and reasoning ability.(DANDA website)

# What is ND? 3

- Neuro-Divergent (ND) have a cognitive profile which shows significant peaks and troughs, denoting significant disparity between the best and worst of their information processing (ibid).



# Aileen Quinton

“ I find complex mathematical analysis a walk in the park, when you’re lost, late, disorientated and can’t cope with the sun, is a nightmare (DANDA 2006)”



**Aileen Quinton**

# DYSPRAXIA

- lack of co-ordination
- difficulty with practical
- multi tasking;
- poor balance and spatial awareness
- speech difficulties.



# BENEFITS OF DYSPRAXIA

Jo Todd (2006)

- Language skills
- Persistence
- Hardworking
- Often self-sufficient
- Creativity
- Empathy
- Good at pattern
- Often auditory sensitivity(Todd 2005)



# DYSLEXIA

difficulties with words  
particularly concerning:

- reading
- writing
- Spelling
- Sequencing
- finding the right words  
when speaking.(ibid)



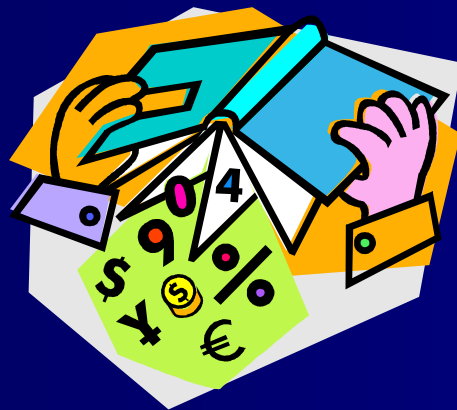
# BENEFITS OF DYSLEXIA

Todd(2006)

- Visual/ spatial skills
- Visualisation skills
- Artistic Skills
- Spoken communication
- Empathetic
- Determined, hard working
- Big Picture thinkers
- Often physical skills
- Craft skills (ibid)

# Dyscalculia

- Difficulties with:
- numeracy
- properties of numbers.



# ASPERGER'S SYNDROME

difficulties with:

- social skills
- communication
- differences in imagination
- obsessive about particular subjects obsessive behaviour
- taking meaning of language literally
- reading body language (ibid)



# BENEFITS OF ASPERGER'S SYNDROME

Todd(2006)

- Ability to focus
- Clarity of thinking
- Independent thinking and self-sufficient
- Honest
- Forthright
- Clear sense of justice
- Enthusiastic about their interests (ibid)

# ATTENTION DEFICIT (HYPERACTIVITY) DISORDER (AD(H)D)

- easily distracted and bored
- impulsivity
- hyperactivity
- impatience.



# THE BENEFITS OF (AD(H)D)

Todd(2006)

- Creativity
- Strong motivation
- Determination
- Independence, individualism
- Actors rather than reactors
- Energetic
- In charge of their own destiny (ibid)

# Oppositional Defiant Disorder ODD(Clair Lewis 2000)



"You have oppositional defiant disorder, sir.  
I prescribe a monthly course of therapeutic  
non-violent direct action."



# Tourettes Syndrome:



## Involuntary:

- tics
- vocalisations
- Sometimes swearing
- Self harm
- Difficulty relaxing

# THE BENEFITS OF TOURETTES SYNDROME

- Sense of Humour
- Empathy to the underdog
- Caring
- Sensitivity
- Individualism
- Creative in arts and music

# N.D. AND MENTAL HEALTH

A college of occupational  
Therapists study-

- Over 80% of dyspraxics diagnosed after the age of 7 showed negative emotional outcomes
- (Mental health problems, unemployment, homelessness, substance addiction, and /or abuse by the age of 23) Compared with the rest of the population



**Slide 34**

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**J1**

Taylor, 04/11/2004

# N.D. and Mental Health#2

- Many ND's can be inappropriately misdiagnosed with 'mental illnesses' and given inappropriate psychiatric drug treatments.
- ND's are inappropriately put into the mental health system
- Obsessive Compulsive Disorder (O.C.D) can be common in N.D.

# N.D. AND THE PRISON SERVICE

Unmet needs of ND can result in offending

Studies have shown a greater percentage of people than would be expected



- (Kirk and Reid 2001) study in Scottish prison dyslexia 50%
- (Portwood 1999) in Durham Young Offenders Institution. 61% had dyspraxia and 46% had a co-morbidity of dyspraxia and dyslexia.

## N.D. AND THE PRISON SERVICE<sup>2</sup>

- "It is estimated as many as 5% of school age children have ADHD and 100,000 children need treatment.
- 23% of crime has been attributed to or non-existent diagnosis of ADHD children in care homes.
- Court records suggest that ADHD youths are more likely to be arrested and have multiple convictions". (Rose 2005)

# The Evils of Labelling

- David Pollak & Edward Griffin (2007) at BrainHE carried out a survey with 20 ND students and 4 ND support staff
- interviewees were given a medical label for their neurodiversity and most of them accept their label as being a part of them.





# The Evils of Labelling Cont

- Medical Professions tend to focus on the negative aspects of neurodiversity - use their own disempowering language to describe the label to their patients
- Many of the interviewees adopted this language and use terms like 'disability' 'problems' 'difficulties' when talking about their neurodiversity (Dyspraxia Adult Action Website)

## The Evils of Labelling Cont

- Before being labelled, most of the dyslexic and dyspraxic students were called 'lazy', students with ADHD were labelled as trouble makers and Aspies were called weird or 'odd balls'
- Only a few of the interviewees have actively explored more empowering definitions of their types of neurodiversity.
- Should we be encouraging this?



# No Blueprint for ND



- **Each person should be supported holistically as an individual rather than generalising their ability according to their label.**
- all human being are neurologically unique whether they are Neurodiverse or neurotypical are not therefore every human being is neuro-diverse

# Famous N.D. Celebrities



**Zoe Wanamaker**



**Sandra Bullock**



**Marco Pierre White**



**David Bailey**



© Sylvaine Poitou

**Stephen Fry**

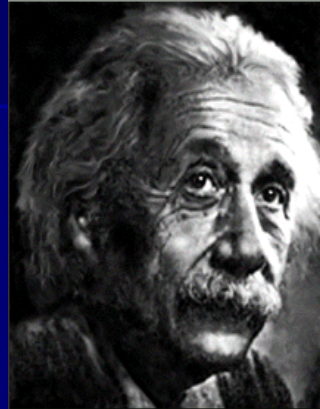


**Marilyn Monroe**

# Famous N.D. People in History



**Picasso**



**Albert Einstein**



**Samuel Taylor Coleridge**



**Emily Bronte**



**Winston Churchill**



**Jane Austen**

# Advice from a Dyspraxic Student

- *"Don't let anyone tell you what you can and can not do under the name dyspraxia!"*
- *"we don't understand it, why should they?"*

# NEXT STEPS



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