Improving the Motor Skills of Children with Developmental Coordination Disorder

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Abstract

Past examinations uncover that the prescient control of developments is weakened in children with Developmental Coordination Disorder (DCD), most likely connected with shortfall within the inner modelling of movements. The aim of the present study was to investigate the effect of a motor skills training program in children with Developmental Coordination Disorder. The study was done at four kindergartens in the Khorezm region of Uzbekistan for duration of 10 weeks. All 27 children with DCD who taken part were referred to the research and score at and below the 16th percentile for their age on the Movement Assessment Battery for Children (MABC 2). Participants were divided into an intervention group (n=18) receiving 10 weeks of motor skills training program for 40 min twice per week and the control group (n=9) proceeded with exercises of everyday living. Twenty-four children finalized the research, with 14 boys and 10 girls (mean age 5.17, SD=0.702). All children in the intervention group had a sharp increase in total percentile ranking of MABC 2 but a further decrease was observed in the control group except for one child. The study supports 10 weeks of a motor skills training program which can be a beneficial intervention for physical education specialists to enhance motor skills for children with DCD.

Introduction

Developmental Coordination Disorder (DCD) is a situation estimated an impact around 6% of children (American Psychiatric Association, 2013), and a prerequisite for a diagnosis of DCD is that these problems with motor skills are noticeable to disturb both social and academic functioning (Gaines et al., 2008). While the aetiology of DCD is still poorly understood, DCD children torment motor shortcoming connected to internal (forward) modelling, rhythmic coordination, executive function, gait, and postural control, catching and interceptive action, and sensory-perceptual function (Wilson et al., 2013). In two recent systematic reviews (Wilson et al., 2013; Vickers, 2017). This collective evidence was shown to reveal an underlying deficit in motor control and learning, linked to the predictive control of movements.

Currently, the three main professions that provide treatment for children with DCD are occupational therapy, physical therapy, and special education (Branta et al., 1984). Occupational therapists analyse ability and performance, and develop interventions and treatment solutions for problems related to performance and participation, and work closely with the Children, and parents. Physical therapists help children develop and optimize their mobility and exercise-related functions. Educational methods mainly focus on improving school activities, and less focus on improving motor skills.
There are pointers that the stage of motor skills remains persistent gradually (Branta et al., 1984), and motor development shortcomings observed in early childhood are still clearly in adolescence (Cantell et al., 1994). That is why the toddler and preschool age appears to be an especially significant time for the development of motor skills. Early childhood is also the age where practicing fundamental movement skills is important to build a foundation for more complex movement activities of daily living, recreation, and sports in later childhood (Goodway et al., 2019). In Denmark, 92% of all 3–5-year old children spend a high proportion of their waking hours at kindergarten (Lindelof et al., 2012). Thus, this arena provides an ideal opportunity for all children, despite socioeconomic background, to develop and improve their motor skills. This undertaking turned concluded in 2014 and, amongst other findings, established that extra bodily schooling in faculty progressed bone development Heidemann et al. (2013), decreased cardiovascular risk (Klakk et al., 2014), decreased the superiority of overweight (Klakk et al., 2013), and progressed bodily health in the ones with a low baseline level (Rexen et al., 2015). As a result, extra bodily schooling instructions had been delivered to the time table of all colleges inside the Municipality. The Municipality is corresponding to the relaxation of Denmark in phrases of age distribution, gender, and income, however with a barely high unemployment rate (5.3% vs. 4.5%) (Lindelof et al., 2012); therefore, the effects could be transferable to the relaxation of the country.

Importantly, the widespread trying out of those youngsters at an early age will shape the premise of a cohort with cap potential for long-time period follow-up, which will allow investigations into the long-time period improvement of motor capabilities, musculoskeletal disorders, bodily activity, language, cognitive abilities, and social capabilities in addition to the interrelations among those domain names. In addition, the predictive cap potential of early markers for toddler improvement and fitness inside those domain names may be assessed. The effectiveness of the intervention could be investigated in a cluster-randomized managed trial (RCT) targeted on development in motor capabilities in addition to several secondary effects. Importantly, the widespread trying out of those youngsters at an early age will shape the premise of a cohort with cap potential for long-time period follow-up, which will allow investigations into the long-time period improvement of motor capabilities, musculoskeletal disorders, bodily activity, language, cognitive abilities, and social capabilities in addition to the interrelations among those domain names. In addition, the predictive cap potential of early markers for toddler improvement and fitness inside those domain names may be assessed. Thus, further assessing the effectiveness of the intervention advanced for this project, we are able to provide a proof base for destiny techniques for optimizing youngsters’ fitness, wellbeing, and cognitive and language improvement.

The gift examination may be the primary examination that examines the effectiveness of a motor skill education protocol in youngsters who meet the DSM-V diagnostic standards for DCD. The goals of this examine are (1) To examine the effectiveness of motor skill training as compared to the activities of daily living for enhancing the motor talents of youngsters with DCD, (2) To take a look at the relation among motor skill training cap potential and development with inside the motor talents motor skill training in youngsters with DCD.

**Methods**

The study is going to be done among 4-6 year previous kids with DCD at kindergartens within the Khorezm region of Uzbekistan in a period of nine weeks with 1 training session per week of 45 min. The study is going to be done among 4-6 year previous kids with DCD at kindergartens within the Khorezm region of Uzbekistan in a period of nine weeks with 1
training session per week of 45 min. The randomized pre-test, the post-test study will be analysed on the Movement Assessment Battery two for kids (M-ABC2).

Motor skills are going to be tested with the revised version of the Movement Assessment Battery for Children (MABC-2). This test battery assesses the developmental status of fundamental movement skills in children and includes eight individual test items measuring movement skills in three categories: manual dexterity skills; ball skills; and balance skills. Every item is rated on a six-point rating scale, where 0 indicates the best performance and 5 the weakest. A total impairment score expresses the child’s test performance and profile scores provide information about the child’s performance of each individual category (Henderson, 1992).

The revised version of the test is divided into 3 age bands (3–6, 7–10, and 11–16 years) (Henderson et al., 2007); thus, so, the primary age band will be used during the preschool years in this project. The revised version also has qualitative assessment added, but only the quantitative assessments will be used in this study.

The test (both the original and the revised) has been validated in many countries (Chow & Henderson, 2003; Kakebeeke et al., 2016). And translated into several languages, as well as Danish, and is widely used in Denmark (Larsen et al., 2014). Society validation, availability in many European countries, and therefore the test administration facilitating large sample screening over a short period are considered major benefits of this test (Cools et al., 2009).

Results and Discussion

The focus is on movement, development of motor skills, and body awareness. The intervention can comprise gross motor challenges, fine motor challenges, and coordination exercises, balance exercises, difficult of the proprioception, tactile and kinaesthetic senses, and relaxation. Control group in the control group, there is no interference from either the research group or from the municipality. The preschools in this group simply continue their usual practices, with the only exception being the testing of the children by the research team.

Conclusion

Motor skill training is already described as a possible intervention for enhancing the motor skills of children, but it is not recommended yet because there are not numerous scientific works. The present study will also provide an opportunity to evaluate the feasibility of motor
skill training on children with DCD. Moreover, it would help to study the coordination skills of children aged 4-6 in the Khorezm region on a scientific basis and it is no exaggeration to say that the data collected will help to get a general idea of the physical condition of children in the region.

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References


