

*This information sheet has been written by Rosemary Sassoon who has specialised in the educational and medical aspects of handwriting for many years and has designed a number of fonts for children which are used worldwide for the teaching of both reading and handwriting. As a stroke survivor herself she can easily empathise with the difficulties faced by children with hemiplegia. She has written several books that may be of further help, including **Handwriting: The Way to Teach It, Handwriting Problems in the Secondary School and Understanding Strokes.***

Although computers are there to help those with serious handwriting problems, all children, however severe their difficulties, deserve to be taught to write as best they can within their capabilities. To make your mark is a basic human need. With hemiplegia, as with many other conditions, there is great variety between children. Here the main difference is between those with congenital hemiplegia, who may never have successful control over their affected hand, and those with acquired hemiplegia, who with the help of therapy may well regain the use of their natural writing hand.

Some basic rules will help all writers, starting with consideration of what is termed writing posture.

1. Make sure that the writer is seated comfortably, with both chair and table or desk at a suitable height and feet flat on the floor.
2. Make sure that the writer's paper is over to the side of the hand that is used. This is particularly important for those using their left hand. Those with only one usable hand may need some way of keeping the paper still. A string or elastic fastened round a writing board works well as then the paper can be moved easily as the writer progresses across the line and down the page.
3. Have a selection of different writing implements for the writer to experiment with – pencils, felt-tips and pens with different points, barrel sizes and lengths. There are many unusual modern pencils and pens of quite different shapes such as the Yoro pen, or their half size mini **Yoro pencil** with a soft lead. These also come in different colours and are helpful for those who use their left hand. Also try the **Penagain** range with their 'tripod' grip and other pens and pencils with unconventional shapes. It is hard to tell what will best suit a particular child.
4. Don't be too prescriptive about penhold but try and let the writer find what suits them best. Many alternative penholds work quite well.
5. A slanted surface is often a help - whether a readymade slope, of which there are plenty available commercially, or even a board resting on the writer's lap so they can adjust it to their needs. The slope supports the arm while writing and is particularly helpful if anyone suffers from a tremor.
6. Before you start with letters try some pre-writing patterns to relax the writer, help with direction etc. They are fun too, and writing should not be introduced as a chore, especially to children who face many other difficulties.
7. The most useful thing to teach any child about handwriting is the correct movement; that is where to start each letter and which way the strokes should go. Things that help:
 - explain that all letters start at the top except d and e, then introduce letters in stroke related families, not in alphabetical order.
 - a baseline may help as guidance, but two or more ruled lines might well be counterproductive as they control the size of the writer's letters.

8. It is difficult to be prescriptive about what model of letters to use. Schools have their own policies but these children may need simpler forms.
- Those who are going to have minimal use of their handwriting might be better to learn simple print script letters as they are unlikely to require the speed of joined letters.
 - Otherwise I would suggest simple letters with an exit stroke that would guide them easily onto joined letters.
 - I would suggest leaving any encouragement to join until the children are assured about the correct movement of separate letters.

Children with congenital hemiplegia

Children with congenital hemiplegia may never be able to use their affected hand. If they are lucky, their dominant hand may be the one that would be their preferred writing hand anyhow. Then your task and theirs is easier. It is also easier if the non-affected hand is the right one as our writing system goes from left to right, the easiest movement for a right hander.

More problems arise if the non-affected hand is the left one, and the child would (or might - there is no way of knowing for sure) have been naturally right-handed. These children tend to have even more problems with left to right directionality than non-disabled left-handers.

- Pattern exercises to establish movement across the page may be needed, as well as a visual reminder at first (e.g. a red arrow) of where to start the line.
- Another difficulty is that the clockwise movement will be easier for these children than an anticlockwise one. This will affect some letters, in particular the o. For these children it may be counterproductive to make them fight against their natural directionality - it is better to have a clockwise o than no o at all.

Children with acquired hemiplegia

Here there are other careful judgments to make:

- Child stroke patients may, with luck and good therapy, regain the use of their natural writing hand if that is the affected one (of course there is no problem if their non-affected one is their preferred writing hand).
- It may be counterproductive to retrain their non-affected hand if they are unlucky enough to lose, even temporarily, their preferred writing hand. This may even result in real problems later in life.
- Trying to write, starting with just name writing, with an affected hand is perhaps the best therapy and perhaps the easiest way to regain usage of the affected hand. The child (and doctor, therapist or parent) is provided with a constant, and comforting, visual feedback to reinforce progress in recovery.

Even this is not a hard and fast rule. Think about older students, further on in education, who may have a real need of writing in their school work. If they find writing with the 'other' hand relatively easy then let them for the time being, only making sure that therapy continues with their affected hand with the intention of returning to it use when practicable.

Conclusion

Over and above any preconceived ideas about what is right or wrong, be generous with praise for any effort. Do not stress the need for speed as this may cause more tension and confusion, and try to make everything as relaxing and enjoyable as possible. In the end it is all about observing the children closely, listening to what they might say about what they find difficult and, together, finding a solution. It is the only way to learn how to deal with sometimes seemingly intractable individual problems.

HemiHelp has a range of information sheets for both families where there is a child with hemiplegia and adults with the condition, as well as a Useful Names and Addresses List to help you contact other organisations.

***Hemiplegia** is a neurological condition that weakens one side of the body and affects one child in a thousand. It is sometimes described as a form of cerebral palsy and the effects are similar to those of a stroke. **HemiHelp** is a membership organisation offering information and support to children and adults affected by hemiplegia and their families.*

HemiHelp is happy for you to make photocopies of any part of this document.

Helpline: 0845 123 2372 (Mon-Fri 10am-1pm)

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