



Complete Child Assessments  
Neuro-Developmental Delay Therapy  
Remedial Listening Fitness  
Remedial Academics

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## For Parents: Answers to Frequently Asked Questions

- What is Neuro-Developmental Delay Therapy?
- How do I know whether or not it will help my child?
- How can I better understand what is going on with my child?
- What can I do to best help my child?

These are typical questions many parents ask. Let's begin by looking at symptoms. When parents observe difficulties or abnormalities in their child's development they typically seek interventions based on the child's specific symptoms. If a child has a vision (not sight) problem, parents may decide to take their child to an optometrist for vision therapy. If balance and/or gross or fine motor skills are delayed or impaired, parents may be inclined to pursue occupational therapy. Children with speech delay or enunciation difficulties typically undergo speech therapy. Yet, are the problems or the symptoms being addressed? Might the symptoms be indicators of a larger problem(s)? What if the root problem lies elsewhere? One parent wisely observed: "After considering the sensory processing disorder, auditory disorder and eye tracking problem, I began to ask myself why is [my child] so neuro atypical? The situation seemed larger than SI, auditory and eye tracking problems; I thought there must be something else going on; these conditions led me to believe I should pursue a neuro-developmental delay diagnosis in order to move forward."

Neuro-Developmental Delay (NDD) Therapy treats dysfunction that is rooted in the brain stem. At Anna's House, an NDD Assessment is much the same as in Europe (Ireland and the U.K.) in that it seeks to identify the lowest level of dysfunction and then treats that area. Once the problems have been remedied through the use of specific physical movements, it attempts to build links from lower to higher centers of the brain. The goal is to find and treat the root cause of the various symptoms. For many children, the root problem is dysfunction in the brain stem. Dysfunction in the brain stem can affect functioning of the midbrain, cerebellum and/or cortex in the brain. Therefore, if a child's root problem lies in the brain stem, this is the area that should be treated first and foremost. The brain stem is responsible for the neurons which control heart beat, blood pressure, breathing and the signals to swallow, laugh, sneeze, etc. From the brain stem comes the earliest form of movement for a child, starting in-utero and continuing through about the first year of life. Involuntary movements and primitive reflexes are stimulated in the brain stem.

There are several things you, as a parent, can do in your search for answers to your child's struggles:

1. Observe behaviors. Even if others tell you it's something your child will outgrow, rely on your instincts. You know your child better than anyone else. Observe moods, sleeping and eating habits, play activities, sensitivities, bedwetting, bathroom issues, fears, obsessive-compulsive behaviors – any and all things that seem to you to be atypical. Does your child recognize body-space or have body awareness? Is your child able to control appropriate versus inappropriate behavior? Is your child over-reactive or overly emotional? Do you see difficulties with balance and/or gross or fine motor skills? How is your child's balance not just when moving (as on a skateboard or ice skates), but also when standing still or standing on one foot? Does your child have poor hand-eye coordination? Do you observe unusual sensitivities (or lack thereof) in any of the senses, such as emotions, touch, taste, smell, sight or sound? Is your child a picky eater? Can your child process information well? Can your child follow multiple directions? What is

your child's posture like when walking, sitting, at the dinner table, while watching TV? When your child stands up straight, is the head straight and aligned with the spine or is it tilted? Do you notice articulation or enunciation problems? Does your child react negatively to certain clothes or textures? Does it seem like your child is constantly moving – fidgeting, spinning, twirling, etc.? Do you see difficulties in any areas of academics or information processing? Does your child show frustration, fatigue or lack of interest after reading for a very short time? Do you often see blood-shot eyes or eye fatigue/stress when your child reads, writes or draws? Is spelling poor in writing, but perhaps better on spelling tests? Does your child struggle with demonstrating good writing skills, i.e., simultaneously maintaining spelling, creativity, punctuation, grammar and syntax? Does your child struggle with multi-tasking? Does your child show very poor copying abilities, whether from a blackboard or from a book?

2. Categorize everything you observe: behavior, fears, listening, processing, each of the senses, balance, gross motor skills, fine motor skills, posture, speech, eye movements, hand-eye coordination, academics (note specific struggles), body space and body awareness. Ask yourself why your child might be demonstrating atypical behaviors. Does noise, light or movement trigger reactions of any kind? Does your child struggle with loss of control of physical movement or balance? Are you able to determine what might trigger atypical fears? If your child struggles academically, do you sense that it is not just a lack of understanding of a specific subject, but your gut instinct says it may be a deeper problem?

3. If you observe that your child shows only one specific area of difficulty, seek testing in that specific area. If you find difficulties in several areas, you may be observing symptoms of a larger problem. Some children show very slight dysfunction in several areas, and so initial observations are difficult, but if your child shows even slight symptoms in several areas of functioning, you may want to consider an NDD Assessment. Neuro-Developmental Delay usually manifests itself through multiple symptoms across several areas of functioning.