Dysgraphia: Signs, Assessment and Support

Dysgraphia is a specific learning disorder that affects a person's ability to write. In the DSM-5 it falls under the diagnosis of **Specific Learning Disorder, with impairment in written expression**. It can affect the physical act of forming letters by hand, the ability to organise thoughts on paper, or both. Like dyslexia and dyscalculia, dysgraphia is not related to intelligence – many people with dysgraphia are bright and articulate verbally, but struggle specifically to get their thoughts into writing.

Signs of Dysgraphia

Dysgraphia can show up in different ways. Signs are generally grouped into two categories:

Motor-Based Signs

- Poor or inconsistent letter formation, and difficulty with letter sizing and spacing
- An awkward or unusual pencil grip, or difficulty holding a pen or pencil comfortably
- Reversing letters or numbers well past the age when this is typical
- Difficulty writing in a straight line, or staying within margins
- Handwriting that is slow, effortful, or tiring to produce

Language-Based Signs

- Frequent spelling mistakes, even for familiar or previously learned words
- Grammar and punctuation errors that seem inconsistent with the child's spoken language
- Difficulty organising thoughts on paper, even when the same ideas can be explained clearly out loud
- Omitted or misordered words or letters within sentences
- Avoidance of writing tasks, or a large gap between written and verbal ability

Causes and Related Conditions

The exact cause of dysgraphia isn't fully understood, but it appears to have a genetic component and often runs in families. It frequently overlaps with other conditions, including dyslexia, ADHD and difficulties with fine motor coordination (dyspraxia). As with other specific learning disorders, a comprehensive assessment helps clarify whether dysgraphia is occurring on its own or alongside another condition that also needs to be addressed.

How is Dysgraphia Assessed?

There is no single test for dysgraphia. A diagnosis comes from putting together several kinds of information: how the person writes, how they think and learn, and how their writing compares with others of the same age. At BNC, an assessment usually includes:

1. **Initial consultation.** We talk through your concerns and take a detailed developmental, medical and educational history, including early fine motor milestones, schooling, previous support, and whether family members have had similar difficulties.
2. **Cognitive (IQ) assessment, matched to age.** We use the WPPSI-IV for younger children (up to 7 years), the WISC-V for children and teenagers aged 6 to 16, and the WAIS-IV for those aged 16 and over. This shows overall ability and a profile of strengths and weaknesses, such as working memory, processing speed and verbal reasoning, and helps show whether writing difficulties are unexpected for the person's ability.

3. **Academic achievement testing.** Standardised tests such as the WIAT measure spelling, sentence writing, essay composition and writing fluency against age or grade norms.
4. **Handwriting and visual-motor skills.** Where fine motor or letter formation concerns are present, tests such as the Beery Developmental Test of Visual-Motor Integration look at hand-eye coordination and copying skills. We also observe pencil grip, posture, speed and fatigue during writing.
5. **Review of writing samples.** School workbooks, assignments and reports show how writing looks day to day, not just on test day.
6. **Screening for related conditions.** Dysgraphia often occurs with dyslexia, ADHD or coordination difficulties (dyspraxia). We check for these, because each needs a different kind of support.
7. **Feedback and written report.** We explain the results in a feedback session and provide a detailed report with the diagnosis (if any) and practical recommendations for school, home and further support, such as occupational therapy, typing instruction or classroom accommodations.

Assessment and Support at BNC

Our psychologists provide comprehensive learning assessments for children, adolescents and adults, both in person and via Telehealth. A GP referral (Mental Health Treatment Plan or paediatrician referral) may allow you to claim a Medicare rebate for eligible sessions. Following assessment, we provide a detailed report with practical recommendations for school, home and, where relevant, occupational therapy or tutoring support. There is no medication for dysgraphia, but accommodations, targeted teaching and, where needed, remediation of handwriting or typing skills can make a substantial difference.

Frequently Asked Questions

What is dysgraphia?+

Dysgraphia is a specific learning disorder that affects a person's ability to write, whether that's the physical act of forming letters, spelling, organising thoughts on paper, or a combination of these. It falls under the DSM-5 category of Specific Learning Disorder, with impairment in written expression.

Is dysgraphia the same as having messy handwriting?+

Not necessarily. Many people have messy handwriting without dysgraphia. Dysgraphia involves a persistent, unexpected difficulty with writing that is out of step with a person's overall ability and doesn't improve significantly with typical practice.

What is the difference between dysgraphia and dyslexia?+

Dyslexia primarily affects reading and language processing, while dysgraphia primarily affects writing. The two frequently co-occur, and a person can have signs of one, the other, or both, which is why a broad assessment is often recommended.

At what age can dysgraphia be diagnosed?+

Signs can appear once a child starts learning to write, but a formal diagnosis usually follows standardised assessment once handwriting and written expression have been taught at school for a period of time, typically from around age 7 onwards.

Can dysgraphia be treated?+

There is no medication for dysgraphia, but occupational therapy for handwriting mechanics, targeted writing instruction, and classroom accommodations such as extra time or use of a keyboard can significantly improve outcomes.

Does Medicare cover a dysgraphia assessment?+

With a referral from a GP or paediatrician, eligible clients may be able to claim a Medicare rebate for a portion of psychology sessions under a Mental Health Treatment Plan. Contact our clinic for current details on assessment fees and rebates.

What should we bring to a dysgraphia assessment?+

Please bring recent school reports, NAPLAN results, a selection of school workbooks or written assignments, and any previous reports from occupational therapists, speech pathologists or other psychologists. If your child wears glasses, please bring them too.

Can adults be assessed for dysgraphia?+

Yes. Many adults were never assessed at school and still find writing slow, effortful or hard to organise. An adult assessment follows the same process, using adult tests such as the WAIS-IV and a history of schooling and work.

Do I need a referral?+

No referral is needed to book an assessment. A referral from a GP or paediatrician is only needed if you want to check whether a Medicare rebate may apply.

Can a dysgraphia report help with school or exam support?+

Yes. The report's recommendations can support classroom adjustments, such as extra time, use of a keyboard, reduced copying or alternative ways to show learning. For senior students, it can support applications for VCAA Special Examination Arrangements.

Can a dysgraphia assessment be done by telehealth?+

Parts of the assessment, such as the history and feedback session, can be done by telehealth. Handwriting, fine motor and visual-motor tasks are usually best done in clinic, so we can see how the person writes.

Is dysgraphia assessed by a psychologist or an occupational therapist? +

Both can play a part. A psychologist diagnoses Specific Learning Disorder with impairment in written expression, using cognitive and achievement testing. An occupational therapist may assess and treat the motor side of handwriting. Our report will say whether an OT referral is recommended.

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