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Suzanne DeChillo/The New York Times

GETTING A FEEL Deirdre Madden helps a student with handwriting.

By PEG TYRE Published: February 24, 2010

NOAH LASCANO, 8, had a problem: His teachers couldn't read his handwriting. His homework became a frustrating exercise in writing once, and then, at the teacher's request, writing again, just for legibility.

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Deirdre Schoo for The New York Times WARM UP Noah Lascano, 8, prepares

His brother, James, 5, was struggling in kindergarten — even drawing stick figures was a task. When his mother, Paula Lascano, tried to cajole him into completing a few workbook assignments, he reported that "his hand got too tired."

Like many parents, Ms. Lascano decided it was time for help, so 10 months ago she hired Casey Halper, a pediatric occupational therapist, to work first with James, and then with Noah, once a week. The boys manipulated stiff green putty, put pegs into boards, created chains of pennies and plastic connectors and wrote the alphabet — again and again.

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for a writing session with a pediatric occupational therapist; teachers couldn't read his homework.

These days, many little fingers are being drilled. Twenty-five years ago, pediatric occupational therapists primarily served children with severe disabilities like [spina bifida](#), [autism](#) or [cerebral palsy](#). Nowadays, these therapists are just as focused on helping children without obvious disabilities to hold a pencil.

In affluent neighborhoods in and around New York, occupational therapists have taken their place next to academic tutors, [psychologists](#), private coaches and personal trainers — the army that often stands behind academically successful students.

Tim Nanof, legislative manager for the American Occupational Therapy Association, which has 38,000 members, said it's hard to know exactly how many children are receiving these services. But parents, pediatricians, educators and early childhood experts agree that plenty of able-bodied children are receiving occupational therapy.

"Twenty years ago, you could find O.T.'s working with children at [hospitals](#) or schools for the blind or the deaf," said Christine Berg, who oversees the curriculum for the Program in Occupational Therapy at the [Washington University](#) School of Medicine in St. Louis. "Now, many pediatric O.T.'s see their role as promoting fitness and enhancing kids' performance in school."

Pediatric occupational therapy may be something like Pilates for the pint-size set — a regime of techniques that promise to bestow unique benefits on the practitioner. Or, like the increase in neuropsychological testing and in the use of drugs to enhance a child's attention, the increase in therapy could suggest something may have gone awry in schools, in our level of academic expectations or perhaps in childhood itself.

"On one hand, I think it's perfectly in line with the contemporary trend for parents and educators to seek high-priced specialists to treat the routine problems of childhood," said Dr. Philippa Gordon, a popular pediatrician in Park Slope, Brooklyn, who is a medical adviser to the highly opinionated Park Slope Parents Web site. "On the other hand, I see that early intervention can keep little problems from becoming big ones."

Linda Florin, who runs a private concierge service in Manhattan, paid a therapist \$125 a week for nearly three years to help her son, Wyatt, now a first grader at Columbia Prep, improve his hand strength and control a pencil. She says it was money well spent. "School isn't easy and it gets harder as they get older," Ms. Florin said. "I wanted him to be able to keep up with everyone else."

She also said the stigma is gone: "Back when I was a child, seeing an O.T.? Forget it. That was for kids who had spinal cord injuries." Last year, she said, so many friends from her social circle were taking their children to occupational therapists that it seemed like a part of normal childhood.

"Seeing an O.T. was once an admission that something was seriously wrong with your child," said Paula McCreedy, who, with her partner, Prudence Heisler, opened a branch of their busy Greenwich Village practice in Brooklyn Heights in part to meet the growing demand of private paying families seeking therapy. These days, she said, "many parents are finding that pediatric occupational therapists can help their children to be the best that they can be."

In Manhattan, the brutally competitive nursery and kindergarten admissions process is leading many parents to sign up their toddlers for therapy. "Preschool admissions tests loom large," said Margie Becker-Lewin, an occupational therapist on the Upper West Side.



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“In many cases, parents know there is nothing wrong with their child, but they feel caught in the middle.”

Their child might be exhibiting a minor fine-motor delay at a play group, she added, “and the parents understand that as the children get involved in the admissions process that there is not as much tolerance for a range of abilities as there once was.”

One father on the Upper East Side said [anxiety](#) about his son’s grip — his 3-year-old holds crayons in his fist — propelled him to seek therapy.

“The nursery admission people tell you they want your child to be ready to learn how to write,” said the father, who spoke anonymously so his son wouldn’t run afoul of nursery school administrators. “And I knew they would take one look at the way my son held a crayon and he’d be out of the running.”

The father pointed out that many families use occupational therapists to help their children gain admission to elite schools. “Even with the economy like it is, the hottest question when we socialized at our country house this summer was not what country club do you belong to, but who is your child’s O.T. back in the city. And how can I get an appointment?”

For some grade-school children, occupational therapists are also filling the void left by schools, many of which no longer provide instruction on the mechanics of handwriting. According to a survey conducted by the American Occupational Therapy Association, about 30 percent of their members now work in schools, up from 18.6 percent in 1999. Those therapists, said Ms. Berg of Washington University, tend to spend the bulk of their time helping children write legibly.

“Many teachers don’t know how to do it,” Ms. Berg said. “O.T.’s can help.”

Linda Tulloch waited in vain for teachers at the North Street School, a public elementary school in Greenwich, Conn., to provide her son, Jack, now a fifth grader, with handwriting instruction. “As early as second grade I could see he needed help shaping his letters and numbers,” she said.

But Jack’s teachers told her that handwriting was old school and that students would wield a keyboard, not a pencil. “That didn’t sit well with me,” Ms. Tulloch said. “Kids can’t use a keyboard to take a test or do math.” Ultimately, Ms. Tulloch hired a tutor, who uses a handwriting program, Handwriting Without Tears, designed by an occupational therapist.

Steve Sanders, director of the University of South Florida School of Physical Education and Exercise Science, also points to ramped-up expectations. “I’d say schools that push serious academics into kindergarten and pre-school — and emphasize sitting at desks and learning — are creating some of this problem,” he said.

But Anthony DiCarlo, the longtime principal of the William E. Cottle Elementary School in Tuckahoe, N.Y., a suburb north of Manhattan, said that many children are experiencing delays in their fine and gross motor skills.

“Almost all our kids come into kindergarten able to recite their letters and their numbers,” Mr. DiCarlo said. “Some can even read. But in the last five years, I’ve seen a dramatic increase in the number of kids who don’t have the strength in their hands to wield a scissors or do arts and crafts projects, which in turn prepares them for writing.”

Many kindergartners in his community, he said, have taken music appreciation classes or

participated in adult-led sports teams or [yoga](#). And most have also logged serious time in front of a television or a computer screen. But very few have had unlimited opportunities to run, jump and skip, or make mud pies and break twigs. "I'm all for academic rigor," he said, "but these days I tell parents that letting their child mold clay, play in the sand or build with Play-Doh builds important school-readiness skills, too."

The problem has become so acute that two years ago, Mr. DiCarlo hired a full-time occupational therapist to work with the 500 students in his elementary school. The therapist, Deirdre Madden, spends 40 percent of her day with children who have diagnosed disabilities, and the rest of her time improving the fine motor skills and muscle control of the rest of the students.

"In my previous job I was working with children who had much more severe disabilities, and I couldn't really see what role I'd have in a regular school," Ms. Madden said. "But it turns out that many of the children here needed more support. And I'm only too happy to help."

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