This chapter has a chart, 7 pages long, to help you find out what disability a child possibly has, and where to look up that disability in this book.

In the first column of the chart, we list the more noticeable signs of different disabilities. Some of these signs are found in more than one disability. So in the second column we add other signs that can help you tell apart similar disabilities. The third column names the disability or disabilities that are most likely to have these signs. And the fourth column gives the page numbers where you should look in this book. (Where it says WTND and then a number, this refers to the page in Where There Is No Doctor.)

If you do not find the sign you are looking for in the first column, look for another sign. Or check the signs in the second column.

This chart will help you find out which disabilities a child might have. It is wise to look up each possibility. The first page of each chapter on a disability describes the signs in more detail.

**IMPORTANT:** Some disabilities can easily be confused. Others are not included in this book. When you are not sure, try to get help from someone with more experience. At times, specific tests or X-rays may be needed to be sure what the condition is.

Fortunately, it is not always necessary to know exactly what disability a child has. For example, if a child has developed weakness in his legs and you are not sure of the cause, you can still do a lot to help him. Read the chapters on disabilities that cause similar weakness, and the chapters on other conditions that the child may have. For this child, you might find useful information in the chapters on contractures, exercises, braces, walking aids or wheelchairs, and many others.

Sometimes it is important to identify the specific disability. Some disabilities require specific medicines or foods—for example, night blindness, rickets, or hypothyroidism. Others urgently need surgery—for example, spina bifida or cleft lip and palate. Others require specific ways of doing therapy or exercises—for example, cerebral palsy. And others need specific precautions to avoid additional problems—for example, spinal cord injury and leprosy. For this reason, it helps to learn as much about the disability as you can. Whenever possible, seek information and advice from more experienced persons. (However, even experts are not always right. Do not follow anyone’s advice without understanding the reasons for doing something, and considering if and why the advice applies to the individual child.)

In addition to this chart, 2 other guides for identifying disabilities are in this book:

- GUIDE FOR IDENTIFYING CAUSES OF JOINT PAIN, p. 130.
- GUIDE FOR IDENTIFYING AND TREATING DIFFERENT FORMS OF SEIZURES (EPILEPSY), p. 240.
# GUIDE FOR IDENTIFYING DISABILITIES

## SIGNS PRESENT AT OR SOON AFTER BIRTH

<table>
<thead>
<tr>
<th>IF THE CHILD HAS THIS</th>
<th>AND ALSO THIS</th>
<th>HE MAY HAVE</th>
<th>SEE PAGE</th>
</tr>
</thead>
</table>
| born weak or "floppy" | • often a difficult birth  
• delayed breathing  
• born blue and limp  
• or born before 9 months and very small | cerebral palsy  
developmental delay | 87  
277 |
| takes longer to begin to lift head or move arms | • round face  
• slant eyes  
• thick tongue | Down syndrome  
hypothyroidism | 279  
282 |
| | • small head, or small top part of head | microcephalia (small head)  
cognitive delay | 278 |
| | none of above | developmental delay  
for other reasons | 289 |
| does not suck well or chokes on milk or food | • pushes milk back out with tongue or will not suck | cerebral palsy | 87 |
| | • cannot suck well  
• chokes or milk comes out nose | check for cleft palate  
possibly severe cognitive delay | 120  
277 |
| one or both feet turned in or back | no other signs | club foot | 114 |
| | • hands weak, stiff or clubbed  
• some joints stiff, in bent or straight positions | arthrogryposis | 122 |
| | dark lump on back | spina bifida | 167 |
| bag or dark lump on back | • clubbed feet  
• or feet bend up too far  
• or feet lack movement and feeling | spina bifida  
(sometimes no ‘bag’ is seen, but foot signs may be present) | 167 |
| head too big; keeps growing | may develop:  
• eyes like setting sun  
• increasing mental and/or physical disability  
• loss of vision | hydrocephalus (water on the brain)  
At birth, this is usually a sign of spina bifida.  
in an older child, possibly tapeworm in brain, or a brain tumor | 169  
167  
WTND 143 |
| upper lip and/or roof of mouth incomplete | • difficulty feeding  
• later, speech difficulties | cleft lip and cleft palate | 120 |
| disabilities at birth, limbs, fingers or toes not typical | (may or may not be associated with other conditions) | See  
• disabilities present at birth  
• amputations  
• Down syndrome  
• developmental delay | 119  
227  
279  
287 |
| unusual stiffness or position | • from birth  
• some muscles weak  
• some joints stiff  
• typical head control and mind  
• Muscles tighten more in certain positions.  
• may grip thumb tightly | arthrogryposis  
spastic cerebral palsy  
Note: muscle tightness (spasticity) usually does not appear until weeks or months after birth. | 122  
89 |
### IF THE CHILD HAS THIS AND ALSO THIS

<table>
<thead>
<tr>
<th>Condition</th>
<th>Description</th>
<th>Possible Causes</th>
<th>See Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>One arm weak or in strange position</td>
<td>Does not move the arm much, leg on same side often affected</td>
<td>Erb's palsy (weakness from injury to nerves in shoulder during birth)</td>
<td>127</td>
</tr>
<tr>
<td>Dislocated hip at birth</td>
<td>On opening legs like this, leg &quot;pops&quot; into place or does not open as far.</td>
<td>Dislocated hip from birth (often both hips) may be present with:</td>
<td>155</td>
</tr>
<tr>
<td>Slow to respond to sound or to look at things</td>
<td>(May be due to one or a combination of conditions)</td>
<td>Check for signs of:</td>
<td>287</td>
</tr>
</tbody>
</table>

### SIGNS IN CHILDREN WELL PAST BIRTH

<table>
<thead>
<tr>
<th>Condition</th>
<th>Description</th>
<th>Possible Causes</th>
<th>See Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Takes longer than other children to do things (roll, sit, use hands, show interest, walk, talk)</td>
<td>Delayed in most or all areas:</td>
<td>Developmental delay, check for signs of:</td>
<td>287</td>
</tr>
<tr>
<td></td>
<td>• Round face</td>
<td>Down syndrome</td>
<td>279</td>
</tr>
<tr>
<td></td>
<td>• Slant eyes</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Single deep crease in hand</td>
<td>Hypothyroidism</td>
<td>282</td>
</tr>
<tr>
<td>Does not respond to sounds, does not begin to speak by age 3</td>
<td>May respond to some sounds but not others</td>
<td>Check for ear infection (pus).</td>
<td>257</td>
</tr>
<tr>
<td>Does not turn head to look at things until they touch her</td>
<td>Eyes may or may not look typical.</td>
<td></td>
<td>243</td>
</tr>
<tr>
<td>Eyelids or eyes make quick, jerky, or strange movements.</td>
<td>Check for one or a combination of these</td>
<td></td>
<td>243</td>
</tr>
</tbody>
</table>

### Additional Notes
- Erb's palsy (weakness from injury to nerves in shoulder during birth).
- Hemiplegic (one-sided) cerebral palsy.
- Developmental delay, check for signs of: Down syndrome.
- Hypothyroidism.
- Cerebral palsy.
- Loss of vision.
- Hearing loss.
- Seizures.
- Too much medicine.
- Cerebral palsy.
- Other conditions that affect or cause brain injuries.

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*DISABILITY GUIDE* 2022

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*www.hesperian.org health guides*
### CHAPTER 6

#### PARTS OF BODY WEAK OR PARALYZED

<table>
<thead>
<tr>
<th>IF THE CHILD HAS THIS</th>
<th>AND ALSO THIS</th>
<th>HE MAY HAVE</th>
<th>SEE PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>All or part of body makes strange, uncontrolled movements.</td>
<td>• begins suddenly, child may fall or lose consciousness • typical movements and behaviors between seizures</td>
<td>epileptic seizures (Pattern varies a lot in different children—or even in the same child.)</td>
<td>233</td>
</tr>
<tr>
<td></td>
<td>slow sudden, or rhythmic movements fairly continuous (except in sleep); no loss of consciousness</td>
<td>athetoid cerebral palsy (Note: Seizures and cerebral palsy may occur in the same child.)</td>
<td>89</td>
</tr>
<tr>
<td>Body, or parts of it, stiffens when in certain positions; poor control of some or all movements.</td>
<td>• different positions in different children • Body may stiffen backward and legs cross.</td>
<td>spastic cerebral palsy</td>
<td>89</td>
</tr>
</tbody>
</table>

#### PARTS OF BODY WEAK OR PARALYZED

<table>
<thead>
<tr>
<th>IF THE CHILD HAS THIS</th>
<th>AND ALSO THIS</th>
<th>HE MAY HAVE</th>
<th>SEE PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>floppy or limp weakness in part or all of body</td>
<td>• usually began with a bad cold and fever before age 2 • irregular pattern of parts weakened. Often one or both legs—sometimes arm, shoulder, hand, etc.</td>
<td>polio</td>
<td>59</td>
</tr>
<tr>
<td>no loss of feeling in affected parts no spasticity (muscles that tighten without control) typical at birth</td>
<td>• begins little by little and steadily gets worse • about the same on both sides of body • often others in the family also have it</td>
<td>muscular dystrophy • muscular atrophy</td>
<td>109 112</td>
</tr>
<tr>
<td></td>
<td></td>
<td>tick paralysis</td>
<td>not in book</td>
</tr>
<tr>
<td></td>
<td>Paralysis starts in legs and moves up; may affect whole body. • or pattern of paralysis variable</td>
<td>Guillain-Barré syndrome (usually temporary) paralysis from pesticides, chemicals, foods (lathyrism)</td>
<td>62 15</td>
</tr>
<tr>
<td></td>
<td>lump on back (see p. 57)</td>
<td>tuberculosis of spine</td>
<td>165</td>
</tr>
<tr>
<td>floppy or limp weakness usually some loss of feeling</td>
<td>• one or both hands or feet • develops slowly in older child. Gets worse and worse.</td>
<td>leprosy</td>
<td>215</td>
</tr>
<tr>
<td></td>
<td>• born with bag on back (Look for scar.) • feet weak, often without feeling</td>
<td>spina bifida</td>
<td>167</td>
</tr>
<tr>
<td></td>
<td>usually from back or neck injury • weakness, loss of feeling below level of injury • may or may not have muscle spasms • loss of bladder and bowel control</td>
<td>spinal cord injury paraplegia (lower body) quadriplegia (upper and lower body)</td>
<td>175</td>
</tr>
<tr>
<td></td>
<td>injury to nerves going to one part of body</td>
<td>hand weakness sometimes caused by using crutches wrongly</td>
<td>393</td>
</tr>
</tbody>
</table>
**JOINT PAIN**

<table>
<thead>
<tr>
<th>IF THE CHILD HAS THIS</th>
<th>AND ALSO THIS</th>
<th>HE MAY HAVE</th>
<th>SEE PAGE</th>
</tr>
</thead>
</table>
| one or more painful joints | • begins with or without fever  
• gradually gets worse, but there are better and worse periods | juvenile arthritis | 135 |

Other causes of joint pain. See chart on joint pain. 130

**WALKS WITH DIFFICULTY OR LIMPS**

<table>
<thead>
<tr>
<th>IF THE CHILD HAS THIS</th>
<th>AND ALSO THIS</th>
<th>HE MAY HAVE</th>
<th>SEE PAGE</th>
</tr>
</thead>
</table>
| dips to one side with each step | one leg often weaker and shorter  
• usually begins age 4 to 8  
• may complain of knee pain | damaged hip joint | 157 |
| walks with knees pressed together | • muscle spasm and tightness  
• upper body little affected | spastic diplegic or paraplegic cerebral palsy | 87 |
| stands and walks with knees together and feet apart | feet less than 3” apart at age 3 | typical from ages 2 to 12 | 113 |
| no other problems | feet more than 3” apart at age 3 | knock-knees | 114 |
| walks awkwardly with one foot tiptoe | muscle spasms and poor control on that side. Hand on that side often affected. | hemiplegic cerebral palsy | 90 |
| walks awkwardly with knees bent and legs usually separated | • jerky steps, poor balance  
• sudden, uncontrolled movements that may cause falling  
• slow “drunken” way of walking  
• learns to walk late and falls often | athetoid cerebral palsy | 89 |
| walks with both feet tiptoe | • weakness, especially in legs and feet  
• gradually gets worse and worse  
• legs and feet stiffen (spasticity of muscle)  
• no other problems | muscular dystrophy  
spastic cerebral palsy  
typical? (some children at first walk on tiptoes) | 109  
89  
292 |
### IF THE CHILD HAS THIS AND ALSO THIS

<table>
<thead>
<tr>
<th>IF THE CHILD HAS THIS</th>
<th>AND ALSO THIS</th>
<th>HE MAY HAVE</th>
<th>SEE PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>walks with hand(s) pushing thigh(s) or with knee(s) bent back</td>
<td>weak thigh muscle</td>
<td>polio, muscular dystrophy, arthritis (joint pain), other causes of muscle weakness</td>
<td>59, 109, 135, 112</td>
</tr>
<tr>
<td>Foot hangs down weakly (foot drop)</td>
<td>Child lifts foot high with each step so that it will not drag.</td>
<td>polio, spina bifida, muscular dystrophy, muscular atrophy, nerve or muscle injury, other cause of weakness</td>
<td>59, 167, 109, 112, 35</td>
</tr>
<tr>
<td>dips from side to side with each step due to muscle weakness at side of hips, or double dislocated hips, or both</td>
<td>polio, cerebral palsy, spina bifida, Down syndrome, muscular dystrophy, child who stays small, arthrogryposis, dislocated hips (may occur with any of the above)</td>
<td>59, 87, 167, 279, 109, 126, 122, 155</td>
<td></td>
</tr>
<tr>
<td>walks with one (or both) hip, knee, or ankle that stays bent joints cannot be slowly straightened when child relaxes (see p. 79).</td>
<td>contractures (shortened muscles), joined or fused joints may be secondary to: polio, joint infection, other causes</td>
<td>77, 80, 59, 131, 231</td>
<td></td>
</tr>
<tr>
<td>Knees wide apart when feet together (bow legs). Waddles or dips from side to side (if he walks). under 18 months old</td>
<td>Any combination of these: Joints look big or thick. Child is short for age. Bones weak, bent, or break easily. Arms and legs may seem too short for body, or “out of proportion.” Belly and butt stick out a lot.</td>
<td>rickets (lack of vitamin D and sunlight), brittle bone disease, children who stay very short (dwarfism), hypothyroidism, Down syndrome, dislocated hips</td>
<td>125, 125, 126, 282, 279, 155</td>
</tr>
<tr>
<td>flat feet no pain or other problems</td>
<td>typical in many children</td>
<td>may be part of: cerebral palsy, polio, spina bifida, Down syndrome</td>
<td>113, 87, 59, 167, 279</td>
</tr>
</tbody>
</table>

### BACK CURVES AND DEFORMITIES

<table>
<thead>
<tr>
<th>IF THE CHILD HAS THIS</th>
<th>AND ALSO THIS</th>
<th>HE MAY HAVE</th>
<th>SEE PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>sideways curve of backbone</td>
<td>When child bends over, look for a lump on one side. scoliosis—may occur alone or as complication of: polio, cerebral palsy, muscular dystrophy, spina bifida, other physical disability</td>
<td>59, 87, 109, 167, 162</td>
<td>59, 87, 109, 167, 162</td>
</tr>
</tbody>
</table>
### IF THE CHILD HAS THIS AND ALSO THIS

**sway back (lordosis)**
- belly often sticks out
- may be due to contractures here, or weak stomach muscles

**lordosis**—may occur in:
- polio
- spina bifida
- cerebral palsy
- muscular dystrophy
- Down syndrome
- hypothyroidism
- child who stays small
- many other disabilities

** SEE PAGE **
- 59
- 167
- 87
- 109
- 279
- 282
- 126
- 161

**rounded back (kyphosis)**
- starts slowly and without pain
- often family history of tuberculosis
- may lead to paralysis of lower body

**kyphosis**—often occurs with:
- arthritis
- spinal cord injury
- severe polio
- brittle bone disease

** SEE PAGE **
- 136
- 175
- 59
- 125

**hard, sharp bend of or bump in backbone**
- present at birth
- sometimes only a soft or slightly swollen area over spine
- weakness and loss of feeling in feet or lower body

**tuberculosis of the spine**
- 165

**dark soft lump over backbone**
- born that way
- accidental or surgical loss of limbs (amputation)
- gradual loss of fingers, toes, hands, or feet, often in persons who lack feeling
- may occur with:
  - polio
  - cerebral palsy
  - spina bifida
  - muscular dystrophy
  - Down syndrome
  - hypothyroidism
  - child who stays small
  - many other disabilities

**born with missing or incomplete parts**
- amputations
- osteomyelitis (bone infections)
- leprosy (hands or feet)
- spina bifida (feet only)

** SEE PAGE **
- 121
- 227
- 159
- 215
- 167

**hand problems**
- may occur with:
  - polio
  - muscular dystrophy
  - muscular atrophy
  - spinal cord injury (at neck level)
  - leprosy
  - damage to nerves or cords of arms
  - All may lead to contractures.

**floppy paralysis (no spasticity)**
- without care may lead to contractures so that fingers cannot be opened

**spastic cerebral palsy**
- may lead to contractures

** SEE PAGE **
- 59
- 109
- 112
- 175
- 215
- 127
- 89
- 231

**burn scars and deformities**
- may lead to contractures

** SEE PAGE **
- 231

**clubbing or bending of feet**
- may begin as floppy weakness and become stiff from contractures, if not prevented
- may occur with many physical disabilities, including:
  - polio
  - cerebral palsy
  - spina bifida
  - muscular dystrophy
  - arthritis
  - spinal cord injury

** SEE PAGE **
- 59
- 87
- 167
- 109
- 135
- 175

### OTHER DEFORMITIES

**missing body parts**
- born that way
- accidental or surgical loss of limbs (amputation)
- gradual loss of fingers, toes, hands, or feet, often in persons who lack feeling

**may occur with**:
- polio
- muscular dystrophy
- muscular atrophy
- spinal cord injury (at neck level)
- leprosy
- damage to nerves or cords of arms
- All may lead to contractures.

** SEE PAGE **
- 59
- 109
- 112
- 175
- 215
- 127
- 89
- 231

**hand problems**
- may occur with:
  - polio
  - muscular dystrophy
  - muscular atrophy
  - spinal cord injury (at neck level)
  - leprosy
  - damage to nerves or cords of arms
  - All may lead to contractures.

** SEE PAGE **
- 59
- 109
- 112
- 175
- 215
- 127
- 89
- 231

**burn scars and deformities**
- may lead to contractures

** SEE PAGE **
- 231

**clubbing or bending of feet**
- may occur with many physical disabilities, including:
  - polio
  - cerebral palsy
  - spina bifida
  - muscular dystrophy
  - arthritis
  - spinal cord injury

** SEE PAGE **
- 59
- 87
- 167
- 109
- 135
- 175
# Disabilities that Often Occur with or Are Secondary to Other Disabilities

<table>
<thead>
<tr>
<th>IF THE CHILD HAS THIS</th>
<th>AND ALSO THIS</th>
<th>HE MAY HAVE</th>
<th>SEE PAGE</th>
</tr>
</thead>
</table>
| **Developmental delay:** | caused by slow or incomplete brain function or by severe physical disability, or both | often seen in: | 277  
| | child takes longer to learn to use her body or develop basic skills | • cognitive delay  
| | | • cerebral palsy  
| | | • children with severe or multiple disabilities | 87  
| | caused by overprotection: treating children like babies when they could do more for themselves | some delay can occur with almost any disability or lack of stimulation | 283  
| **Contractures** | • usually due to muscle weakness or spasticity  
| | • Often, muscles that pull a joint one way are much weaker than those that pull it the other way (muscle imbalance). | often secondary to: | 59  
| | joints that no longer straighten because muscles have shortened | • polio  
| | Joints will not straighten | • cerebral palsy  
| | | • spina bifida  
| | | • arthritis  
| | | • muscular dystrophy  
| | | • Erb’s palsy  
| | | • amputations  
| | | • leprosy  
| | sometimes due to scarring from burns or injuries | behavior problems are common with: | 233  
| | | • cognitive delay  
| | | • seizures (epilepsy)  
| | | • cerebral palsy  
| | | and for emotional reasons, with: | 87  
| | | • spinal cord injury  
| | | • muscular dystrophy  
| | | • hearing loss  
| | | • learning disability  
| **Behavior problems** | behavior problems may come from: | learning disability | 231  
| | • brain injury  
| | • difficulty understanding things  
| | • overprotection  
| | • difficult home situation | 277  
| | (Some children with epilepsy from brain injury may pull out hair, bite themselves, etc.) | 233  
| **Slow to learn certain things, otherwise typical development** | • often over-active or nervous  
| | • sometimes behavior problems | **Main disability** | 365  
| | **Speech and communication difficulty** | learning disability | 267  
| | • often, but not always, due to hearing loss or cognitive delay (or both)  
| | • Some children can hear well and are but still cannot speak. | **Common secondary disabilities** | 257  
| | | may occur with: | 233  
| | | • hearing loss  
| | | • developmental delay  
| | | • cerebral palsy  
| | | • Down syndrome  
| | | • hypothyroidism  
| | | • children who stay small  
| | | • brittle bone disease  
| | | • cleft lip and palate  
| | | (Hearing loss may occur together with these and other disabilities.) | 287  
| | | 279  
| | | 252  
| | | 126  
| | | 125  
| | | 215  
|  | other disabilities that sometimes occur secondary to other disabilities  
| | (Some of these we have already included in this chart.) | **Common secondary disabilities** | 175  
| | **Main disability** | **Common secondary disabilities** | 109  
| | • cerebral palsy  
| | **other disabilities that sometimes occur secondary to other disabilities** | • vision loss  
| | (Some of these we have already included in this chart.) | • hearing loss  
| | • many disabilities with paralysis | • seizures  
| | **Main disability** | • spinal curve  
| | • persons who have lost feeling: leprosy, spinal cord injury, spina bifida | • pressure sores  
| | | • osteomyelitis (bone infection)  
| | | • loss of urine and bowel control | 195  
| | | 159  
| | | 203  

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**Notes:**
- **Developmental delay:** Often seen in cognitive delay, cerebral palsy, and children with severe or multiple disabilities.
- **Contractures:** Often secondary to conditions like cerebral palsy, spina bifida, polio, and severe physical disabilities.
- **Behavior problems:** Common with cognitive delay and seizures (epilepsy), and can occur for emotional reasons with spinal cord injury, muscular dystrophy, hearing loss, and learning disability.
- **Slow to learn certain things, otherwise typical development:** Often over-active or nervous, sometimes behavior problems.
- **Speech and communication difficulty:** May occur with hearing loss, developmental delay, and other conditions like Down syndrome, hypothyroidism, and bone infections.

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**Additional Resources:**
- Hesperian's Disability Guide: [www.hesperian.org](http://www.hesperian.org)