## **Early Intervention Center**

for Autism and Developmental Disorders



**مركـز التـدخـل الـمـبـكــر** للتـوحـّد واضطرابـات الـنـمـــو

**Director's Report on Developmental Progress Assessment** 

Date of Visit: 13-05-2025 Child's Name: Khamis Harib Date of Birth: 24-04-2016 Age: 9 years, 1 month

Gender: Male Guardian: Harib

### **Overview:**

Khamis-Harib was assessed for cognitive and developmental concerns. The child presents with clear signs of information processing delays and developmental delays. These have resulted in observable learning difficulties, challenges with reading and writing consistent with features of dyslexia, and attention-related issues which make it difficult for him to stay on task or follow through with instructions in traditional classroom environments.

It is important to note that while these signs may be associated with known attention-related conditions, no formal labeling or diagnosis is being applied here, especially to avoid any impact on the child's academic record. The focus remains on providing support and structured strategies to ensure success both academically and developmentally.

## Recommendations for Academic Support (Arabic & English Subjects):

- Extended Time: The child should be granted extra time during both classwork and examinations for all Arabic and English subjects to reduce stress and allow for processing time.
- **Oral Examinations:** Whenever possible, the child should be evaluated through oral responses rather than written tests. This applies especially in subjects that involve comprehension or composition.
- **Simplified Instructions:** Instructions in both Arabic and English should be broken down into simple steps and delivered verbally and visually to enhance understanding.
- Use of Assistive Reading Tools: The child may benefit from reading assistance tools (text-to-speech, large font, color overlays) to help with decoding text and improving reading fluency.
- **Modified Homework Assignments:** Assignments should be adapted in length and structure. Instead of lengthy written assignments, short bullet-point responses or verbal explanations may be used.
- **Seating and Classroom Engagement:** The child should sit near the teacher and away from windows or distractions. Short, clear verbal prompts should be used to maintain his focus.
- **Routine Breaks:** He should be allowed short, structured breaks between tasks to manage restlessness and refocus his attention.
- **Consistent Positive Reinforcement:** Encouragement and visual progress charts should be used to keep him motivated and celebrate small achievements.



## **Recommended Plan:**

## 1. Development Protocol for Information Processing:

- Continue the tailored protocol for 4 months.
- Reevaluate in person to measure progress and update the intervention strategy.
- A new developmental baseline will be established at the follow-up.

## 2. Recommended Tests through Neurazon (Canada):

- Precision Health Analysis Neurazon (Canada)
  - Saliva sample
  - o Estimated turnaround: 4 months (business days)
  - To identify biological and genetic factors contributing to the child's challenges.
- Neuronal Growth Factors Analysis Neurazon (Canada)
  - Hair sample
  - Estimated turnaround: 2 months (business days)
  - o To evaluate absorption and brain developmental support.
- Gut Intolerance Analysis Neurazon (Canada)
  - Hair sample
  - Estimated turnaround: 2 months (business days)
  - To assess whether food sensitivities or gut-related issues are affecting focus and behavior.

### 3. Recommended Therapy:

• Intensive neuroplasticity rehabilitation therapy: 2–3 sessions per week are advised to support brain plasticity and reinforce information processing skills.

#### **Conclusion:**

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Khamis-Harib has identifiable strengths and clear potential to succeed with the right accommodations. His difficulties with focus, retention, and learning are rooted in underlying neurological and processing delays that are being addressed through therapy and structured planning. With continued support, regular follow-up, and school accommodations, he is expected to show notable improvement.

This is a developmental assessment and not a final diagnosis. Adjustments to the plan will be made based on progress.

**Center's Leading Staff:** 

Speech Therapist: Ms. Amira Alomari

Occupational Therapist: Ms. Malak Jaber

Psychologist and behaviour therapist: Ms. Asmaa Alshanawi

**EICADD Center Director** 

