



Identifying Children with Developmental Coordination Disorder Using Motor Imagery-based Functional Connectivity Features

基於運動想像任務的功能性連接特徵辨識發展協調障礙兒童

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1 Background

Developmental Coordination Disorder (DCD) affects approximately 5-6% of school-aged children, leading to poor motor skills and impairing daily life activities. Traditional diagnosis methods rely heavily on behavioral assessments, such as the Movement Assessment Battery for Children (M-ABC₂)[1], which lack a neuroscience-based foundation. Recent research has confirmed that Motor Imagery (MI) training can help children with DCD improve their motor skills. Concurrently, Brain-Computer Interface (BCI)[2] have emerged as innovative diagnostic in neurodevelopmental disorder research, and EEG-based functional connectivity analysis[3] represents a promising approach within these frameworks.

Keywords:

- Developmental Coordination Disorder
- Motor Imagery based Brain-Computer Interface
- Functional Connectivity

2 Objectives

This study aims to:

1. Develop a MI-BCI system for identifying children with DCD
2. Validate the efficacy of Motor Imagery-based Functional Connectivity as a discriminative feature in TD/DCD classification
3. Establish a neuroscience-informed, objective diagnostic methodology for DCD

3 Methodology

Participants

- 57 TD (M-ABC₂: 78.6±7.4), 23 DCD (M-ABC₂: 48.0±12.7)
- Age: TD (10.4±0.9), DCD (10.3±0.7)
- Ethically approved by NTHU IRB (11004HT042)

EEG Data Collection

- equipment: Curry 8, Neuroscan Synamps 2, 30-channel Quik-Cap
- Sampling rate: 1000 Hz, 24-bit A/D conversion

Figure 1. Experimental Paradigm

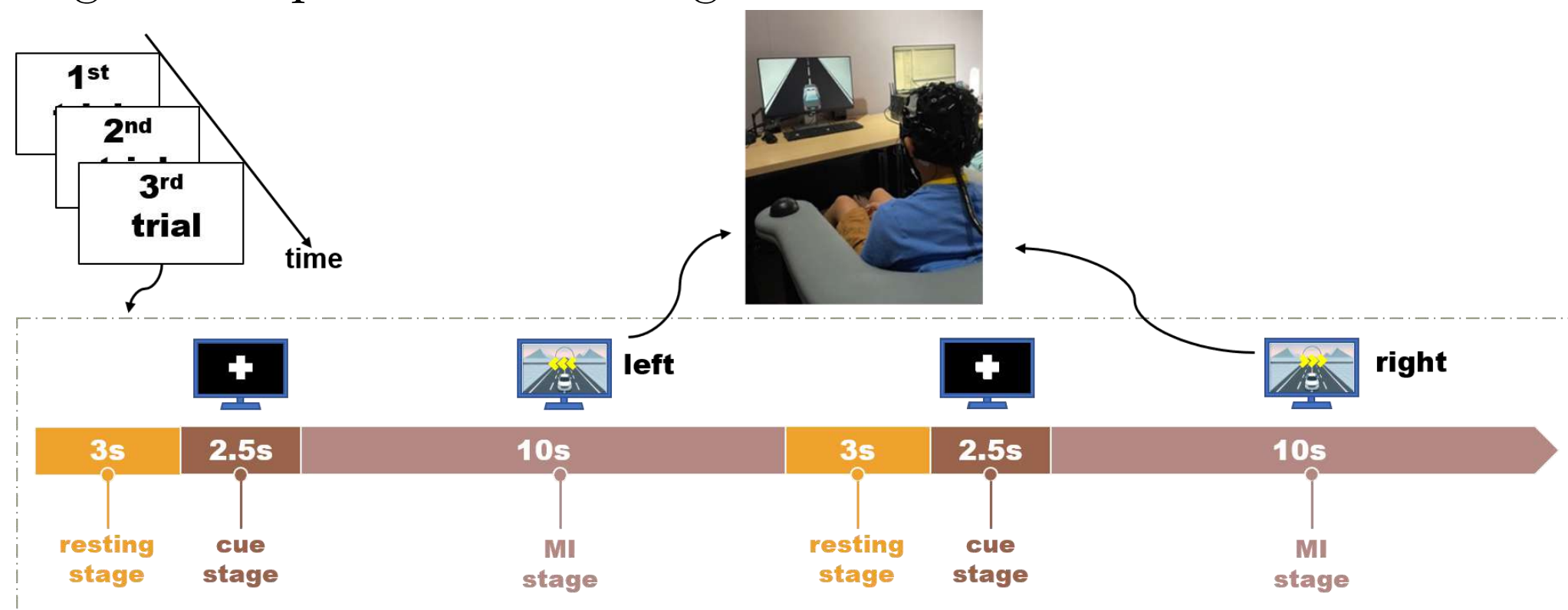
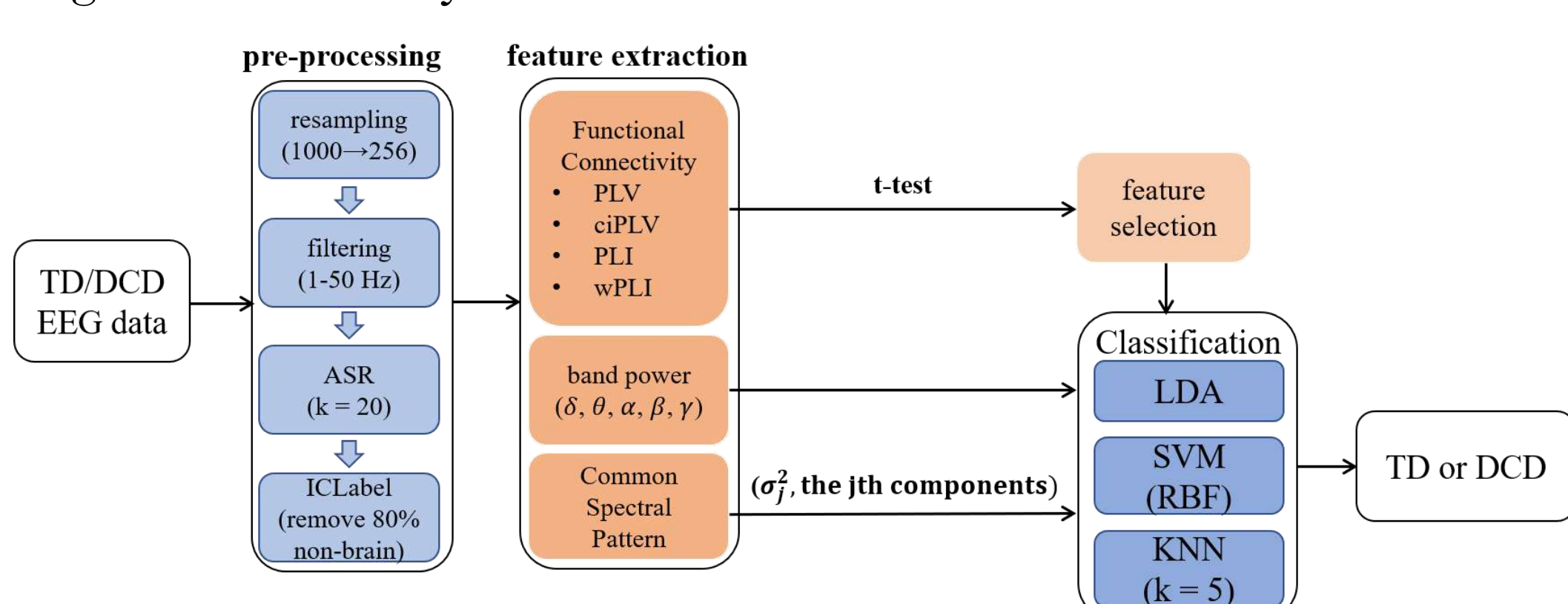


Figure 2. MI-BCI System Overview



4 Results

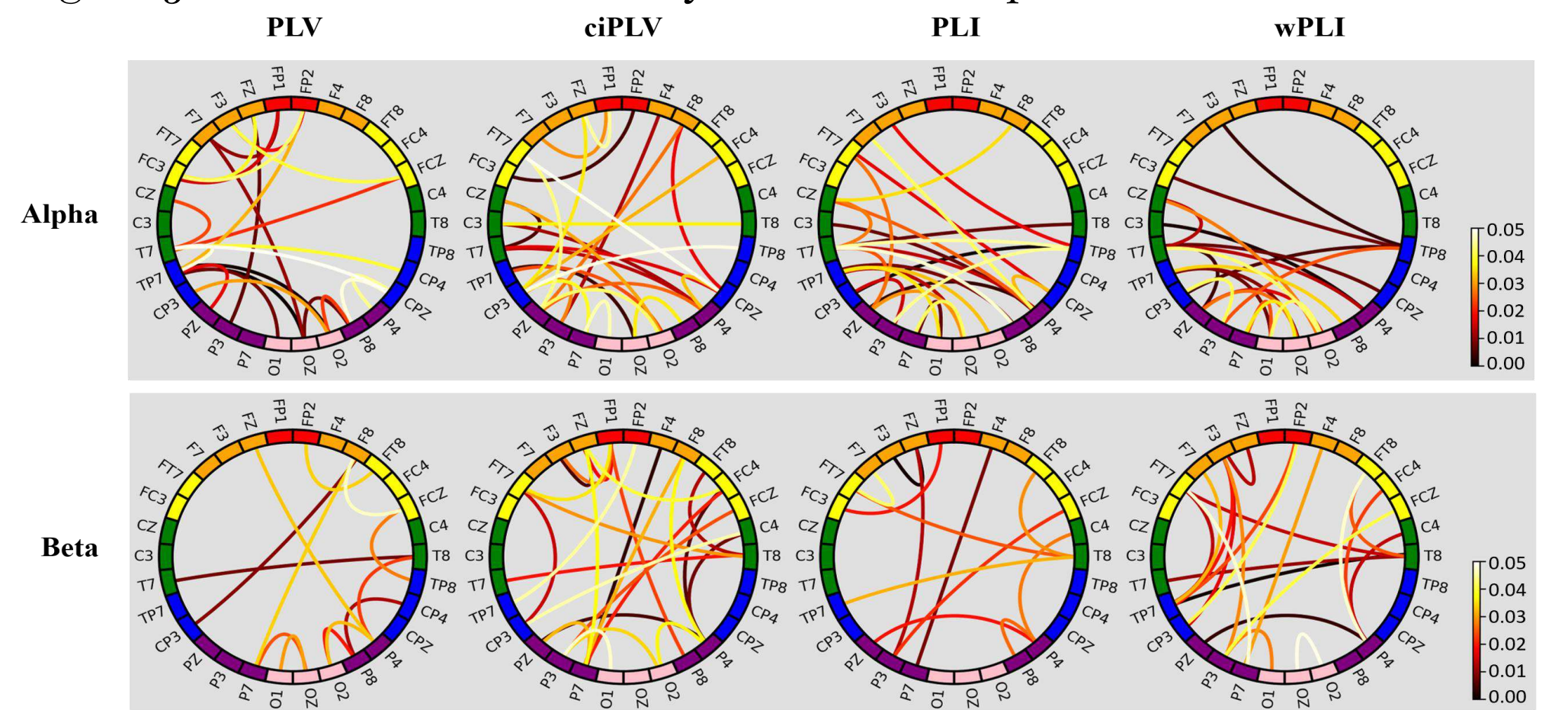
Among the tested features, Mu and Beta functional connectivity demonstrated the highest classification performance across models, with an accuracy of 0.89±0.03 and F1 score of 0.85±0.04 (Table 1) using the SVM classifier.

As shown in Figure 3, these connectivity patterns in Mu and Beta bands exhibited significant differences ($p < 0.05$) between DCD and TD groups, particularly in the contralateral motor-related cortical regions during right-sided MI tasks.

Table 1. Accuracy and F1 Score of Different Features

Features	LDA	SVM	KNN
CSP	0.58±0.03 (0.20±0.12)	0.58±0.03 (0.27±0.12)	0.54±0.05 (0.23±0.13)
Band Power	Mu 0.64±0.06 (0.50±0.09)	0.58±0.02 (0.08±0.08)	0.55±0.05 (0.41±0.08)
	Beta 0.62±0.07 (0.48±0.10)	0.58±0.03 0.06±0.07	0.55±0.05 (0.42±0.07)
Functional Connectivity	Mu 0.76±0.04 (0.71±0.04)	0.87±0.02 (0.83±0.03)	0.81±0.02 (0.76±0.03)
	Beta 0.85±0.02 (0.81±0.03)	0.89±0.03 (0.85±0.04)	0.83±0.04 (0.79±0.05)

Figure 3. Functional Connectivity Patterns in Alpha and Beta Bands



5 Conclusions

This study developed a MI-BCI system that effectively identifies children with DCD through functional connectivity patterns, achieving high classification performance. The significant differences in Mu and Beta connectivity between DCD and TD groups establish a promising foundation for an objective, neuroscience-informed diagnostic approach. Future work will focus on validating these findings in larger datasets and exploring the potential of this system for early intervention assessment.

6 References

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- [3] A. M. Bastos and J.-M. Schoffelen, "A Tutorial Review of Functional Connectivity Analysis Methods and Their Interpretational Pitfalls," *Frontiers in Systems Neuroscience*, vol. 9, Jan. 2016, doi: <https://doi.org/10.3389/fnsys.2015.00175>.

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