

REBOOTING INFANT LEARNING USING THE SYNPHNE DEVICE: A SOLUTION FOR CHILDREN WITH READING AND COMPREHENSION CHALLENGES

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INTRODUCTION

- More than 80% of children who have Attention Deficit Disorder (ADD) and Dyslexia have reading and writing difficulties. In the USA, a staggering population of 14 million to 43 million respectively, have various levels of reading and writing difficulties. In the developing world, up to 17% of children have been reported to be facing similar difficulties.
- This feasibility study using the SynPhNe wearable system explores the effect of training children to maintain relaxed focus with the help of brain-

METHODS

TECHNOLOGY

- SynPhNe is a wearable, connected rehabilitation system which captures electroencephalography (EEG) and electromyography (EMG) signals in a time-locked manner and helps children "self-correct" movements and attention states in real-time using a specially designed user interface.
- This approach uses real-time feedforward and feedback to help maintain a relaxed, attentive brain state while executing tasks with appropriate muscle

muscle feedforward and feedback, and to utilize this while performing various tasks, including reading material appropriate for their grade level. The SynPhNe software user-interface mimics how infants learn, by leveraging sensory exploration and iterative goal-oriented learning.



Figure 1. SynPhNe System

strategies. This includes English reading and comprehension tasks.

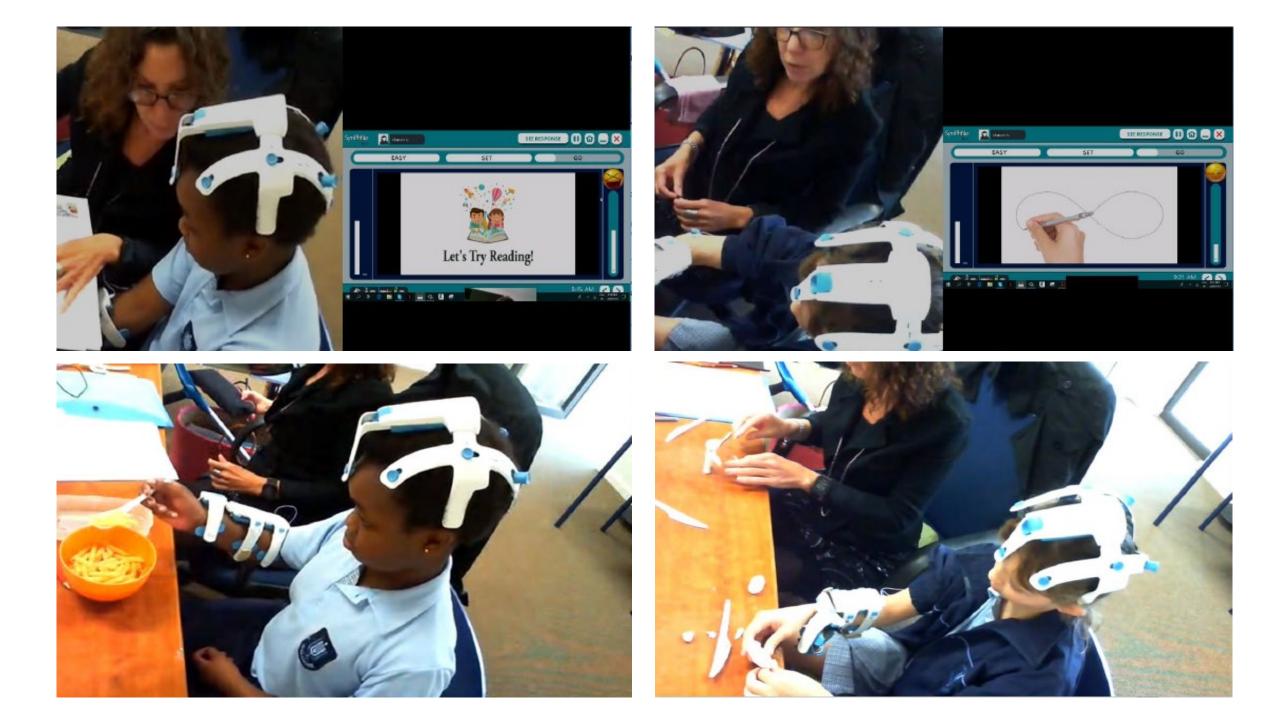


Figure 2. Setup of the feasibility study with SynPhNe device

RESULTS

CLINICAL SCORES OUTCOMES

• The primary outcomes were related to reading and comprehension, measured pre-trial and post-trial in age-months (TOWRE-2 SWE:

STUDY DESIGN

• Six English reading children with learning disabilities (135-153 months age; 2 females, 4 males) were recruited. Each completed ten sessions of forty-five mins each, over four weeks using the SynPhNe platform. Frequency was 2-3 sessions per week.

SMD=29.50, SD=14.75; TOWRE-2 PDE: SMD=32.00, SD=16.00; JCDHD Test: SMD=25.83, SD=12.92). A short-term memory test (VADS) was used as a secondary outcome measure (SMD=24.67, SD=12.33).

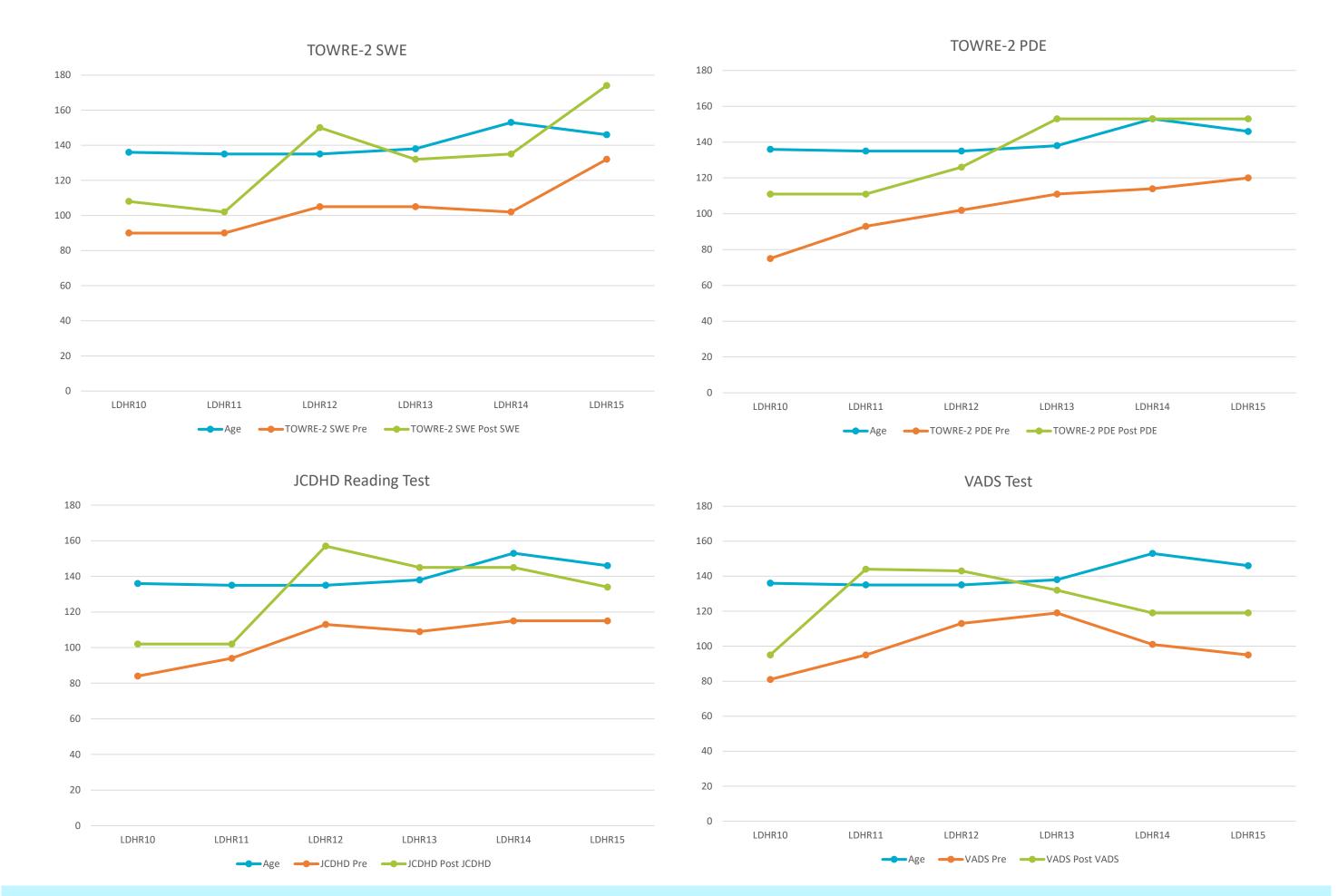


Figure 3. Pre-trial and Post-trial scores comparison with respect to Biological Age (months)

- The protocol included video-led feedforward of arm movements [Pronation, Supination, Wrist Extension and Wrist Flexion] and activities [Let's Make Something, Let's Read, Let's Write, Let's Draw and some ADLs] while they attempted to maintain a pre-calibrated agonist-antagonist balance and relaxed attentive brain state, using the biofeedback. The session was led by a specialist who trains attention deficit and dyslexic children and is a certified SynPhNe Trainer. Assessments were done by a blinded, independent educational psychologist. Parents provided signed consent.
- Primary outcomes were measured using the Test of Word Reading Efficiency, Sight Word Efficiency (TOWRE-2 SWE), Test of Word Reading Efficiency, Phonemic Decoding Efficiency (TOWRE-2 PDE) and J. C. Daniels and H. Diack Reading Test (JCDHD).
- Secondary outcome was measured using the Visual Aural Digit Span (VADS) test. Children were tested pre-trial and post-trial.

CONCLUSIONS

• Post-study participant testing indicated an overall mean of 28.00 agemonths improvement (SD=2.92) in reading and comprehension age.

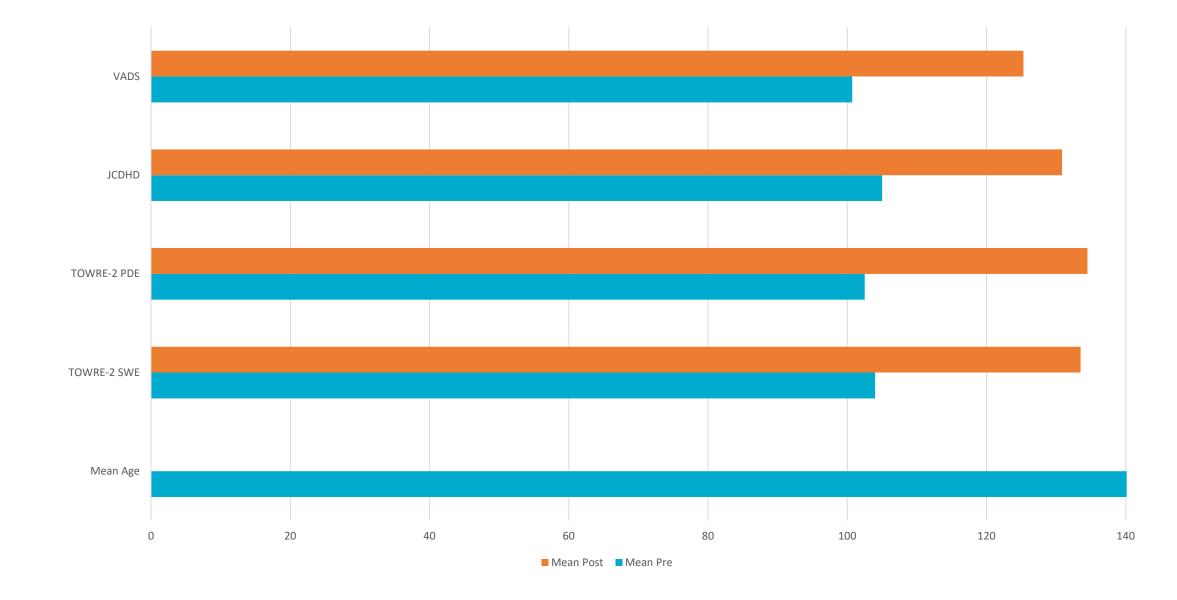
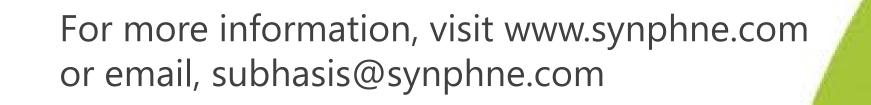


Figure 4. Mean Pre-Post trial scores with respect to Biological Age (months)

- Reading ability was largely maintained in a 3-month follow-up, while comprehension improved further in some cases.
- This indicates that the SynPhNe system is a promising new technology to be further tested in environments which serve children with reading and comprehension difficulties.

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