

Difficulty with Postural Control

Children who have poor postural control may sit in a variety of revealing positions.



Some children with low muscle tone or weak trunk or neck muscles sit with a rounded back and/or tilted pelvis, rest head on hand (interfering with use of the hand for stabilizing paper), or rest the upper trunk and both arms on desk top. Children who are having difficulty with maintaining a stable trunk position due to poor balancing of the muscles (cocontraction) or inability to inhibit unnecessary trunk movement may move constantly in the chair. Children with poor balance might use one or both arms (resting on floor or holding onto chair) to maintain the body in an upright position, which interferes with use of the arms for manipulative activities. Children who have difficulty with trunk rotation or with refined movement of the head and trunk often move the head and trunk as a unit with little rotation at the neck or waist.

Poor postural control can be due to a number of causes, including abnormal muscle tone, weakness, poor ability to cocontract muscles, sensory-integrative disorders often associated with learning disabilities, delayed or slow development, or physical inactivity.

Slowly developing or motorically awkward children often have more difficulty inhibiting muscle activity and maintaining stable trunk postures than normally developing children. Postural control becomes more difficult for these children when arm movement is required, and even more difficult when weight is added to the arms. Normally developing children show decreased muscle activity in the trunk with age, as the muscles used for maintaining posture become refined and highly efficient. Slowly developing children, on the other hand, often do not show this increase in postural control, but continue to use excessive levels of muscular activity for maintaining trunk stability (Fisher 1983).