

The Primitive and Postural Reflexes

...and their effect on our physical, mental and emotional development

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Just what is ADHD?

Well, modern research tells us that for some folk the neurotransmitters are not doing their job. This can lead to a number of 'symptoms' and the adhesion of the label ADHD (Attention Deficit Hyperactive Disorder): The good news is, it's not a life long sentence.

Children (and many adults) are given the label of ADHD be-

cause they exhibit some or all of the following:

- Have difficulties concentrating, reading, writing and learning in general
- Often fidgeting with hands or feet, or squirming while seated
- Having difficulty remaining seated
- Being easily distracted by extraneous stimuli
- Having difficulty awaiting turn in games or group activities
- Often blurting out answers before questions are completed
- Having difficulty in following instructions
- Having difficulty sustaining attention in tasks or play activities
- Often shifting from one uncompleted task to another
- Having difficulty playing quietly
- Often talking excessively
- Often interrupting or intruding on others
- Often engaging in dangerous activities without considering possible consequences
- Often not listening to what is being said
- Often forgetting things necessary for tasks or activities
- Lack of awareness of physical and social boundaries

Now, the **Primitive and Postural Reflexes (PPRs)** are involuntary movements present before proprioception develops. It is through and because of the PPRs that proprioception is developed. These involuntary movements are triggered by either sensory input or by movement of the head. There are many of these reflexes, the majority of which 'emerge' in utero. They emerge, develop, peak, perform their task and then integrate into, and help to develop the whole being. The infant is born with an innate desire to walk and talk.

The PPRs encourage certain and specific movements and actions. The continued repetition of the action/movement 'teaches' the being how to perform the action voluntarily, at will. For example the Sucking reflex causes us to suck.

The infant sucks and sucks and by so doing learns how to suck. Having learned how to suck, the infant no longer requires the assistance of the reflex and the reflex 'integrates'.

Problems arise when the PPRs are:

- weak
- early
- late
- retained; i.e., do not integrate

In fact, as you will see, many of the 'symptoms' of ADHD can be the result of retained reflexes. In this lecture we address four of the PPRs and the ramifications if they are retained.

The Moro Reflex is the startle reflex, the early 'flight/fight' response; it is the infant's first form of defense. When startled the infant throws out its arms and legs and screams; then it recoils into the fetal position. The Moro has three main components: visual, auditory and kinesthetic. It assists the development of our breathing reflex and is crucial in the first breath at birth.

If the Moro retains:

- concentration will be poor; the child always on edge, on the alert to danger perceived or real.
- a nervy disposition can result with adrenalin and cortisol almost constantly running through the body. This results in a poorly developed immune system.
- whenever a bird flies past the window the child unconsciously has to investigate; any sound draws the attention as it too could be a threat to his or her safety.
- visual and auditory systems remain immature.
- child exhibits hyper-sensitivity and hyper-reactivity, impulsive behavior.
- child can be socially and emotionally immature.

The Spinal Galant Reflex assists with the birthing process. In conjunction with the womb it helps us to 'wiggle' down the birthing canal.

If the Spinal Galant retains:

- the child cannot sit still; this is the 'Wiggler'
- child fidgets
- bedwetting is often a problem
- often the cause of social isolation
- concentration is poor

The Asymmetrical Tonic Neck Reflex (ATNR) generates the first 'kicks' that the mother feels when 18-20 weeks pregnant. It helps to develop vision, balance and the auditory system. It teaches the infant to roll and brings the individual to the lateral midline.

If the ATNR retains:

- vision can remain monocular
- a homolateral state remains
- swimming is nigh on impossible
- handwriting and written expression is poor
- hemispheric integration can be at a low level
- there is 'clumsiness' with poor balance and stilted gait
- the midline remains a barrier to learning and good co-ordination
- the individual can experience anxiety due to indecision

Notes:

The Symmetrical Tonic Neck Reflex (STNR), as with all the neck reflexes, adds strength and integration to the neck muscles. It teaches us to rock as a pre-cursor to crawling. Whilst rocking the infant is developing binocular vision, balance and the vestibular system and integrating all this with the large muscles that run the body; developing strength and co-ordination against gravity. Integrating: vision, balance and movement.

If the STNR retains:

- hand-eye co-ordination is poor
- reading is inhibited
- balance is poor
- spatial awareness doesn't develop
- concentration and focus are below par
- binocular vision and depth perception will not mature
- poor posture will result; with slumping at the desk
- the individual is slow on the uptake and at copying tasks

When we compare the traits and symptoms of ADHD with the effects of retained reflexes the similarities are evident. The reflexes fall into the physical side of the triangle. They are an important facet of assisting children (and adults) to become wholly integrated beings. Until the reflexes are integrated physical and emotional imbalances will continue to occur.

In your handouts you will find some simple activities to assist the integration of the Primitive and Postural Reflexes described above. They are helpful not only when dealing with ADHD. In other words these activities help with any of the above ramifications of the above 'retained' symptoms.

Over the years, in clinic, I have found when working with the reflexes that it is great to integrate and balance the reflexes but the individual still needs to do the movements to complete and consolidate the balance.

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