

## Enabling Motor Functioning in Children with Visual Impairment and Cerebral Palsy

<b>REFLEXES</b>	<b>CONTRIBUTION</b>	<b>PERSISTS</b>
<u>Rooting</u> Stroke new born cheek Mouth will root Hand will flex to his open mouth	Develop opening of mouth and finding breast	Mouth opening is too strong and tongue retracts
<u>Sucking</u> Stimuli on upper lip.	Develops oral muscles, tongue placement and swallowing.	
<u>Gallant</u> Stimulate the lateral side of the spine. Incurvates on the same side	Unilateral trunk mobility and rotation. Breaks symmetrical movement of limbs	Can lead to Scoliosis
<u>Cross extension</u> Stimulate the sole of the foot. Other foot flexes to kick hand	Alternate extension tone of the lower limb. Prerequisite for mobility.	Prevents alternate movements
<u>Flexor withdrawal</u> Protective reflex. Withdraws from the stimuli by flexing.	Helps to develop balance between flexor and extension tone.	Prevents extensor, weight bearing ability.
<u>Moro</u> Sudden displacement of head position or loud sound. Hand and finger extends.	Develops extensor tone in hand and fingers.	Excess extensor tone prevents propping.
<u>Parachute</u> Extension of hands to weight-bear.	Saving reactions remain life time.	Support and extension Does not develop.
<u>Placing</u> Stimuli on the dorsal side of foot and hand Places hand or foot.	Place foot in standing. Support with hand in sitting and crawling. Flexion and extension.	Weight bearing in standing, sitting and crawling positions
<u>Primary standing</u> Extensor tone emerging slightly at knee and hip.	Balancing of flexor and extensor muscles.	No balance between flexors and extensors.
<u>Primary stepping</u> Extension of trunk and hip.	Co-ordination of muscles. Extension of toes.	No co-ordination.
<u>Positive supportive</u> Weight bearing on foot.	Antigravity muscles work to fix joints.	Excessive tone, adduction internal rotation. No proper weight bearing.
<u>Landau</u>	Extension of the whole body	Cannot break the flexion.
<u>Symmetrical tonic</u>	Flexion of upper and extension of lower limbs, vice versa.	Cannot come to crawling position

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<u>Asymmetrical tonic neck reflex</u>	Extension of hand and leg and flexion of hand and leg on the occipital side.	No midline, bilateral hand activities.
<u>Grasps</u> Hand Foot	Involuntary holding Coordination eye hand	No release
<u>Righting Reaction</u> Neck Body Righting on body Head Righting	Rotation of Neck Rotation of the body Rotation - Orientation in Space	No rotation No rotation No orientation