

# Some Recommended Techniques for Physical Handling of a Child with Cerebral Palsy

**Any handling of a child with cerebral palsy should first be demonstrated by a qualified person.**

**Relaxing** All handling must start with the child in a relaxed position. All movement must be done *slowly*.

1. To rotate the trunk, gently push the child's shoulder forward with the *palm* (not fingertips) of your hand. Do both shoulders to bring hands to the midline. This technique can also be used to open a clenched fist.

2. Also, to open a clenched fist, you can gently push down on the top of the child's clenched hand with the *open palm* of your hand.

3. To flex a child's head, gently push forward *from the crown* of the head, never the neck.

**Positioning** Whether in a wheelchair or at a desk, the child should be positioned *symmetrically*. Pillows or bolsters made from rolled up towels or diapers are used to support the trunk and to center the child in the chair. Feet must be supported, never left dangling. Children should be secured in wheelchairs with a standard seat belt. Tying children into chairs restricts mobility of the upper torso, constricts breathing, and poses a safety hazard in the event the child must be removed from the chair quickly (e.g., fire). The position must (a) be comfortable for work and learning, (b) minimize balance difficulties, (c) enable use of the hands to the best advantage, and (d) be the easiest for eye-hand coordination. A lap board not only helps keep the child in position, but provides a working surface on which to place instruments and books.

**Carrying** Small children without braces can be carried most easily in a way that allows arms and legs to be controlled from flinging. Pick up the child from behind, positioning your arm under the hips so that the child's knees can bend over it. Hold the child close to your body so that you can wrap your other arm around the child's shoulders to control arms that are likely to fling outward when the head is turned.

**Lap Sitting** There are two ways to hold a small child in your lap for rocking, swaying, and so forth.

1. You can face the child away from you, supporting the back with the trunk of your body.

2. You can seat the child facing you with legs on either side of your hips. If sitting on the floor, you can get the child into this position by first laying the child on his or her back on your outstretched legs. Slowly bend your knees, gradually bringing the child to a sitting position, again with legs on either side of your hips. The child's back and head are supported by your thighs. Control arms from the shoulders if needed.

**Motor Skill Assistance** When a child who is hemiplegic uses a good hand to reach out and grasp (e.g., an instrument or beater), the arm on the affected side of the body is likely to react by flinging up or clenching the fist. To relax, turn the *arm out and up at the shoulder*, keeping the *elbow straight* and the *palm up and open*. If the child uses the open palm for support, it will help to maintain this position.

Practice movement patterns that will be required *before* giving the child an object or instrument for manipulation. This helps the child to control muscle function and reduces the tension brought on by the excitement of the activity.

Some children, such as those with athetosis, (i.e., athetoid) have involuntary movements that interfere with motor responses. Chances for success are enhanced by providing stability, such as holding the child's legs together as she or he plays an instrument (e.g., resonator bells). This makes it easier for the child to hold head and arms steady and will improve the ability to grasp and manipulate an instrument.

In handling an instrument or other object to a right-handed child, approach directly in front but just to the left of midline (just to the right, for a left-handed child). It will then be unnecessary for the child to turn his or her head, which can cause extension and involuntary movements.