Leckey Clinical

# Head Control

## Assessment Guide

**in the development of head control for children with Cerebral Palsy.**

From the maintenance of static equilibrium to development of dynamic, reactive control.

### 1 Can the child hold their head in midline when in a supine position?

The head may assume an asymmetric position in supine due to the effect of gravity or tone. Achieving midline requires neck muscle activity indicating the early development of postural control.

### 2 Can the child lift their head from supine/prone?

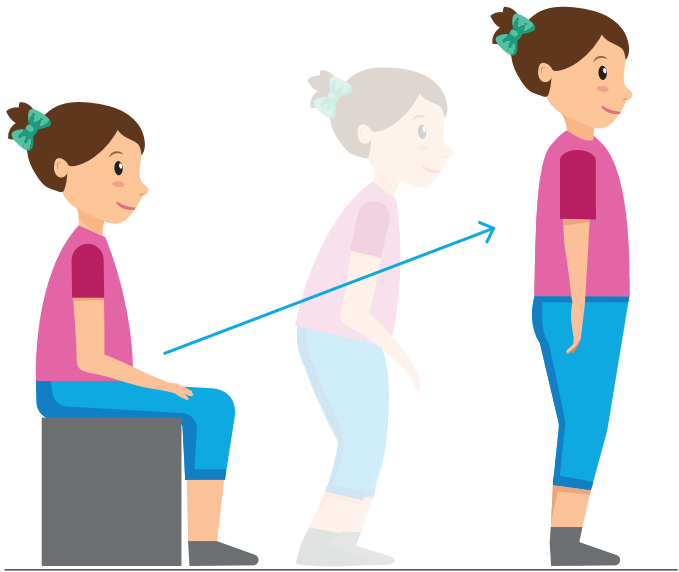
Anti-gravity control develops as muscle strength increases, enabling: chin tuck from supine / head lift from a prone. In pre-term children, persistent head lag and poor ability to lift the head whilst in prone are associated with poor motor outcomes.

### 3 Can the child hold and move their head from a neutral position, when held in an upright posture?

These skills develop due to a combination of increased strength and integration of reflex movements. Inability to maintain static head control is an early developmental concern.

### 4 Can the child visually track with or without head movement?

Head control enables the development of gaze control and in turn vision helps to control the head in space. Head control also precedes visual hand regard, intentional reaching, grasping, and hand-eye co-ordination.



### 5 Can the child sustain head lift during transition between positions?

Postural control requires stability of the entire body, including the head over the trunk. Head control facilitates development of vestibular function required for balance and movement. Consequently, head control contributes to the development of sitting and walking.

Supporting Children

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