Primary Reflexes

Identifying, understanding, and coping with them

Preliminary Note

The information in this note is for the purpose of understanding the value of this exciting and far-reaching area in a teaching context.

If you are interested in a training on specific issues relevant to your particular school, I shall be very happy to adapt the material as appropriate, given sufficient notice of your needs.

Overview

There is very strong evidence that inappropriate retention of primary reflexes is the underlying cause of a host of common learning problems, as well as an amazing range of behavioural traits.

Understanding what these reflexes are and what they do gives a deep insight into these issues, as well as many ways of successfully coping with the difficulties that children have with them.

On a personal note, and partly to illustrate the relevance of this area, when I first trained in reflex work it was with a view to helping other people, and so I was somewhat surprised to find that I had vestiges of five different reflexes myself, two of which were strongly retained. Although I have a strong academic background, the particular issues surrounding these reflexes explained a great deal about my difficulties with arts subjects, and my long-term awareness that I was in some sense a frustrated musician. Since I released those reflexes I have found myself open to whole new range of learning, and progressed in a way that I could not possibly have done beforehand.

The INSET training will include:

- Information on the reflexes and their purposes
- Physical and behavioural indicators of retained reflex activity, and some testing methods.
- Understanding the limitations these reflexes impose upon children
- Strategies for facilitating learning for children with retained reflexes
- Some movement exercises that have been found to be useful in helping to release the reflexes. I should add that specifically facilitating the release of a retained
reflex is a skill and process that requires extensive specialist training, so this naturally could not be covered in a one-day course.

One of the great learning experiences in this material is testing it on each other.

**Reactive Patterns**
We have all experienced automatic physical reactions – for example when you are cross you might tense up and grind your teeth, or when very frightened you might feel rooted to the spot and unable to move. Negative emotions tend to cause your posture to slump.

These physical responses are survival ‘programmes’, some inherited and some we have learned during our lives, that when triggered hijack our bodies, often in unhelpful ways.

In kinesiology we call these ‘Reactive Patterns’ – behavioural patterns into which we automatically drop in a given situation, and which deprive us of the neurological capacity to choose easily. In other words, we are in a reactive state rather than a proactive state. Reactive Patterns cannot usually be overcome by consciously trying, and often become further entrenched as repeated failure is experienced. All that can be done by conscious effort is to compensate for the pattern, impose ‘self control’, which sets up a neurological battle in the body.

**Primary reflexes**
One set of such Reactive Patterns is the Primary, or Primitive, Reflexes. In a normal baby, these are present at birth, and are an indication of normal neurological development. For example, the grasp reflex and the Moro reflex are usually tested at birth. They are short-lived – usually 6 to 12 months – following which the postural reflexes, which will stay for the rest of our lives, come into play.

Stimuli that trigger reflexes can include touch, proprioception (from movement of a part of the body, especially the head), sound or visual cues.

If a primary reflex does not go away, it remains in the developing child as a Reactive Pattern. When the relevant stimulus happens, the reflex will activate, and will continue to interfere with the normal neurological development of the child, usually for the rest of their life, unless it is identified and corrected.

**An example – Palmar Reflex**
Take, for example, a child with a retained palmar (grasp) reflex. When the palm is stimulated, the reflex will cause the fingers to grasp. As the child develops, she will learn to compensate by compelling the fingers to open, and oppose the reflex. However there will always be tension in the hand, as the reflex and conscious intention are in conflict.

Holding and using a pencil will be a difficult task, as the stimulation caused by the pencil will continually be triggering the flexion of the fingers. Thus children with retained palmar reflex will often have curious pencil grips and large, untidy handwriting with heavy pressure. Their hands tire quickly when writing. The concentration required to manipulate the pencil prevents an easy flow of thoughts, so
such children often have trouble expressing themselves creatively in writing, even though they may be very expressive orally or using a computer.

Some more detail on the main effects of other reflexes can be found in the table at the end of this note.

**Why learn about reflexes?**

The role of primary reflexes in learning problems is very fundamental, and when one understand the various reflexes and their effect, a remarkable range of observable behaviour in children and adults becomes immediately obvious.

Understanding of how a child can be neurologically ‘hijacked’ by these reflexes has a profound effect on one’s approach to teaching, and allows a range of otherwise incomprehensible difficulties to be identified and tackled. For example, the child with retained palmar reflex needs acceptance of the problem she has – she can’t simply 'try harder', or be repositioned to a more classically accepted posture, because the underlying reflex will not go away by merely trying. Working against the child’s neurology will only entrench stress and create learning blocks. This knowledge aids the teacher in developing strategies that circumvent the operation of the reflex, minimise the stress, and/or seek appropriate assistance to release the reflex.

The information is not challenging to learn, and indeed most people who learn about reflexes will start to recognise behavioural traits that they themselves have, and which are attributable to retained reflexes within their own systems. The material is thus professionally and personally relevant.

**What reflexes are there?**

Any reflex, when strongly retained, can have a very considerable impact on behaviour and learning. Frequently a child will display signs of a cluster of retained reflexes. The main reflexes that adversely affect learning, and some of their many effects, which I would cover in the training course, are:

<table>
<thead>
<tr>
<th>Reflex</th>
<th>Main effects</th>
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<tbody>
<tr>
<td>Fear Paralysis Reflex</td>
<td>Strongly affects behaviour at all levels - shyness, withdrawal, isolation, rigidity and inflexibility</td>
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<tr>
<td>Moro Reflex</td>
<td>Along with FPR has a very strong effect on behaviour – mood swings, temper, low self esteem, controlling behaviour, easily distracted, jumpy, allergies and sensitivities.</td>
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<tr>
<td>Tonic Labyrinthine Reflex</td>
<td>Affects spatial development and cross lateral development. One-sidedness – (e.g. very arty or very logical), balance problems, poor co-ordination, often dislike of sporting activities especially with balls, inflexibility along the superficial back line, spatial problems, short sight, hearing problems, disorganised.</td>
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<tr>
<td>Reflex Type</td>
<td>Description</td>
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<tr>
<td>Palmar Reflex</td>
<td>Affects fine motor co-ordination - pencil grip problems, difficulty in written expression, clumsiness, speech problems and stuttering</td>
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<tr>
<td>Plantar Reflex</td>
<td>Running/walking problems, tripping over</td>
</tr>
<tr>
<td>Babinski Reflex</td>
<td>Running/walking problems, tripping over</td>
</tr>
<tr>
<td>Spinal Galant Reflex</td>
<td>Causes restlessness and fidgeting, lower back and spinal problems, incontinence, difficulty internalising speech.</td>
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<tr>
<td>Symmetrical Tonic Neck Reflex</td>
<td>Inhibits cross lateral development and thus academic learning at all levels. Problems catching balls.</td>
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<tr>
<td>Asymmetrical Tonic Neck Reflex</td>
<td>Prevents cross lateral development and strongly impacts on academic and physical skills. Odd pencil grips, curious writing postures (paper often at 90 degrees), poor alignment skills, jaw and neck tension, also affects ability of eyes to cross the midline and thus interferes with reading.</td>
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<tr>
<td>Suck and Rooting Reflex</td>
<td>Closely related to the Palmar reflex. Thumb sucking, chewing pencils, nails etc speech problems, poor temperature control, weight problems, over-familiarity and clingyness.</td>
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**Further information**

For further information on arranging an INSET training, please feel free to ring me or e-mail me:

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