

Mini Me Yoga and Cerebral Palsy

What is Cerebral Palsy?

According to Cerebral Palsy (CP) is a lifelong condition that affects muscle control and movement, it is caused by an injury to the brain during and after birth (Scope, 2017; NHS, 2017). There are 3 types of CP:

- spastic cp
- dyskinetic cp
- ataxic cp

According to Scope (2017) children mainly have a combination of all three.

Barriers

Verschuren et al. (2012), Lindsay and McPherson (2012a), Davis et al. (2009) and Rocine et al. (2013) found that children with CP may experience social exclusion due to peers not including the child in activities. Staff may also be seen as barriers as they may be over protective and unsupportive. Lindsey and McPherson (2012) furthers this by stating that children with a disability are more likely to be bullied mainly from social exclusion. This links with Maslow's (1971) hierarchy of needs as children need to feel that they belong in order to develop. However, Lindsay (2016) and Tonkin et al. (2014) found that children may exclude themselves and decide that they cannot fit in with others because they are different. This is reflecting the Medical Model of Disability as the child is using the disability as a barrier (Emens and Stein, 2016; Anastasiou and Kauffman, 2011).

What is Mini Me Yoga?

Mini Me yoga is a fifteen minute activity that focuses on bringing joy to children's lives and considering how other people may feel. There are different elements to this including, breathing, meditation, water and the yoga (Mini Me Yoga, no date). The yoga element uses different positions which are shown on individual cards to help to do the positions and think about the other elements involved with the Mini Me Yoga. According to Mini Me Yoga (no Date) and White (2009) these positions are flexible and inclusive to all children. Galantino et al. (2008) found that yoga can be introduced in schools and settings to improve overall health and increase fine and gross motor skills for children with CP.

Mini Me Yoga Continued

However, Kaley-Isley et al. (2010) suggest that in a school or setting there would be less one-to-one instruction which children with cp may need. Maintaining and encouraging physical activity may improve muscle strength, endurance and the range of motion in a joint, as well as, fostering independence, social and emotional wellbeing, therefore, improving the quality of life (Verschuren et al. 2012; Palisano et al., 2011; Saleh, 2009; Lindsay and McPherson, 2012b). However, Lindsay (2016) found that whilst physical activity can help children with CP it may also cause pain in hips, back and upper limbs. This could lead to feelings of frustration and social exclusion. White (2009) furthers this by saying that yoga should not cause pain and should not be a competition. The United Nations Convention on the Rights of the Child (UNICEF, 1990) and the United Nations Convention on the Rights of Person with Disabilities (United Nations, 2008) states that children have the right to enjoy a full and decent life. Therefore, by doing yoga it may improve their physical ability and improve their life (Lindsay and McPherson, 2012b). The Motor Learning Theory states that a particular movement can be done by many combination of muscle actions and children with CP may struggle to get the correct combination (Saleh, 2009). Therefor, by doing yoga it may consolidate the actions in the brain. Klaas et al. (2010), Majnemer et al. (2008) and Galantino et al. (2008) suggest that children with a physical disability tend to participate less in formal and structured activities. However, Palisano et al. (2011) and Majnemer et al., (2008) found that this was dependent on the physical and social ability of the child with CP, the higher the ability the more the child would participate. Furthermore, children may not have the same desire to participate for numerous of reasons including being self-conscious or not interested in the activity (Palisano, et al., 2011; Lindsay and McPherson, 2012b). However, Kaley-Isley et al. (2010) found that the environment may not be right for the child which may cause the child not to participate. On the other hand, Tonkin et al., (2014); Galantino et al., (2008) found that children with CP may participate in yoga as it is done in a familiar environment. According to Bandura (1997), the feeling of being self-conscious can be linked to Self efficacy which is children's ability to believe in themselves when doing a particular activity. Therefore, by having low confidence the child with CP would have low self-efficacy and not participate in the Mini Me Yoga (Palisano et al., 2011; Lindsay and McPherson, 2012b). The Mini Me yoga is designed to build self-esteem and confidence in children. Galantino et al. (2008) furthers this as they found that yoga reduces these feelings of anxiety and low self esteem. Whilst doing Mini Me Yoga the practitioner should focus on the child's abilities and not their disabilities by adapting some of the yoga positions and include more of the ones that the child with CP can do (Lindsay and McPherson, 2012b; White, 2009; Novak et al., 2013; Mini Me Yoga, no date). According to Saleh (2009) and Mini Me Yoga (no date) practitioners should be trained in yoga and working with children with CP to ensure that they can cater for the child's needs.

Lindsay and McPherson (2012b) and Lindsay (2016) found that children with a disability want practitioners to listen to them more and have knowledge of their disability. If the activity is not adapted then it would exclude the child with CP which reflects the Social Model of Disability (Emens and Stein, 2016; Anastasiou and Kauffman, 2011).

Conclusion

To conclude, CP is a lifelong condition that affects the muscles (Scope, 2017; NHS, 2017). This can cause children to be socially excluded from activities or physically unable to do the activities. Mini Me Yoga is a strategy that can be used to help reduce these barriers. Mini Me Yoga is a fifteen minute activity which has different elements including breathing, thinking about others and yoga (Mini Me Yoga, no date). Lindsay and McPherson (2012b) and Lindsay (2016) found that yoga can develop motor skills for children with CP. However, these activities would need to be adapted for the child. The Medical Model of Disability and the Social Model of Disability has suggested how either society or the CP may be a barrier to the child (Emens and Stein, 2016; Anastasiou and Kauffman, 2011).

Further Reading

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