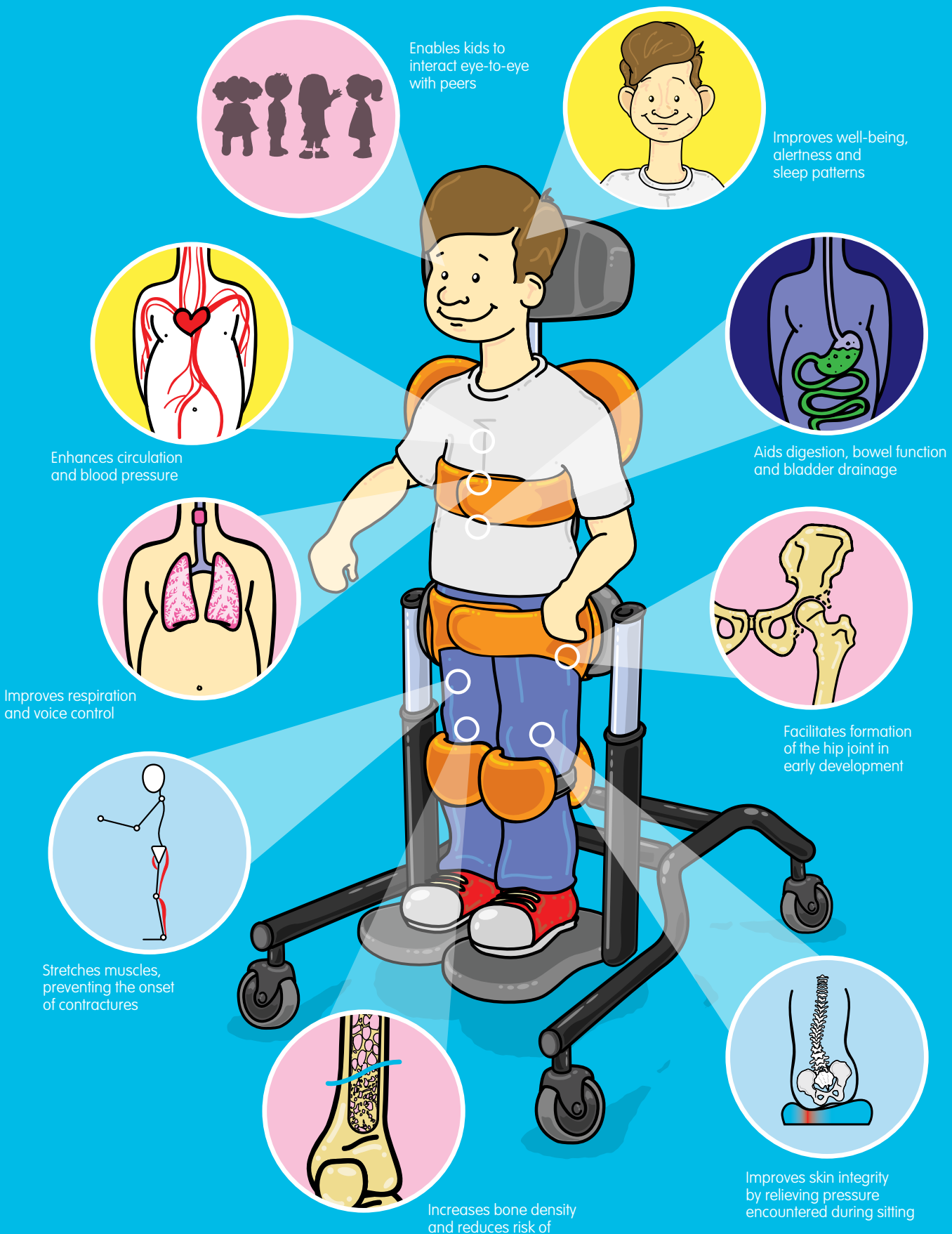
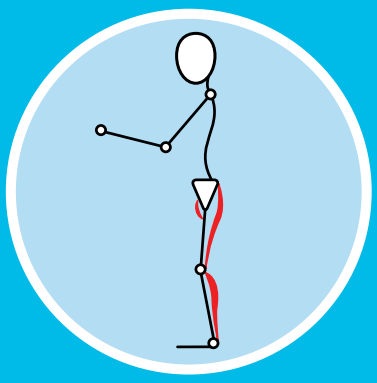
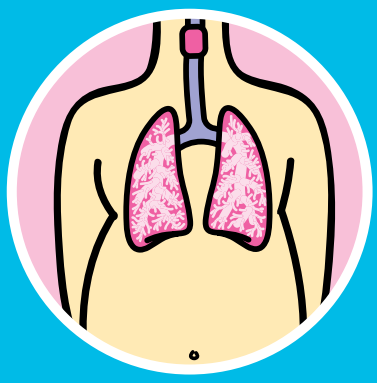
Why stand?


Enables kids to interact eye-to-eye with peers
Improves well-being, alertness and sleep patterns
Enhances circulation and blood pressure
Aids digestion, bowel function and bladder drainage
Improves respiration and voice control
Facilitates formation of the hip joint in early development
Stretches muscles, preventing the onset of contractures
Improves skin integrity by relieving pressure encountered during sitting
Increases bone density and reduces risk of fractures

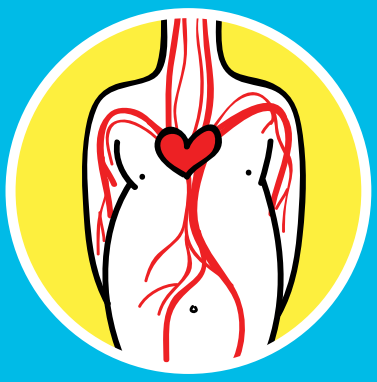
Standing increases bone density and reduces the risk of fractures.
Normal bone development needs a combination of good nutrition, weight bearing, e.g. through standing or walking, and the use of muscles. Research shows that standing improves the bone density of the pelvis and leg bones of non-ambulatory children, such as those with CP, Muscular Dystrophy, Spina Bifida or spinal cord injury.



Standing stretches muscles, preventing the onset of contractures.
Research shows that standing programs, if maintained, improve the extensibility of the hamstrings, increase range of movement and reduce the extent of spasticity. Standing also provides proprioceptive input to young developing muscles and joints, builds endurance and regulates resting muscle tone.

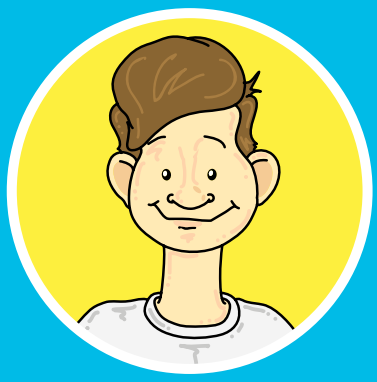


Standing improves respiration and voice control.
When we stand, the diaphragm has more room to expand and contract, meaning that we can breathe in and out more easily, deeply and efficiently. Therefore, standing allows individuals to speak with improved volume and voice control.

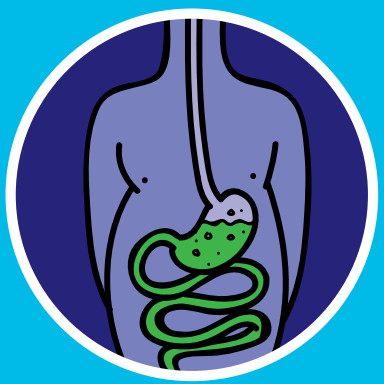


Standing enhances circulation and blood pressure.
Effective circulation is closely related to breathing. Standing results in improvements in blood pressure, heart rate and circulation, and a reduction in orthostatic hypotension and edema in the legs and feet.

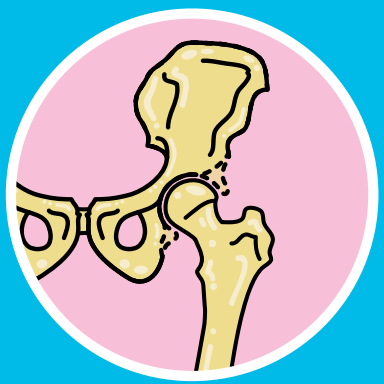
Standing enables kids to interact eye-to-eye with their peers.
Eye-to-eye interaction improves confidence, self-esteem and self-image as the child can accomplish tasks in the same manner as other students or siblings. Supported standing eliminates the fear of falling and so allows the individual to direct their attention towards learning and social interaction.



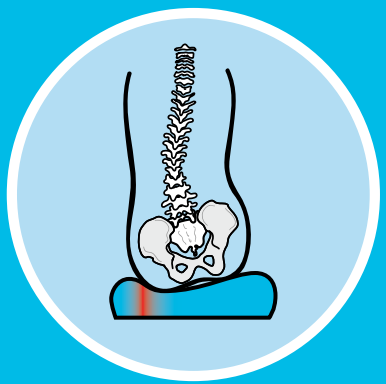
Standing improves well-being, alertness and sleep patterns.
Studies have reported improved sleep, decreased fatigue, increased alertness and feelings of well-being from regular standing. While standing, the effects of retained primitive reflexes such as symmetrical tonic neck reflex (STNR) and tonic labyrinthine reflex (TLR) are more controlled, and therefore, sensory organization, comfort, energy and attention are maximized.



Standing aids digestion, bowel function and bladder drainage.
Standing is believed to help with digestion and toileting through a combination of gravity and the activation of the stomach muscles. Studies have backed this up showing improved bowel regularity and clearance and better bladder awareness and emptying.



Standing facilitates the formation of the hip joint in early development.
Children who stand at the normal developmental age of 12-16 months are more likely to properly develop the ball and socket of the hip joint, which can prevent hip subluxation or dislocation. Standing from an early age also helps a child with standing transfers in the future.



Standing improves skin integrity by relieving pressure encountered during sitting.
As standing improves respiration, it allows more oxygenated blood to reach tissues which are subject to pressure when seated, resulting in fewer bedsores and improved skin integrity.